



Objectives: Diarrhea

1. In all patients with diarrhea:
 - a. Determine hydration status
 - b. Treat dehydration appropriately
2. In patients with acute diarrhea, use history to establish the possible etiology (e.g. infectious contacts, travel, recent antibiotic use, common eating place for multiple ill patients).
3. In patients with acute diarrhea who have had a recent hospitalization or recent antibiotic use, look for clostridium difficile.
4. In patients with acute diarrhea, counsel about the timing of return to work/school.
5. Pursue investigations, in a timely manner, of elderly with unexplained diarrhea, as they are more likely to have pathology.
6. In a young person with chronic or recurrent diarrhea, with no red flag symptoms or signs, use established clinical criteria to make a positive diagnosis of irritable bowel syndrome (do not over-investigate).
7. In patients with chronic or recurrent diarrhea, look for both gastrointestinal and non-gastrointestinal symptoms and signs suggestive of specific diseases (e.g. inflammatory bowel disease, celiac disease or other malabsorption syndromes).

** Mapped to the CFPC's 105 priority topics: #27-Diarrhea