

GO PUBLIC!



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TB Clinic Referral Guidelines

TB Clinic Location: 976 Lenzen Avenue
San Jose, CA, 95126

TB Clinic Phone: (408) 792-5587
Advice Nurse

TB Clinic Fax: (408) 947-8778

Dr. Andrea Polesky (408) 815-1388 or on Call MD for TB
Clinic Director, beeper Clinic on AMION-Mycobacterial Disease

This information is designed to aid practitioners in making decisions about appropriate medical care. These guidelines should not be construed as dictating an exclusive course of treatment. Variations in practice may be warranted based on the needs of the individual patient, resources, and limitations unique to the institutional type of practice.

E-CONSULT DISCLAIMER:

E-consults are based on the clinical data available to the reviewing provider, and are furnished without benefit of a comprehensive evaluation or physical examination. All advice and recommendations must be interpreted in light of any clinical issues, or changes in patient status, not available to the reviewing provider. The ongoing management of clinical problems addressed by the e-consult is the responsibility of the referring provider. If you have further questions or would like clarifications regarding e-consult advice, please contact the reviewing provider. If needed, the patient will be scheduled for an in-office consultation.

All URGENT consultations require provider-to-provider communication. If your patient has a medical emergency, please direct them to the closest emergency room for expedited care.

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TB CLINIC REFERRALS

1. Background

- a. Santa Clara County has one of the highest incidences of tuberculosis (TB) in California. The TB Clinic in conjunction with the Santa Clara County Public Health Department cares for patients with active TB. The clinic also performs evaluation of patients who may have active disease and provides treatment for latent TB infection.
- b. The TB Clinic **does not** provide TSTs/IGRAs for **asymptomatic** patients with primary care providers needing TB screening. The Public Health Department Immunization Clinic provides TST screening for a reasonable cost for patients without a primary provider.

Travel/Adult Immunization Clinic
976 Lenzen Avenue, Suite 1100
San Jose, CA 95126
(408) 792-5200

2. Pre-referral evaluation and treatment

- a. Management
 - i. Please tell your patient that you are referring them to a TB clinic and explain to them why you are making the referral.
 - ii. Please make sure that we have a way to reach your patient. If your patient is homeless and does not have a phone, you may ask them to come directly to clinic and establish contact with my staff.
 - iii. **Do not** start LTBI if you are not going to follow the patient. That means do not start LTBI in the ER or as an inpatient, or in your office if you want the patient to receive LTBI at the TB clinic.

3. Indications for referral

- a. **Emergent referral**
 - i. **Active or suspected active TB is an emergency.** Please call, email, or page us to make sure we are aware of the patient after you place your referral in HealthLink. This includes patients with symptoms, exam findings, pathology, or radiology consistent with active TB.
 - ii. All active and suspected active TB cases need to be reported to the SCC public health department.
- b. Routine referral
 - i. Positive TST or IGRA.

- ii. <18 contact to a case of active TB regardless of TST or IGRA without symptoms.
- iii. Sequelae of prior TB (abnormal chest film with changes c/w prior TB, aspergillomas, chronic invasive pulmonary aspergillosis, bronchiectasis) without symptoms.
- iv. Nontuberculous mycobacterial infections.

4. Please include the following with your referral

- a. The patient's insurance information and authorization if the referral is not placed directly into HealthLink.

b. Notes

- i. **Active TB patients or patients suspected of having an active TB infection**

- 1. Description of symptoms if present (lymphadenopathy included).
- 2. Details of the patient's TB treatment history.
- 3. Medication start and stop dates and any problems with medication.
- 4. A copy of the initial TB report and TB Discharge report ("Gotch" Form) if done.
- 5. The History and Physical for non-SCVMC admissions.
- 6. The Infectious Disease/Pulmonary Consult notes for non-SCVMC admission
- 7. The Discharge summary if available for non-SCVMC discharges.

c. Test results

- i. **Latent TB infection patients**

- 1. A copy of the **TST result** (date placed/read and number of mm) or **IGRA (Quantiferon) result. IGRA testing is preferred.** Please upload as part of the referral attachment.
- 2. Documentation that the TST is historic if the result is not available. If possible, please get an IGRA first prior to placing the referral.
- 3. Do NOT start LTBI.

- ii. **Active TB or suspected TB patients**

- 1. Copies of all AFB smears, nucleic acid testing results, pyrosequencing results, AFB cultures and susceptibilities.
- 2. Other culture and infectious disease serology results should also be provided.
- 4. The pathology or cytology report if applicable.
- 4. The HIV test result.
- 5. Hepatitis B and C screening if available.

6. Pleural/peritoneal/pericardial/CSF fluid chemistries and cell counts if applicable.
7. All pertinent labs, including, but not limited to, the patient's CBC, Chem 7 and LFTs.
8. A copy of the **TST result** (date placed/read and number of mm) or **IGRA result**.

d. Imaging

- i. A chest film/CT within **6 months** of the referral. Patient appointments and masking are based on the radiology results. You **must** include the report in the referral attachment if not done at VMC. Patients with abnormal outside imaging are required to bring a CD with the radiology.

e. Any information that will help us in our care of the patient properly

- i. Request for Gilroy location for LTBI if it is appropriate.
- ii. Or history of hepatitis and a copy of outside LFTs if pertinent.

Revision History:

- January 2017, formatting
- October 2017, formatting
- Dec 2017, content