

West Virginia Department of Health – TB Elimination Program (WV TBEP)  
**CLINICAL PATHWAY FOR MANAGING LATENT TB INFECTION**

PATIENT NAME:		DOB:		
VISIT	TASK	DATE	INITIAL	COMMENT
DAY 1	LHD first made aware of patient.			
	TB-104 Risk Assessment completed.			
	Provide educational materials about TB and HIV: include contact numbers.			
	Place PPD or draw T-SPOT, <b>if it is not contraindicated</b> , as indicated using TB Testing Criteria. Give return to clinic appt. card for PPD reading if indicated.			
	If symptomatic, immunocompromised, or a contact to an active case contact WV TBEP to schedule a CXR or if one has been done obtain copy.			
	If symptomatic, collect and send sputum specimens for AFB smear & culture according to the WV TBEP Sputum Standing Order for LHD to WV Office of Laboratory Services (OLS). Provide the patient with instructions on collection. Contact OLS with any lab questions you have.			
DAY 3 to 4	Read PPD and record in millimeters at 48 to 72 hours if one was placed. Do 2 step if indicated if PPD is 0mm. If no repeat test indicated, give documentation with TB-60.			
	If PPD or T-SPOT positive fill out TB-101 and TB-80 and send to WV TBEP along with a copy of CXR if done, a list of current home medications and copy of positive TB screening test.			
	If not already done contact WV TBEP to schedule a CXR or if one has been done obtain copy.			
	A clinic was scheduled by WV TBEP for the patient to see the TB clinician. An email with dates was sent via email.			
	Counsel and obtain HIV results for all positive PPDs and IGRAs.			
EXAM DATE	Patient evaluation by Clinician. _____.			
	Educate on TB medications/side effects/ hepatotoxicity. Have pt. sign consent form TB-106.			
	Obtain baseline labs ordered by the clinician.			
	Order medication from WV TBEP to have ready to give once all the necessary information is obtained prior to initiation of treatment. If you have questions as to when to start treatment contact WV TBEP. Dispense medication using Directly Observed Preventive Therapy (DOPT) if indicated and document on TB-107 and TB-50.			
EACH VISIT	Assess for signs/symptoms of active disease, adverse drug reactions, and compliance to treatment. Document findings.			
	Obtain LFTs and monitor for Hepatotoxicity using Hepatotoxicity Standing Orders.			
AT D/C	When the patient discontinues treatment for whatever reason, make WV TBEP aware. If the patient completes treatment, make WV TBEP so that a DC order and Completion of Treatment letter can be sent.			
Nurse Signature:		Initials:		
Nurse Signature:		Initials:		