Montana DPHHS – Tuberculosis Program

Tuberculosis Symptom Assessment

Use annually when client has a **documented** history of a positive tuberculin skin test (TST) or documentation of treatment of active tuberculosis disease. If client does not have documentation of TST, re-test. Documentation of disease can be obtained through local or state health departments.

	Today's Date
Facility	
Address	
Completed by	
Client Name	Job Title
Date & result of last TST (mm)	
Date & result of last chest x-ray	Facility x-ray taken
PULMONARY TB SY	MPTOMS ASSESSMENT
Signs & Symptoms	Duration & Description
Prolonged cough (≥ 2-3 weeks) with or without	
production of sputum that might be bloody	
Chest pain	
Chills	
Fever	
Night sweats	
Loss of appetite	
Unexplained weight loss	
Weakness or easy fatigability	
Malaise (feeling of general discomfort/illness)	
Diagnosis of community-acquired pneumonia	
that has not improved after 7 days of treatment	
	MENDATION he above symptoms/conditions, refer to health-care tuberculosis
DICK INTEGRALATION DREVIOU	IC DOCITIVE TUDED OUT IN CVIN TECT
RISK INFORMATION – FREVIO	US POSITIVE TUBERCULIN SKIN TEST
while greatest risk is in the first five years afte for LTBI is completed (Ignore BCG status):	of TB (Africa, Asia, Latin America, Eastern Europe); er entry to U.S., risk remains elevated unless treatment
2) Travel to a high-risk TB country within the last high-end accommodations); but refers to expo	st year; travel does not include strict tourism (staying in osure to native populations through work, volunteering s or more; Specify location, activity and length of stay:

Montana DPHHS – Tuberculosis Program

Tuberculosis Symptom Assessment - Continued

RISK INFORMATION - PREVIOUS POSITIVE TUBERCULIN SKIN TEST - Continued

3) HIV, injection drug use, or alcohol abuse; Specify: _____

4) Recent contact to known infectious case of TB;	; Specify:
·	r immunocompromising conditions that increase the
risk for progression to TB disease if already in	fected with latent TB (have a positive tuberculin skin
test):	-
Clinia al /Tonomo anno anciaina Canalitaiana	No constitutions
Clinical/Immunocompromising Conditions	Description
Silicosis	
Diabetes	
End-stage renal disease/chronic renal failure;	
Hemodialysis	
Some hematologic disorders (e.g. leukemias	
and lymphomas)	
Other malignancies (e.g. carcinoma of head,	
neck, or lung)	
Body weight <u>></u> 10% below ideal body weight	
Prolonged corticosteroid use	
Use of other immunosuppressive treatments	
(e.g. prednisone or tumor necrosis factor-alpha	
antagonists)	
Organ transplantation	
Gastrectomy	
Chronic malabsorption syndromes	
Jejunoileal bypass	
History of untreated or inadequately treated TB	
disease	
Radiographic findings consistent with previous	

RECOMMENDATION

TB disease

If medical conditions, history, or clinical findings are present that increase the risk of progression to active disease in persons with latent TB infection, or if a new exposure to active disease is high, strongly consider treatment of latent TB infection regardless of age

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