

Nurses' Guideline for Management of Diarrhea

When a patient has greater than 5 loose stools OR greater than 750 ml of liquid stool in 24 hours:

- Review patient history to determine any pre-existing conditions that could cause diarrhea (i.e. Ulcerative colitis)
- Assess abdomen
 - o If distended, painful or tympanic contact physician
- Send stool for C. *difficile*
- Rule out stool impaction
- Hold laxatives / cathartic agents
- Consult dietitian regarding possible change of enteral formula
- Consider fecal incontinence management system according to unit protocol
- Consider use of a pre/probiotics such as pectin or VSL#3

If diarrhea remains greater than 5 loose stools OR greater than 750 ml liquid stool in 24 hours:

- Check results of C. *difficile* testing.
- If C. *difficile* negative contact physician for antidiarrheal agent for diarrhea (ie. Imodium, Lomotil)
- If C. *difficile* positive contact physician for C. *difficile* treatment orders.
- If not already in place, consider fecal incontinence management system according to your unit protocols.



