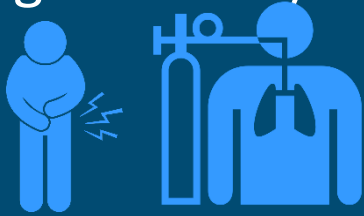




## ***Clostridioides difficile*** infection (CDI) (1 / 2)

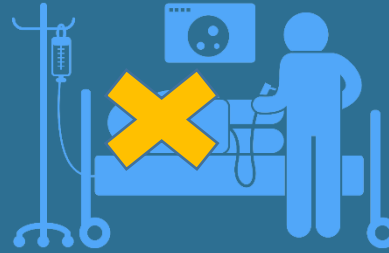
**Assess Severity of CDI**  
(peritonitis or multi-system organ failure) **1C**



**Diagnosis** should include lab + stool testing. Two-step tests increase accuracy. **1A**



**Endoscopy** to assess extent/severity is not recommended **1C**



**Radiology** evaluation has limited utility. **2C**



**Infection Control Measures** should be implemented **1B**



**Evidence-based Antibiotic Stewardship** can decrease CDI rates. **1B**





## ***Clostridioides difficile*** infection (CDI) (2/2)

**Oral vancomycin or fidaxomicin** is first-line treatment. *Metronidazole is no longer appropriate.* 1A



**Probiotics** may be useful in preventing (but not treating) CDI. 2A



**Surgery** reserved for colonic perforation or severe colitis not responsive to medical Tx



**Subtotal colectomy + ileostomy** is the procedure of choice 1C, though loop ileostomy and antegrade lavage may be an alternative. 2C



**Refractory cases** treated by: prolonged vancomycin ± bezlotoxumab or fidaxomicin or consider fecal transplant if other means fail 1B

