

ASCLS Mission:

The mission of ASCLS is to make a positive impact in health care through leadership that will assure excellence in the practice of laboratory medicine.



ADDITIONAL RESOURCES:

<https://www.webmd.com/digestive-disorders/digestive-diseases-diarrhea#1>

<https://www.cdc.gov/DiseasesConditions/>

<https://labtestsonline.org/conditions/diarrhea>

<https://www.mayoclinic.org/diseases-conditions/diarrhea/symptoms-causes/syc-20352241>

<https://my.clevelandclinic.org/health/diseases/4108-diarrhea>

REFERENCES:

WebMD— <https://www.webmd.com/digestive-disorders/poop-chart-bristol-stool-scale>

Lewis, SJ.; Heaton, KW. (September 1997). "Stool form scale as a useful guide to intestinal transit time". *Scand J Gastroenterol.* **32** (9): 920–4.

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Carlos CC, Saniel MC, Etiology and Epidemiology of Diarrhea. *Phil J Microbiol Infect Dis.* 1990; **19**(2):51-53.

DuPont HL. Persistent Diarrhea A Clinical Review. *JAMA.* 2016;**315**(24):2712–2723. doi:10.1001/jama.2016.7833

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The content in this brochure is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of your physician or other qualified health provider with any questions you

**Your Safety and Service Experience
Are Important To Us!**








Laboratory Patient Safety Tips:

Diarrhea & Stool Testing



What is diarrhea?

- Diarrhea is loose, mushy, semi-liquid or liquid stools (bowel movements). You have diarrhea if you have these types of stools three or more times in less than 24 hours.
- Acute diarrhea is diarrhea that lasts a short time (usually one or two days but may last longer). Chronic or persistent diarrhea usually lasts 14 days or more.
- Acute diarrhea lasting more than a few days may be a sign of a more serious problem.

DESCRIPTIVE CHART: STOOL TYPES	
TYPE 1 Separate hard lumps like nuts, difficult to pass	
TYPE 2 Sausage-shaped, lumpy surface	
TYPE 3 Sausage-shaped, surface cracks	
TYPE 4 Sausage or snake-like, smooth and soft	
TYPE 5 Soft blobs, clear-cut edges, holds shape (easy to pass)	
TYPE 6 Fluffy, ragged edges, mushy, does not hold shape	
TYPE 7 Watery, no solid pieces, entirely liquid	
TYPES 6 & 7 are usually classified as diarrhea.	

Stephen Lewis, MD and Ken Heaton, MD, from the Bristol Royal Infirmary, developed the original chart and stool type definitions from a 1997 study with the help of 66 volunteers.

What other symptoms might I have with diarrhea?

Other common symptoms that occur with diarrhea may include:

- Cramps or pain in the abdomen
- Urgent need to use the bathroom
- Loss of bowel control

If a virus or bacteria is the cause of your diarrhea, you may also have fever, chills and bloody stools.

Diarrhea can cause dehydration, which means that your body does not have enough fluid to work properly. Dehydration can be serious, especially in children, older adults, and people with weakened immune systems.

When should I see a doctor for diarrhea?

Although diarrhea is usually not harmful, it can become dangerous or signal a more serious problem. Contact your doctor if you have diarrhea and you have

- Signs of dehydration (decreased urine output, dark colored urine, fast heartbeat, dizziness or lightheadedness, dry mouth, sunken eyes, few tears when crying)
- Diarrhea that does not get better in
 - 5 days (ADULT)
 - 2 days (INFANT OR CHILD)
- Stools WHICH contain blood or pus or appear black in color
- Vomiting
 - ADULT: are unable to keep liquids down to keep you hydrated
 - BABY/CHILD over 3 months: if child vomits for more than 12 hours
 - BABY younger than 3 months: contact doctor as soon as vomiting or diarrhea begins
- Fever
 - 102^o F (ADULT)
 - 100.4^o F (CHILD)
- Recently traveled to a foreign country



What causes diarrhea?

The most common cause of acute diarrhea is a virus that infects your stomach. This type of infection is usually short term and resolves by itself. Other causes include but are not limited to:

- Infections (bacteria, parasites, and fungus)
- Problems with immune system or diseases that affect the stomach, small intestine or colon (i.e. Celiac disease, Crohn's disease, Whipple's disease)
- Foods (i.e. allergies, intolerances, artificial sweeteners)
- Medications (i.e. laxatives, antibiotics, chemotherapy, heartburn treatments, diabetic treatments, ibuprofen, thyroid treatments, heart disease treatments, birth control, anti-depressants)
DO NOT stop taking any medications without speaking with your physician first

What if my doctor orders stool testing?

In some cases, your doctor may order stool testing to determine what may be causing the diarrhea. Important information related to testing includes:

- Ask for complete instructions and lab containers to assure that the correct specimen is collected.
- Follow all collection instructions exactly. If you have questions on the instructions, be sure to ask.
- If containers have liquid in them, do not remove any of the liquid.
- If your diarrhea stops before collecting the specimen, call your doctor and tell them your diarrhea stopped. Most stool testing should only be performed on diarrhea type specimens. Testing on non-diarrhea specimens may give incorrect test results.
- Antacids, barium, bismuth, anti-diarrheal medication or oily laxatives should not be used prior to collection of the specimen.
- If a test is to be collected more than one time, verify when to collect (e.g. collect on separate days, collect on separate bowel movements).
- Collect stool specimen so it does not come into contact with urine, toilet water, or toilet tissue
- Return collected stool specimen to the laboratory as soon as it is collected.
- Make sure all containers are tightly sealed so they do not leak and that your full name, date of birth and collection date are written on them.