Tuberculosis

MSEC reviewed and approved 06/22/11

History Concerning for active TB:
TB converters in household, or contacts with active TB
HIV
Immunosuppression
Diabetes
Persistent (>3 weeks) cough
Fever
Night sweats
Weight loss
Infection that has not resolved with antibiotics
Chest x-ray: Consider radiology consult
- Upper lobe infiltrates
- Cavitation
- X-ray worse than clinical presentation

Is patient being seen at YKHC hospital?

- Yes → Place patient in simple surgical mask for transport to hospital and within hospital
- No → Call YKHC TB control officer or Bethel Public Health (543-2110) for advice

Age of patient

- < 6 years old → Place PPD or QuantiFERON blood test (QFT), contact YKHC TB officer, obtain pediatric consult, admit for gastric aspirate if PPD or QFT positive
- >6 years old ↓

Immediate continuous negative pressure respiratory isolation

- Patients admitted on respiratory therapy isolation relocated only with infection control approval
- Patient not to be transported out of room without surgical mask

Respiratory therapy to oversee sputum collection on first day of isolation (ER, clinic, or inpatient)

YKHC TB control officers
- Dr. Dan Hartman
- Dr. Elizabeth Roll
- Dr. Ron Bowerman
- Dr. Mien Chyi
- Infection control RN

Contact YKHC TB control officers if consult desired

Admit to hospital / Start 4 drug TB tx if clinically indicated

- Patients > 6 years old admitted to negative pressure respiratory isolation if tuberculosis is in differential diagnosis
- Consider tuberculosis if immunosuppressed (or on immunosupressive medication), diabetic, alcoholic, or cough greater than three weeks
- Place PPD or obrain QuantiFERON blood test (QFT) on admission if prior PPD or QFT negative
- Collect sputum X3 q 8-24 hrs for AFB smear and culture

- Respiratory therapy controls all hospital AFB sputum specimen collection and shipment to State Epidemiology Lab
- Each specimen 5 ml (free of tobacco, expectorated sputum)
- All sputum collection performed in negative pressure isolation room
- Minimum interval between specimen collection is 8 hours. Specimen must be labeled with name, date, and time
- State epidemiology reads specimen within 24 hours of receipt of specimen (Gold Streak speeds transport) Monday-Friday only after (before?) 3 p.m. 907-334-2105

AFB smear negative x3

Discontinue isolation, but be aware that minimally contagious, non-fectious tuberculosis or non-pulmonary tuberculosis may co-exist with other lung disease

State epidemiology lab will hold AFB specimens, and cultures may return positive up to 6 weeks after receipt

AFB smear positive

- Patient is infectious until negative AFB sputums. Home isolation may be advised.
- Maintain isolation as indicated
- Notify infection control
- Treatment required by DOT per national guidelines
- Consult YKHC TB control officer or state epidemiology for treatment guidelines

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This guideline is designed for the general use of most patients, but may need to be adapted to meet the special needs of a specific patient as determined by the patient's medical practitioner.