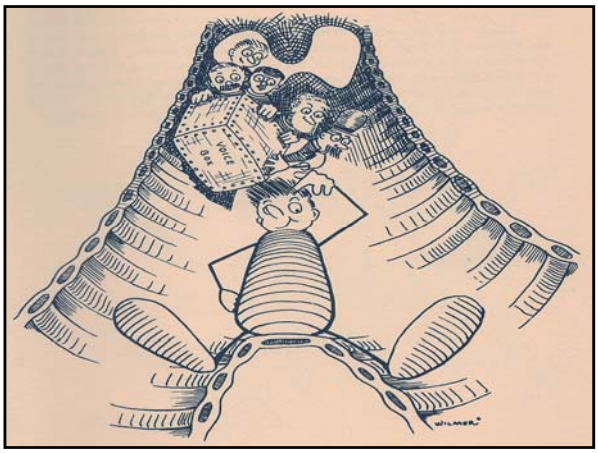


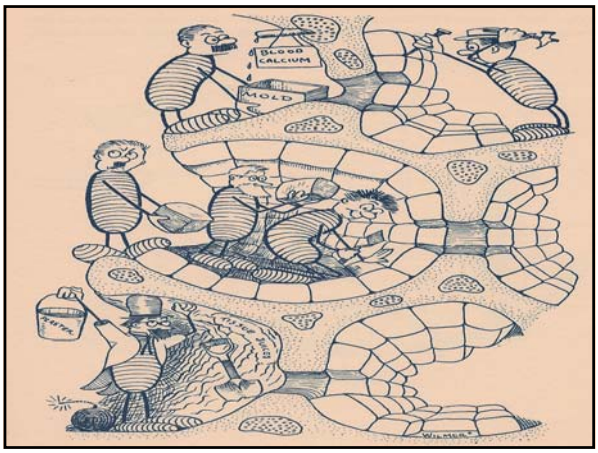
INFECTIOUS: YES; NO.

William White
Virginia Department of Health
TB Control Program
2012 TB Outreach Worker Training

Tuberculosis Infectiousness

- cough;
- lung cavity;
- (+) sputum smear;
- *M.tb;*
- airway, larynx, lung site;
- mouth/nose open;
- inadequate treatment;
- cough inducing tests.

- no cough;
- abn. chest film/scan;
- (-) sputum smear;
- (-) sputum culture;
- non-respiratory tb;
- acceptable hygiene;
- adequate treatment;
- no sputum testing.

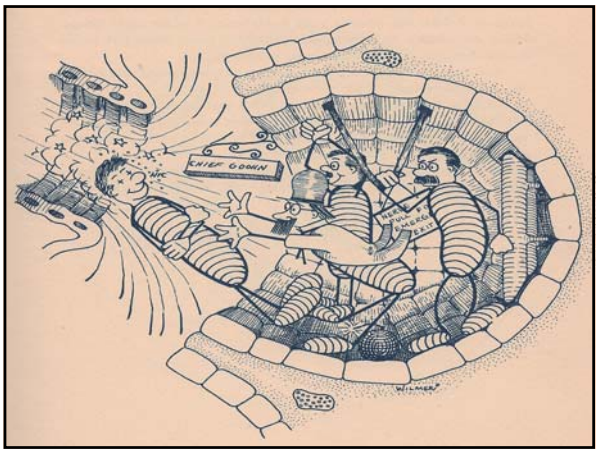


Diagnostic Evaluation

- medical history;
- chest film or scan;
- bacteriologic collection;
- tuberculin (TST);
- “T-Spot tb”.

Disease Site

- lung(s);
- pleura;
- larynx;
- lymphatic;
- spine;
- kidney(s).



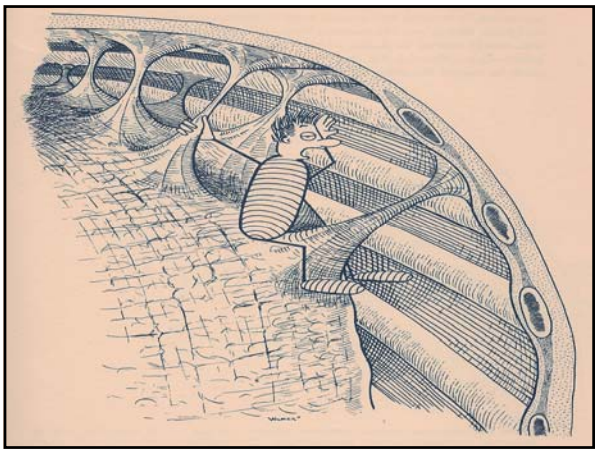
Infectious Timeframe

- <> 3 months prior to tb diagnosis, or;
- <> 3 months prior to initial symptoms.

As new information is learned, date will change.

Infectious Period Ends

- > 2 weeks of adequate tb treatment;
- 3 consecutive (-) sputum smears;
- symptom improvement.



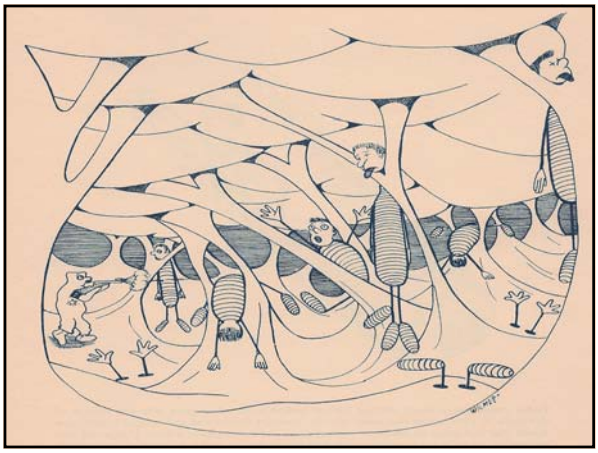
Case Study

You are sent to deliver D.O.T. to a patient who began treatment for suspected *p.tb*.

The client's A.F.B. smear results are unreported.

The O.R.W. is asked to collect an additional sputum during the visit.

Precautions?



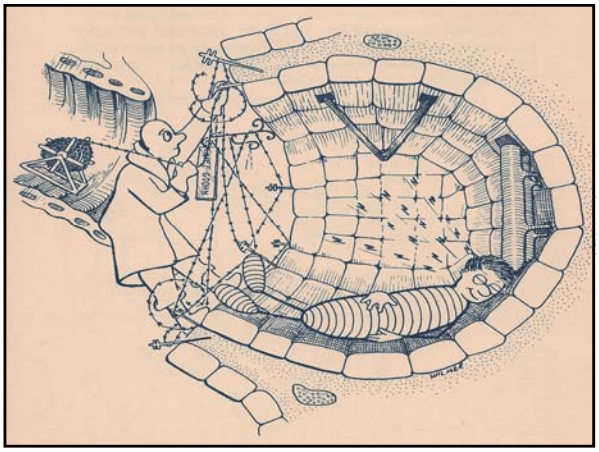
Case Study

A patient began DOT treatment for *p.tb* in early March.

The client's symptoms improved .

(-) sputum smears in late March and early April.

The patient disappeared in April.

In May, the patient is symptomatic.

Infectious?