

### ***Clostridioides difficile* (C. diff) Severity Scoring**

This score must be completed by the doctor for every new case of C. diff at the time of diagnosis and kept in the patient's case notes.

Score 1 for each parameter answered "Yes" (a score of 3 or more Yes's indicates severe CDI. If severe, obtain senior medical review immediately)

WBC > 15?	Yes	No
Temperature > 38.5°C?	Yes	No
Number of stools in previous 24 hours >5 episodes? (Bristol stool T5 / T6 / T7)	Yes	No Unknown
Hypotensive?	Yes	No
Creatinine > 50% baseline?	Yes	No Unknown
Abdominal signs indicating severe colitis?	Yes	No
Radiology evidence of colonic dilation or ileus?	Yes	No Unknown
<b>Total Score</b>		

### **Medical C. diff Checklist**

	Yes	No	Comments
C. diff treatment prescribed/commenced			
Medication review as per C. diff Management Guideline (Trust doc 1138)			
Patient planned to move to the C. diff cohort ward			If not suitable to move please state reason why?
Stool chart in use			
Isolated with Enteric Precautions			
Patient informed of C. diff result			

**Signature:**..... **Print Name:**.....

**Designation:**..... **Date:** (dd/mm/yyyy) .....

**Contact No:**.....