

TB Case Management Monitoring Record

Case name: _____ DOB: _____ Rec # _____

PMD: _____ Phone: _____ Fax: _____

DIAGNOSTIC EVALUATION:

Symptoms: Cough (Onset: _____), Sputum, Hemoptysis, Fever, Night Sweats, Malaise, Wt. Loss (____ lbs)

TST: _____ mm on Date: _____ Not done

Microbiology: Date _____ Specimen _____ AFB smear _____ AFB culture /ID _____ Susceptibilities _____.

1. _____

2. _____

3. _____

CXR⁶: cavitory non-cavitory _____

TREATMENT PLAN: 6 month regimen Other: _____

Pt Wt: _____ lbs / kg (Initial phase) | (Continuation phase)

MONTH	Start	First	Second	Third	Fourth	Fifth	Sixth	Seventh	Eighth	Ninth
Date:	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
INH _____ mg	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
RIF _____ mg	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
PZA _____ mg	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
EMB _____ mg	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
B6 _____ mg	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____ mg	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

of DOT doses: _____

of SAT doses: _____

(DOT is standard of care: only rare situations would justify SAT. SAT doses rec'd while on DOT do not count toward completion)

MONTHLY MONITORING:

Side Effects¹: _____

Home Isolation²: _____

Smear Status³: _____

Culture Status⁴: _____

Clinical Response⁵: _____

Medical Evaluation: _____

Comparison CXRs⁶: 3rd mo / prn: _____ End of Tx: _____

¹ List: Ø = none noted, P = problem, describe in progress notes (symptom review, labs as ordered, visual/color while on EMB, etc.)
² Pulmonary sputum smear positive cases: isolated until non-infectiousness is established by demonstration of clinical response to Tx, AND have been on adequate TB Tx for >2 weeks, AND have 3 consecutively negative sputum smears for AFB.
³ Pulmonary sputum smear positive cases: collect one weekly/monthly to document conversion to negative smear, then collect 2nd & 3rd following 1st negative to document non-infectiousness and release from isolation.
⁴ Pulmonary sputum culture positive cases: collect one monthly to document conversion to negative culture.
⁵ List persistent symptoms (e.g., cough) and status (e.g., improved, resolved)
⁶ List key findings (e.g., infiltrates, scarring, nodules) and status (e.g., improved, stable, worse)