

- Diagnostic testing for *Clostridium difficile* is usually performed in a laboratory setting, however due to sample transportation and batching of specimens, there may be a significant delay between collection and availability of result.
- Rapid testing could allow clinicians to make better informed decisions about patient care including infection control precautions.
- The authors performed a real-world, feasibility study over 22 months (March 2011 to January 2013) in an older persons unit and Intensive Care Unit of a London hospital using a rapid polymerase chain reaction test to detect *C. difficile*.
- Turnaround times were significantly reduced from 18 hours to 9.1 hours. 330 patients tested with the point of care test (POCT) were less likely to have additional stool culture samples requested but there was no difference in other ancillary test ordering or other outcomes (length of stay and mortality).
- The POCT was simple to use providing sufficient training was given and staff felt performing the test was an acceptable part of their role.

This summary slide represents the opinions of the authors. Sponsorship for this study was funded by a grant from The Technology Strategy Board (Swindon UK) and by the National Institute for Health Research (NIHR) .For a full list of acknowledgments and conflicts of interest for all authors of this article, please see the full text online. Copyright © The Authors 2014. Creative Commons Attribution Noncommercial License (CC BY-NC).