

**Oregon Tuberculosis Directly Observed Therapy (DOT) Log**

Month: 08	Year: 2010	Case Manager: Heidi Behm	Drug	Strength x # pills	Dose	Frequency	Start Date	Stop Date
Patient Name: J. J. S.			INH	300 mg x 1	300 mg	daily	7/01/10	8/16/10
Patient Phone: (H): 123-4567 (W): N/A (C): N/A			RIF	300 mg x 2	600 mg	daily	7/01/10	8/16/10
DOT Site: HIS HOME (SEE CHART FOR ADDRESS)			PZA	500 mg x 2	1000 mg	daily	7/01/10	8/16/10
Mask needed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No CLEARED 07/5/2010			EMB	400 mg x 2	800 mg	daily	7/01/10	8/16/10
Date	Name of DOT worker	DOT Worker Initials	B6					
08/01/10	HEIDI BEHM, RN	HB						
08/06/10	LINDSEY LANE	LL						
8/12/10	GAYLE WAINWRIGHT	GW						

Day of Month	Dose #	Initial appropriate column. If no DOT explain in comments.			Side Effects		Case Manager Notified	Comments
		DOT given	Self Adm	Missed/Held	Yes	No		
1	Weekend							
2	32	HB				X		
3	33	HB				X		
4	34	HB				X		
5	35	HB				X		Pt stated need DOT at 4 pm tomorrow.
6	36	LL				X		EMS stopped.
7	Weekend							
8	Weekend							
9	37	HB				X		Pt can't do DOT tomorrow due to travel. Will SA.
10	38		HB			X		
11	39	HB				X		
12	40	GW				X		
13	41	GW				X		Drop PZA and start biweekly next week.
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								
31								
TOTAL		40	1	0				

## Directions

- 1. DOT is recommended for all patients with suspected or confirmed TB disease.**
2. Use one sheet per month for either initial or continuation phase. Start a new sheet for the continuation phase.
3. Patients should be given packets for weekend and holidays. Do not "count" these doses.
4. In "Date", write the date the DOT worker starts providing DOT.
5. In "Dose #", write which DOT dose was given. At the end of the month, continue this count on the new form. When the patient reaches 40 doses and ends the initiation phase, start a new count for the continuation phase.
6. After DOT is given, DOT worker should write their initials in the "DOT given" box. If DOT was not given, mark either "Self Admin" or "Missed/Held". Explain in comments if needed.
7. DOT worker should ask patient about side effects prior to giving each dose.
8. If patient reports side effects medications should be held, RN called and outcome documented in "comments".
9. If patient misses DOT appointment, notify RN and document in "comments".
10. At the end of each month, look at what dose number you are now on and the "DOT Given," "Self Admin" and Missed/Held" total. If the patient self administered because of a government holiday, vacation or other reason, these doses should be added to the treatment. If the patient did not take any medication because it was held or the appointment missed, these doses should also be added to the treatment.

<b>Required doses for most common regimen</b>	
<b>Initiation</b> (8 weeks)	40 doses not counting weekend
<b>Continuation</b> (18 weeks)	
Three times weekly	54 doses not counting weekend
daily	90 doses not counting weekend
<b>Continuation</b> (31 weeks) - cavity and no culture conversion or other criteria	
Three times weekly	93 doses not counting weekend
daily	155 doses not counting weekend