

LAB ALERT

Date: April 28, 2021

To: Nebraska Medicine Physicians & Staff and UNMC Medical Staff and House Officers, UNMCP Outpatient Clinics

From: Nebraska Medicine Clinical Microbiology

Effective May 3, 2021, Nebraska Medicine Microbiology will begin reporting the *Clostridioides difficile* target from our gastrointestinal pathogen panel (GIP). The GIP is a PCR based platform that detects 22 different diarrheal pathogens. It is important to note that detection of *C. difficile* by PCR cannot differentiate between colonization and active infection. PCR testing detects very low levels of *C. difficile* which may not be clinically meaningful. Therefore, all *C. difficile* positive GIP specimens will be reflexed to a *C. difficile* toxin EIA ("*Clostridium difficile* toxin assay, stool") order. *C. difficile* colitis and increased morbidity is strongly associated with toxin detection.

Please note that recommendations regarding management of patients with suspected *C. difficile* infection at Nebraska Medicine has not changed and the CDIF toxin assay should be the first test ordered in patients where *C. difficile* infection is suspected. PCR for *tcdB* (*C. difficile* toxin B) will still be performed in those cases where *C. difficile* antigen is detected but toxin is not detected. Nebraska Medicine CDI guidance can be found at the Antimicrobial Stewardship website https://www.unmc.edu/intmed/divisions/id/asp/protected-antimicrobials/docs/CDI_final.pdf

If you have questions or concerns please contact Kathie Rogers, PhD (402-552-3313 or katrogers@nebraskamed.com) or Paul D. Fey, PhD (phone 402-559-2122, pager 402-888-5626, email: pfey@unmc.edu)