Laboratory Testing for Infectious Causes of Diarrhea

1 Community-acquired diarrhea, <7 days duration WITHOUT warning signs or risk factors for severe disease

- Testing not generally indicated

- If diarrhea persists:
  - Consider:
    - GIP / Gastrointestinal Pathogen Panel, PCR, Feces
    - CDFRP / Clostridium difficile Toxin Molecular Detection, PCR, Feces

2 Community-acquired diarrhea ≥7 days duration
OR
Travel-related diarrhea
OR
Diarrhea with warning signs/risk factors for severe disease

- GIP / Gastrointestinal Pathogen Panel, PCR, Feces
  - Consider OAP / Parasitic Examination if traveler with >2 weeks of symptoms

3 Health care-associated diarrhea (onset after the 3rd inpatient day) or patients with recent antibiotic use

- CDFRP / Clostridium difficile Toxin Molecular Detection, PCR, Feces

4 If diarrhea persists:
  - No additional testing required unless clinical picture indicates

5 Use clinical judgment to guide the need for additional testing.

1 This panel should NOT be used for chronic diarrhea.
2 Warning signs and risk factors for severe disease include fever, bloody diarrhea, dysentery, severe abdominal pain, dehydration, hospitalization, and immunocompromised state.
3 During the summer, consider ordering STFRP / Shiga toxin, Molecular Detection, PCR, Feces on children with diarrhea even if they don’t have frankly bloody diarrhea, are not toxic-appearing, and diarrhea has been present <7 days.
4 GI Pathogen Panel tests for common bacterial, viral and parasitic causes of diarrhea
5 Submit 3 stool collected on separate days for maximum sensitivity

Note: in outbreak scenarios with a known organism, consider ordering a specific test for that organism (CYCL / Cyclospora Stain, CYRPS / Cryptosporidium Antigen, Feces, GIAR / Giardia Antigen, Feces, bacterial stool culture)