**Supplemental Table 1. Clinical Scenarios of Clostridium-difficile Infection (CDI) Used in Delphi Survey to Determine Preventability of CDI by an Inpatient Antimicrobial Stewardship program**

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| **Type of CDI** | **Case Vignette** |
| **Community Onset CDI** | **A patient is admitted to Duke with an illness. He is diagnosed with CDI on hospital day 2. He has not had healthcare exposure in the last four weeks. In this scenario the antibiotic stewardship program could have prevented this case of CDI** |
| **Community Onset Healthcare Associated CDI** | **A patient is admitted to Duke for an illness. On hospital day 2 he is diagnosed with CDI. He was discharged from another hospital within the last four weeks. In this scenario the antibiotic stewardship program could have prevented this case of CDI** |
| **Hospital Onset, Absence of Antibiotic Exposure** | **A patient is admitted to Duke for an illness. During his hospital stay he is diagnosed with CDI. He has not received antibiotics in the last 4 weeks nor during this hospitalization. In this scenario the antibiotic stewardship program could have prevented this case of CDI** |
| **Hospital Onset, relapsed CDI** | **A patient is admitted to Duke for an illness, and concurrently has a continuing case of CDI. In this scenario the antibiotic stewardship program could have prevented this case of CDI** |
| **Hospital Onset, recurrent CDI** | **A patient is admitted to Duke for an illness, and concurrently ha a recurrent case of CDI (first diagnosis of CDI at another hospital 3 weeks ago). In this scenario the antibiotic stewardship program could have prevented this case of CDI** |
| **Hospital Onset, antibiotics deemed appropriate via ASP Review** | **A patient is admitted to Duke for an illness and receives antibiotics during this admission that would qualify for review by Duke’s antibiotics stewardship programs. Stewardship reviews the case and determines that the current antibiotics are appropriate and does not make changes. The patient develops CDI later during the hospitalization. In this scenario the antibiotic stewardship program could have prevented this case of CDI** |
| **Hospital Onset, ASP altered antibiotics but CDI occurred within 24 hours of antibiotic change** | **A patient is admitted to Duke for an illness and receives antibiotics during this admission that would qualify for review by Duke’s antibiotics stewardship programs. Stewardship reviews the case and determines that the current antibiotics are not appropriate and alters the regimen. The patient develops CDI within 24 hours of stewardship’s review. In this scenario the antibiotic stewardship program could have prevented this case of CDI** |
| **Hospital Onset, ASP changed antibiotics to another broad spectrum agent** | **A patient is admitted to Duke for an illness and receives antibiotics during this admission that would qualify for review by Duke’s antibiotics stewardship programs. Stewardship reviews the case and determines that the current antibiotics are not appropriate and changes the current antibiotic to another antibiotic that has an equal risk of inducing CDI. The patient develops CDI later during the hospitalization. In this scenario the antibiotic stewardship program could have prevented this case of CDI** |
| **Hospital Onset, ASP changes antibiotics to decrease the risk of CDI** | **A patient is admitted to Duke for an illness and receives antibiotics during this admission that would qualify for review by Duke’s antibiotics stewardship programs. Stewardship reviews the case and determines that the current antibiotics are not appropriate and makes changes that decrease the risk of CDI. The patient develops CDI later during the hospitalization. In this scenario the antibiotic stewardship program could have prevented this case of CDI** |
| **Hospital Onset, ASP considers antibiotics appropriate, but decreases duration of antibiotics** | **A patient is admitted to Duke for an illness and receives antibiotics during this admission that would qualify for review by Duke’s antibiotics stewardship programs. Stewardship reviews the case and determines that the current antibiotics are appropriate but shortens the duration of antibiotics. The patient develops CDI later during the hospitalization. In this scenario the antibiotic stewardship program could have prevented this case of CDI** |
| **Hospital Onset, patient does not qualify for ASP review** | **A patient is admitted to Duke for an illness and receives antibiotics during this admission that DO NOT qualify for review by Duke’s antibiotics stewardship programs. The patient develops CDI later during the hospitalization. In this scenario the antibiotic stewardship program could have prevented this case of CDI** |