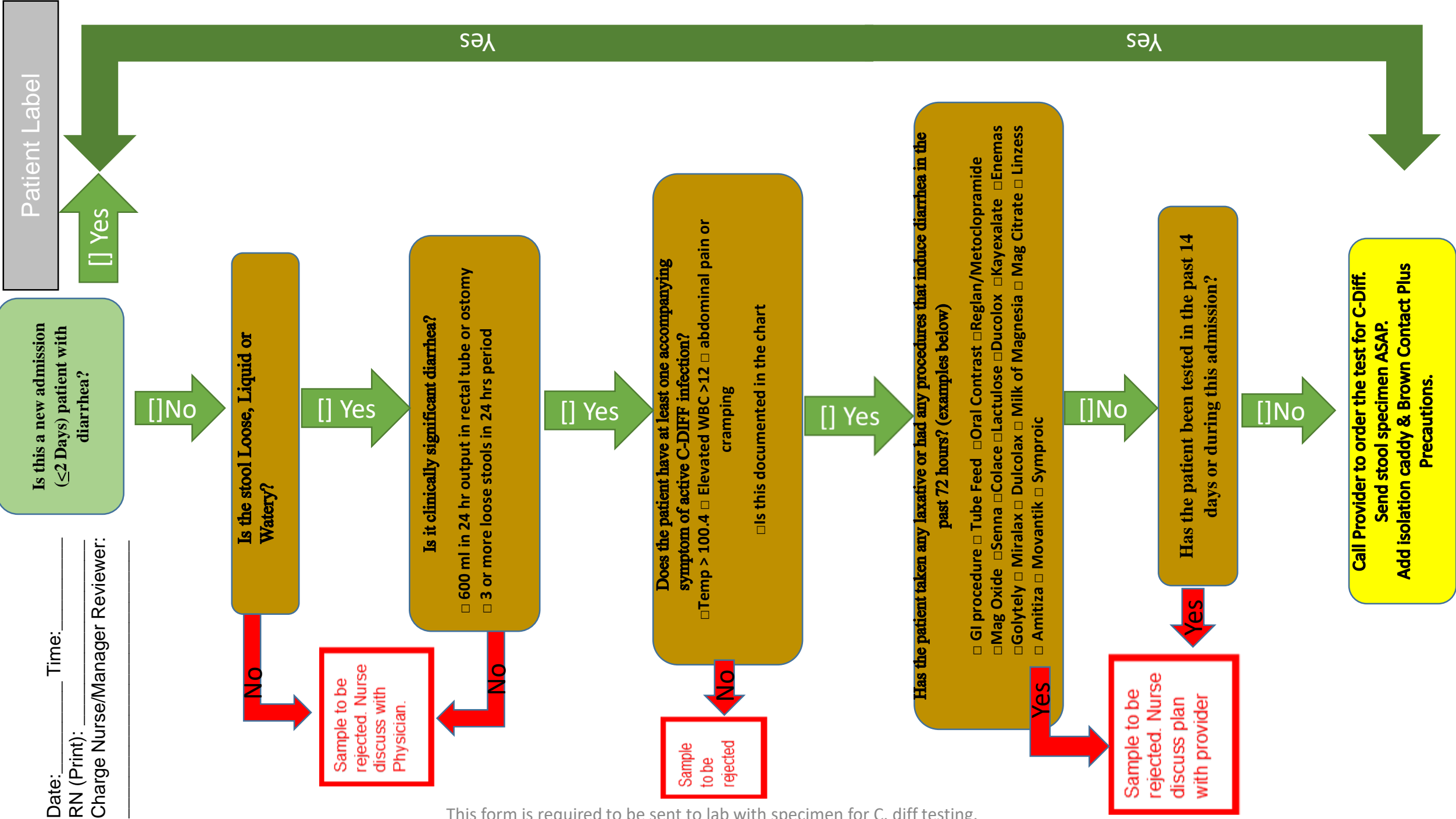


Date: _____ Time: _____
RN (Print): _____
Charge Nurse/Manager Reviewer: _____



This form is required to be sent to lab with specimen for C. diff testing.

Stool should be accepted if non formed- and consists of Bristol Stool Chart of 5, 6, or 7

LET'S TALK
about Bowel Control



NIDDK
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DIABETES AND DIGESTIVE
AND KIDNEY DISEASES



Bristol Stool Form Scale		
Type	Description	Image
Type 1	Separate hard lumps, like nuts	
Type 2	Sausage-shaped but lumpy	
Type 3	Like a sausage or snake but with cracks on its surface	
Type 4	Like a sausage or snake, smooth and soft	
Type 5	Soft blobs with clear-cut edges	
Type 6	Fluffy pieces with ragged edges, a mushy stool	
Type 7	Watery, no solid pieces	

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Laboratory
 Received Date/Time: _____
 Specimen Accepted: YES or NO
 Name: _____

Uncertain, Call Infection Prevention to Discuss.
 [Insert contact info here]

C-Diff is considered Hospital Onset if specimen is collected on or after calendar day 4 of hospitalization

This form is required to be sent to lab with specimen for C. diff testing.