

## 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 \_\_\_\_\_ Title \_\_\_\_\_

Client Name \_\_\_\_\_ Job Title \_\_\_\_\_

Date & result of last TST (mm) \_\_\_\_\_ Facility TST placed \_\_\_\_\_

Date & result of last chest x-ray \_\_\_\_\_ Facility x-ray taken \_\_\_\_\_

### PULMONARY TB SYMPTOMS ASSESSMENT

Signs & Symptoms	Duration & Description
Prolonged cough ( $\geq$ 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	

### RECOMMENDATION

**If cough of 2-3 weeks or greater, plus any one of the above symptoms/conditions, refer to health-care provider for medical evaluation to rule out active tuberculosis**

### RISK INFORMATION – PREVIOUS POSITIVE TUBERCULIN SKIN TEST

- 1) Immigrant from county with high incidence of TB (Africa, Asia, Latin America, Eastern Europe); while greatest risk is in the first five years after entry to U.S., risk remains elevated unless treatment for LTBI is completed (Ignore BCG status): \_\_\_\_\_
- 2) Travel to a high-risk TB country within the last year; travel does not include strict tourism (staying in high-end accommodations); but refers to exposure to native populations through work, volunteering, traveling or living generally for several weeks or more; Specify location, activity and length of stay:  
\_\_\_\_\_

## 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: \_\_\_\_\_
- 5) Presence of the following clinical conditions or immunocompromising conditions that increase the risk for progression to TB disease if already infected with latent TB (have a positive tuberculin skin test):

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 $\geq$ 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	
Jejunioileal bypass	
History of untreated or inadequately treated TB disease	
Radiographic findings consistent with previous TB disease	

### RECOMMENDATION

**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**