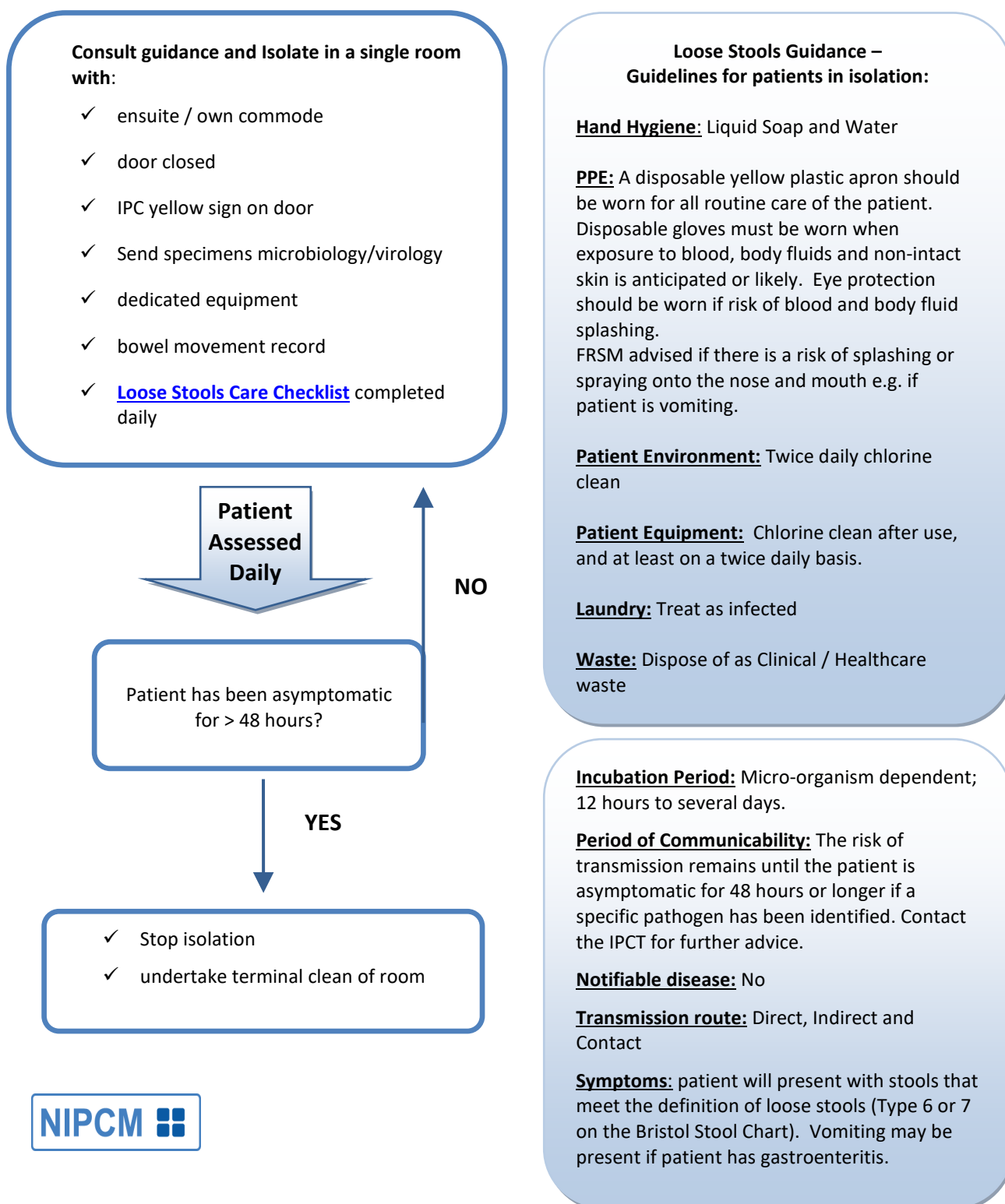


	NHS GREATER GLASGOW & CLYDE BOARD INFECTION CONTROL COMMITTEE	Effective From	October 2026
	LOOSE STOOLS OF UNKNOWN ORIGIN AIDE MEMOIRE	Review Date	October 2028
		Version	1
The most up-to-date version of this document can be viewed at the following web page: www.nhsggc.scot/hospitals-services/services-a-to-z/infection-prevention-and-control			

Loose Stool Aide Memoire



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Additional Inform

Clinical Condition	Loose stools 2 or more episodes Type 6 or 7 can be a symptom of gastrointestinal infection which is caused by a variety of bacterial, viral and parasitic organisms e.g. <i>Clostridioides difficile</i> , Norovirus, <i>Cryptosporidium</i> and <i>Campylobacter</i> . Other causes include medication, anxiety, food allergy or underlying medical condition.
Mode of Spread	Direct contact transmission Spread of infectious agents from one individual to another by direct skin-to-skin contact. Indirect contact transmission The spread of infectious agents from one person to another via a contaminated object. Contact transmission: Contaminated hands may also transmit the virus from person-to-person or equipment to patient/staff.
Patient Information	Inform the patient / parent / carer / next-of-kin (as appropriate) of the patient's condition and the necessary precautions.
Period of communicability	The risk of transmission remains until the patient is asymptomatic for 48 hours or longer if a specific pathogen has been identified. Contact the IPCT for further advice.
Persons most at risk	Generally, the most vulnerable are the immunocompromised. The very young and the elderly are also extremely susceptible.
Specimens Required	A stool specimen is required. Send an adequate amount of faeces i.e. half-full container. Specimens should be sent for routine culture and sensitivity (C&S), <i>Clostridioides difficile</i> Infection (CDI) and virology. If 1 st specimen is negative for C&S and the patient continues to have loose stools/diarrhoea and an infectious cause is strongly suspected, two further specimens, taken on separate occasions at least 24 hours apart, should be sent for testing.
Stool Charts	It is the responsibility of staff within the area to record type and frequency of stool using the Bristol Stool Chart.
Terminal Cleaning of Room	Please refer to NHSGGC Terminal Clean of Ward/Isolation Room SOP
Visitors	Visitors are not required to wear aprons and gloves unless they are participating in patient care. They should be advised to clean their hands with soap and water when leaving the room / patient. If visitors are taking laundry home they must be provided with a Washing Clothes at home Leaflet