

Diagnosis () Presumptive/Active TB - **notify your local health department ASAP**
() Latent TB Infection (LTBI), Active TB Disease ruled out.

*Treatment of LTBI _____

* Until Active TB disease is completely ruled out, DO NOT start patient on medications for treatment for Latent TB Infection (LTBI).

Treatment recommendations for Latent TB Infection: 1. A 9-month regimen of INH is considered optimal for both HIV-positive and HIV-negative adults; 2. A 6-month regimen may also provide sufficient protection. 3. Pyridoxine (Vit B6) is often given to reduce the incidence of INH induced peripheral neuropathy when INH doses exceed 5mg/kg or the patient has HIV, diabetes, alcoholism, malnutrition, pregnant, seizures. Core Curriculum on TB, 4th Edition, 2000. http://www.cdc.gov/nchstp/tb/pubs/slidesets/core/html/trans6_slides.htm

Monitoring Protocol

1. Baseline liver panel for patients with HIV, alcoholism, history of liver disorder, risk for liver disorder, pregnant and immediate postpartum
2. Monthly follow-up to evaluate adherence and signs & symptoms of active disease
3. Weekly to monthly (depending on meds) follow-up to evaluate for signs & symptoms of hepatitis

Physician _____ Phone _____

Your Local Health Department offers the following services for patients with Active TB Disease and Latent TB Infection (LTBI):*

1. Help obtaining anti TB medications
2. Regular monitoring of patient adherence
3. Regular monitoring of patient's for changing signs and symptoms of TB
4. Regular monitoring of adverse reactions to anti TB medications
5. Regular communication with prescribing physician

*If you are referring this patient to the health department for treatment monitoring please send the original Rx for INH and Pyridoxine (if prescribed) to your local health department or with the patient.

Please return this form to the _____
(Local health department name & contact person)