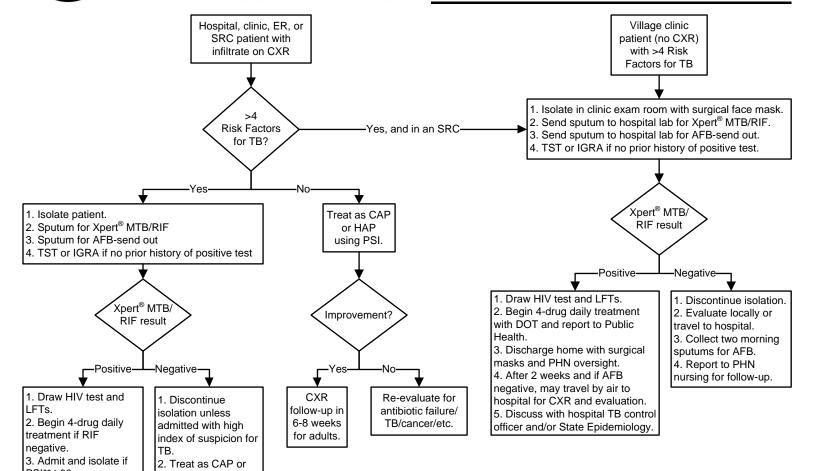
# Yukon-Kuskokwim HEALTH CORPORATION

## Clinical Guideline

# Active Pulmonary TB for Patients >14 Years



## Risk Factors for TB

- persist cough >3wks
- fever
- night sweats
- weight loss
- hemoptysis
- immunosuppression (HIV/DM/other)
- · atypical CXR
- · foreign born from endemic area
- prior active or latent TB infection
- household contact of active TB
- persistent pneumonia
- born before 1960 and long-term resident of western Alaska or other endemic area

# <u>PSI</u>

See www.mdcalc.com/psi-port-score-pneumonia-severity-index-adult-cap/

- PSI ≤70 stable for outpatient therapy
- PSI 71-90 likely outpatient therapy but may consider inpatient
- PSI ≥91 advise inpatient therapy

Abbreviations: AFB-acid fast bacilli; CA-cancer; CAP-community acquired pneumonia; CXR-chest x-ray; DM-diabetes mellitus; DOT-direct observational therapy; ER-emergency room; LFTs-liver function tests; HAP-healthcare associated pneumonia; HIV-human immunodeficiency virus; IGRA-interferon gamma release assay; PHN-public health nurse; PSI-pneumonia severity index; SRC-subregional clinic; RIF-rifampin resistance; TB-tuberculosis; TST-tuberculin skin test

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 medical practitioner.

Approved by MSEC 4/13/16.

PSI\*\* ≥90.

PSI 71-90.

4. Consider admission if

5. Discharge home with

PHN oversight if reliable

admission and isolation

if patient unreliable and/

7. Discuss with hospital

TB control officer and/or

State Epidemiology.

or history of treatment

surgical masks and

and no air travel.

6. Recommend

failure.

HAP.

3. Collect two

admitted.

morning sputums for

AFB with isolation if

4. Report to Public

Health for follow-up.

If comments about this guideline, please contact Elizabeth\_Roll@ykhc.org.