

WEST VIRGINIA DEPARTMENT OF HEALTH
TUBERCULOSIS ELIMINATION PROGRAM
MONTHLY TUBERCULOSIS TESTING REPORT - PRIVATE PAY

COUNTY _____

TESTING MONTH/YEAR _____

Age by Year	Medical Risk (High Risk) WV TBEP				Foreign-Born, Lived in or Visited a Foreign Country (High Risk) WV TBEP				Homeless (High Risk) WV TBEP				Other Population Risks (Low Risk) LHD				Administration (Lowest Risk) LHD			
	IGRA	TST Given	TST Read	Tests (+)	IGRA	TST Given	TST Read	Tests (+)	IGRA	TST Given	TST Read	Tests (+)	IGRA	TST Given	TST Read	Tests (+)	IGRA	TST Given	TST Read	Tests (+)
≤ 4																				
5-14																				
15-34																				
≥ 35																				
Not ID'd																				
Total																				

NUMBER POSITIVE: Record only those tests that meet current guidelines for classification as positive which will depend on the size of the induration and on the patient's risk factors for TB. Please record all persons with significant skin test reactions, positive IGRA results, and those placed on preventive therapy on the back of this form and send to WV TBEP at the end of each month. In addition, send the Initial TB-101 to WV TBEP when an LTBI patient is identified, and a Final TB-101 when patient is discontinued from clinic (e.g. completed treatment, lost to follow-up, etc.).

MEDICAL RISK: Persons who have a condition known to predispose them to active TB disease (e.g. HIV +, TST conversion, fibrotic lesions on CXR, IDU, Diabetes, prolonged high-dose steroid treatment or other immunosuppressive therapy, chronic renal failure, some hematologic disorders, carcinoma of the head or neck, wt. loss of <10% ideal body wt., pulmonary silicosis, gastrectomy or jejunioileal bypass, recent exposure to TB. Treatment of LTBI has increased urgency for patients in this category.

FOREIGN BORN: Persons who were born in a country with endemic TB, lived in or visited a country with endemic TB, or those persons who have had BCG vaccine. State supports initial T-SPOT. All serial testing will then be private pay.

HOMELESS: Persons who have been homeless within the past two years.

OTHER POPULATION RISKS: Persons who are members of socially or demographically defined groups who may have an increased risk of TB infection or a high transmission rate. (Residency or occupation in congregate settings: correctional facilities, long-term care facilities for the elderly, homeless shelters, health care facilities).

ADMINISTRATION: Testing that is done on persons with low public-health priority and are not at risk for TB. Often this testing is required by regulations or policies created outside of the TB control program.

ALWAYS DETERMINE THE HIGHEST RISK FOR REPORTING: EXAMPLE: If a person presents for an administration test but is found to be foreign-born, they would be reported under foreign-born.

WEST VIRGINIA DEPARTMENT OF HEALTH
TUBERCULOSIS ELIMINATION PROGRAM
PATIENTS WITH LATENT TUBERCULOSIS INFECTION (LTBI)

PRIVATE PAY

NOTE: This is for POSITIVE test results ONLY

_____ County Health Department

Name	DOB	TST Given	Test Read	TST Result (In MM)	IGRA Drawn	IGRA Results	Reason For Test	X-Ray Date	Preventive Treatment Started (regimen prescribed)	Case Entered in WVEDSS