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

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 / Clostridioides (Clostridium) difficile Toxin, Molecular Detection, PCR, Feces

If diarrhea persists:
- No additional testing required unless clinical picture indicates
- Consider:
  - STL / Enteric Pathogens Culture, Stool
  - GIAR / Giardia Antigen, Feces
  - LCMSP / Microsporidia species, Molecular Detection, PCR (immunocompromised patients)
  - OAP / Parasitic Examination
- Use clinical judgment to guide the need for additional testing.

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

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