

INFECTIOUS DISEASES SOCIETY OF AMERICA EMERGING INFECTIONS NETWORK QUERY:

Pediatric Asymptomatic C. difficile Carriage

With increasing recognition of asymptomatic *Clostridium difficile* carriage among several infant and non-infant pediatric populations, questions have risen regarding whether screening for carriage plays a role in *C. difficile* infection (CDI) prevention. Although there are no current recommendations regarding testing, management, or benefit of infection control measures for such patients, there are anecdotal reports of practice variation.

The purpose of this survey is to understand current practices regarding pediatric patients with asymptomatic *C. difficile* carriage.

If you see pediatric patients at more than one institution, please respond based on your experience with your <u>primary hospital</u> (the institution at which you spend the most time).

References:

- Longtin Y, Paquet-Bolduc B, Gilca R, et al. Effect of detecting and isolating *Clostridium difficile* carriers at hospital admission on the incidence of *C difficile* infections: a quasi-experimental controlled study. JAMA Intern Med 2016;176:796–804.
- Hourigan SK, Chirumamilla SR, Ross T, at al. *Clostridium difficile* carriage and serum antitoxin responses in children with inflammatory bowel disease. Inflamm Bowel Dis 2013;19(13):2744-52.
- Dominguez SR, Dolan SA, West, K, et al. High colonization rate and prolonged shedding of *Clostridium difficile* in pediatric oncology patients. Clin Infect Dis 2014;59(3):401-3.
- Leibowitz J, Soma VL, Rosen L, et al. Similar proportions of stool specimens from hospitalized children with and without diarrhea test positive for *Clostridium difficile*. Pediatr Infect Dis J 2015;34(3):261-6.

EMERGING INFECTIONS NETWORK QUERY Pediatric Asymptomatic *C. difficile* Carriage

| Name: |
|--|
| 1. What test(s) are used to diagnose CDI in your primary hospital? [Select all that apply] Single test |
| |
| 2. Does your primary hospital restrict <i>C. difficile</i> testing only to unformed stools? Yes N |
| 3. Does your primary hospital have age restrictions for <i>C. difficile</i> testing? Yes, we only test stools from children > months of age [Please specify age in months] No, we do not have age restrictions for <i>C. difficile</i> testing |
| 4. Which of the following statements applies to your institution's use of a multiplex GI PCR panel? We do not use a multiplex PCR panel to diagnose any GI pathogens We use panel only for non-C. difficile pathogens; C. difficile results are always suppressed We suppress the C. difficile result unless C. difficile testing is specifically requested by the clinicile. We report the C. difficile result from this panel even if C. difficile testing is not requested. Not sure |
| 5a. Are patients in your NICU tested for C. difficile? [Select all that apply] Yes, NICU patients may be tested for C. difficile asymptomatic carriage Yes, NICU patients may be tested for CDI (i.e. diarrheal illness caused by C. difficile) No, patients in the NICU are not tested for C. difficile Not applicable- there is not a NICU where I work |
| b. If yes, how are NICU patients testing positive managed? [Select all that apply] Contact isolation Requirement for single patient room or patient cohorting Antibiotic treatment to eradicate C. difficile carriage Antibiotic treatment for CDI (i.e., diarrheal illness caused by C. difficile) |
| 6. In your primary hospital, are pediatric patients tested for asymptomatic carriage of <i>C. difficile</i>? Yes, we test children for carriage irrespective of age Yes, we only test infants for carriage Yes, we only test non-infant children for carriage No, we do not test any patients for asymptomatic carriage- STOP HERE. Thank you. |

| 7. What type(s) of patients are tested for asymptomatic carriage? | [Select all that apply] |
|---|--|
| Malignancy or bone marrow transplant patient | |
| Other immunodeficiency (e.g., patient with organ transplant or prediction of the property of the | |
| Other, <i>specify:</i> | |
| Not sure | |
| 8. Do any of the following actions occur when asymptomatic carriag | ge of <i>C. difficile</i> is detected? |
| Gloves required prior to patient contact | [Select all that apply] |
| Gowns required prior to patient contact | 11 73 |
| Requirement for single patient room | |
| Patient cohorting | |
| Bedside commode or dedicated toilet facilities | |
| Enhanced environmental cleaning (e.g., frequency and/or type of | disinfectant) |
| Antibiotic treatment to eradicate <i>C. difficile</i> carriage and/or preversible <i>Specify which antibiotic is most commonly prescribed:</i> | |
| Administration of probiotics | |
| None of the above | |
| Other, specify: | |
| Not sure | |
| 9. What actions are taken if a known asymptomatic carrier subsequ | ently develops diarrhea? |
| Repeat C. difficile testing [Select all the | at apply] |
| Empiric CDI treatment without repeat testing | |
| Depends on suspicion of other causes of diarrhea | |
| Other, specify: | |
| 10a. Are asymptomatic carriers reported to the National Healthcare | Safety Network (NHSN)? |
| YesNoNot sure | safety feetwork (fillsfi). |
| | |
| b. If YES, WHEN are asymptomatic carriers reported to NHSN? | |
| While asymptomatic | |
| Whenever they become symptomatic | |
| Not sure | |
| 11. Additional comments about this survey or about asymptomatic | carriage and testing: |