

TB Suspect/Case Report and Plan

1. Check: **TB Suspect/ Case Report**

Tuberculosis Client Plan

Initial Report	/	/	/
Follow up	/	/	/
Transfer	/	/	/
Discharge	/	/	/

Name _____ AKA _____ DOB ____ / ____ / ____

SS# _____

Address _____ Tel# () _____

Race: White, non-Hispanic Hispanic Black Am. Ind/Eskimo Asian/Pacific Is. Specify _____ Other _____

2. DISCHARGE/TRANSFER

Facility Patient is Leaving _____ Date of Admission ____ / ____ / ____ Chart # : _____

Insurance Payor _____ Planned Discharge/Transfer ____ / ____

To be Discharged/Transferred to: Home Shelter SNF Jail/Prison Residential Facility Other _____

Address _____ Tel# () _____

At Discharge address are there: Children < 5 years Elderly Immunocompromised

Patient's follow-up appointment date: ____ / ____ / ____ Are finances a barrier to TB Treatment? Yes No

MD who has agreed to assume care _____ Tel# () _____

How many days of TB medications will patient have in hand at discharge/release? _____

Patient MUST have enough medication to last until follow-up appointment.

3. PHYSICIAN'S DIAGNOSIS

Active TB Suspect Active TB Pulmonary Extra pulmonary (site) _____

Symptoms: Fatigue Cough (duration _____) Weight loss (_____ lbs.)

Fever Night sweats Hemoptysis Other _____

If asymptomatic, reason for evaluation _____

Specimen #	Date Obtained	Source	AFB Smear	Culture	M.TB
	/ /				
	/ /				
	/ /				

Other Tests			
	Date Placed	Date Read	Results
TB Skin Test			MM
Chest X-ray (Attach Report)	<input type="checkbox"/> Cavitory <input type="checkbox"/> UNK <input type="checkbox"/> Infiltrate <input type="checkbox"/> Negative		
Immunocompromised?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
IDU ?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

TB Drug Sensitivities available? Yes No

If sensitivities pending give name of lab _____ Tel# () _____

Drug resistance: Yes No If yes, which drugs? _____

4. TREATMENT

Should case management include directly observed therapy (DOT) Yes No Explain: _____

Medications	Dosage	Date Started	Date Stopped	Reason for D/C
Rifater		/ /	/ /	
INH		/ /	/ /	
Rifampin		/ /	/ /	
Pyrazinamide		/ /	/ /	
Ethambutol		/ /	/ /	

From: _____ Date: _____

Tel: () _____ FAX: () _____

Send To:

Ventura County Public Health Specialty Clinic
 2500 South "C" Street, Suite "B-2", Oxnard, CA 93033
 Tel: 805-385-9451 FAX: 805-385-9445
 Weekend & off hours Tel: 805-656-9432

Legal Aspects of TB Reporting

Ventura County stories of lost or unrecognized TB cases abound. Two cases in the first three months of 1996 had been classically symptomatic for close to a year. Both had been to physicians repeatedly for non-resolving cough. One had an unrelated surgery, under general anesthesia, just weeks before she became a TB suspect. Both were abundantly smear positive for AFB on voluntary sputum collections.

Another case, in 1994, was diagnosed as a TB suspect, placed on medication and promptly lost to follow-up. The physician did not report. Many months later, gravely ill, with hemoptysis, a cavitary chest X-ray, and 4+ AFB on sputum smear, the patient was admitted to a local hospital. He hadn't been able to afford the anti-TB medications nor the office visits. These are the kinds of stories that motivated revisions of the Health and Safety Code (H&S) and the California Code of Regulations (CCR), Title 17.

Who reports and when

H&S Code, Section 121362 now says in part that health care providers, health facilities, and clinics (providing outpatient treatment for TB disease) shall promptly report to the Local Health Officer (LHO) when:

1. There are reasonable grounds to believe a person has TB.
2. A TB patient ceases TB treatment, including when the patient:
 - a. Fails to keep an appointment.
 - b. Relocates without transferring care.
 - c. Discontinues care.

Continuity of care

H&S Code Section 121361 describes the framework for the discharge/transfer plan, to be approved by the LHO before a TB case/suspect may be released from a health care facility.

Health Facilities

- A. Before discharge or release
 1. Notification and written treatment plan received by LHO
 2. LHO must review within 24 hours receipt of the plan during business week
 3. LHO approves written treatment plan
- B. Before transfer to another health facility
 1. Notification and written treatment plan received by LHO
 2. LHO must review within 24 hours of receipt of plan during business week
 3. LHO approves written plan treatment plan

C. Before transfer to a general acute hospital when there is an immediate need for a higher level of care

1. Notification & written treatment plan received by LHO.
2. (No approval required prior to transfer to higher level of care).

D. Before transfer to a correctional institution (state or local detention facility)

1. Notification & written treatment plan received by LHO unless this poses a threat to community or TB patient.
2. (Receiving facility will approve transfer.)

CCR Title 17, Section 2500 has changed TB to **24 hours** reporting status (within one working day). Section 2505 (On laboratories) now says in part; any result suggestive of TB (such as smear positivity) shall be reported to the County Health Officer in writing within 24 hours; when culture positive laboratory is to submit a culture from the primary isolate to the (Ventura County) Public Health Laboratory; if there are no susceptibility results on a strain obtained from the same patient within the previous 3 months the laboratory shall perform or refer for susceptibility testing.

Susceptibility results are to be reported to the County Health Officer within 24 hours; if there is resistance to at least INH and rifampin, one culture or subculture is to be submitted to the Public Health Laboratory.

Ventura County TB control has developed a FAXable form to facilitate TB reporting and to expedite the approval of the discharge plan. ***Please copy this form (see reverse) as needed or call our offices for a master copy at (805) 385-9451.***

Working together we can identify TB suspects early, foster adherence to the treatment regimen, prevent acquired drug resistance, shorten the period of communicability and reduce TB transmission in Ventura County.