Risks for *C. difficile* infection in children with *diarrheal illness*:

A) **Antibiotic use within the past 30 days**
B) **Prolonged hospitalization (>7 days) or <72 hours from discharge following a prolonged hospitalization**
C) **Bowel surgery/GI tract manipulation** within the past 30 days
D) **Ongoing immunosuppressant medication use**, including chemotherapy
E) **Exposure to someone known to be colonized**, or known or suspected to have *C. difficile* infection

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Patient at risk for *C. difficile*

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Patient less than or equal to 12 months

Yes

**No testing indicated, received specimens subject to declination***

No

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Does patient have liquid diarrheal stool or is there a concern for *toxic megacolon*?

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Yes

**Test for *C. difficile* infection**Δ

No

**No testing indicated, received specimens subject to declination***

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*Physician will need to contact the Microbiology Laboratory if clinical indication remains

ΔIn patients with recurrent/persistent symptoms after therapy, retesting is not recommended until at least 4 weeks after the initial positive test

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Click icon above to access AAP policy statement on *C. difficile* infection in Infants and Children