



Centre de Santa et Services Sociaux Insultavit Assalitaielli Health & Social Services Centre Pointer, Guilles 200 /H0 1 211 982-002 / F ette MS 2706



Title	Guide to use of TB tools: Dashboard
CODE in TB toolkit	DSPu-TB_Tableau-bord-outils-TB_EN
Date of modification	2023-10-01

**<u>Objectives:</u>** a) Guide clinical interveners in use of regional TB tools according to the care process; b) Standardize the care process in the management of tuberculosis in Nunavik.

**Notes:** This document is a practical guide. It is not nominative and should not be archived in the patient's record. This document must be used in conjunction with the *TB clinical decision-making algorithms* tool.

Summary			
Pages 2 to 5	- On request TABLE 1: Investigation - OR of an individual suspected of having active TB - OR of a contact of an active TB case		
Pages 6 to 8	TABLE 2: Care process for an individual under treatment during window period		
Pages 9 to 11	TABLE 3: Care process for an individual with LTBI		
Pages 12 to 17	TABLE 4: Care process for an individual with active TB		
Page 18	TABLE 5: Care process for an individual subject to CRF		

Useful coordinates			
Physician on duty for public health	1 855 964-2244 or 1 819 299-2990		
Pediatric pneumologist <sup>1</sup>	<ul> <li>MCHTB &amp;06CH_CUSM <u>MCHTB@MUHC.MCGILL.CA</u></li> <li>Ou Zofia Zysman-Colman (Med) zofia.zysman-colman.med@ssss.gouv.qc.ca</li> </ul>		
	Use SAFIR system : Se connecter à SAFIR (gouv.gc.ca)		
Adult pneumologist <sup>1</sup>	If SAFIR system is unavailable, write to: <ul> <li>Faiz Ahmad Khan <u>faiz.ahmad.khan.med@ssss.gouv.qc.ca</u></li> <li>ou Richard Menzies, Dr. <u>dick.menzies@mcgill.ca</u></li> </ul>		
Pneumologist on duty at MUHC	514 934-1934		

List of abbreviations				
BK	Koch's bacillus	RIF	Rifampicin	
DPH	Department of Public Health	DOT	Directly observed therapy	
INH	Isoniazid	CRF	Clinical and radiological follow-up	
LTBI	Latent tuberculosis infection	TB	Tuberculosis	
MADO	Reportable disease	TST	Tuberculin skin test	
CXR	Chest X-Ray	MUHC	McGill University Health Centre	

<sup>&</sup>lt;sup>1</sup>When communicating by e-mail with the pneumologists, ALWAYS include copy (cc) to: *Tuberculose Sante Publique (RRSSSN)* <u>tuberculose</u><u>santepublique.nrbhss@ssss.gouv.qc.ca</u>.

<sup>(</sup>DSPu-TB\_Tableau-bord-outils-TB\_EN, V2023-10-01)

- ON REQUEST <u>TABLE 1</u> : INVESTIGATION - OR OF AN INDIVIDUAL SUSPECTED OF HAVING ACTIVE TB - OR OF A CONTACT OF AN ACTIVE TB CASE				
Steps in		sks to perform	Applicable tools <sup>2</sup>	
investigation	Nurse	Physician		
1. Review of record	<ul> <li>Review patient's record.</li> <li>Enter requested information into <i>Clinical assessment</i> tool (Section 1).</li> <li>Send <i>Clinical assessment</i> tool to DPH.</li> </ul>			
2. Assessment #1	<ul> <li>Review case history.</li> <li>Assess signs and symptoms of active TB.</li> <li>According to review of record or DPH's recommendation, perform TST#1 if required.</li> <li>Enter information into <i>Clinical assessment</i> tool (Sections 2 and 3).</li> <li>Send <i>Clinical assessment</i> tool to DPH.</li> </ul>		TB clinical decision-making algorithms Clinical assessment of a suspected active TB case or a contact of active TB case	
3. Medical course of action	<ul> <li>Notify attending physician for medical course of action.</li> </ul>	<ul> <li>According to Steps 1 and 2, determine medical course of action and enter it into <i>Clinical assessment</i> tool (Section 5).</li> <li>Discuss with an adult pneumologist PRN or a pediatric pneumologist.</li> </ul>		
4. CXR if required	<ul> <li>If required, have attending physician fill out <i>Consultation in diagnostic radiology</i> – <i>TB</i>.</li> <li>If radiology services are not available on site, refer to <i>GeneXpert triage guide</i>.</li> </ul>	<ul> <li>If required, fill out <i>Consultation in diagnostic radiology – TB</i>.</li> <li>If radiology services are not available on site, refer to <i>GeneXpert triage guide</i>.</li> <li>Check result of CXR, determine medical course of action and enter it</li> </ul>	TB clinical decision-making algorithms Consultation in diagnostic radiology – TB GeneXpert triage guide	

<sup>2</sup> The TB tools are available in the regional TB toolkit : <u>Tuberculosis (TB) Toolbox | Nunavik Regional Board of Health and Social Services (nrbhss.ca)</u>

ON REQUEST     ON REQUEST     OR OF AN INDIVIDUAL SUSPECTED OF HAVING ACTIVE TB     OR OF A CONTACT OF AN ACTIVE TB CASE				
Steps in	Details of ta	sks to perform	Applicable tools <sup>2</sup>	
investigation	Nurse	Physician		
	<ul> <li>Enter date on which CXR was taken into <i>Clinical assessment</i> tool (Section 5).</li> </ul>	<ul> <li>into <i>Clinical assessment</i> tool (Section 5).</li> <li>Discuss with: <ul> <li>adult pneumologist PRN;</li> <li>pediatric pneumologist for patients &lt; 15 years.</li> </ul> </li> </ul>		
5. Bacteriological specimens if required	<ul> <li>If required, obtain prescription from attending physician to proceed with bacteriological specimens.</li> <li>Take bacteriological specimens prescribed by attending physician according to <i>Sputa induction protocol for BK tests</i>.</li> <li>If portable negative-pressure chamber or tent is not available on site, refer to <i>GeneXpert triage guide</i>.</li> <li>Enter dates on which specimens were taken into <i>Clinical assessment</i> tool (Section 5).</li> <li>Once available, forward bacteriological results to DPH.</li> </ul>	<ul> <li>If required, prescribe sputa induction.</li> <li>If portable negative-pressure chamber or tent is not available on site, refer to <i>GeneXpert triage guide</i>.</li> <li>Check results of bacteriological specimens, determine medical course of action and enter it into <i>Clinical</i> <i>assessment</i> tool (Section 5).</li> <li>Discuss with: <ul> <li>adult pneumologist PRN</li> <li>pediatric pneumologist for patients &lt; 15 years.</li> </ul> </li> </ul>	TB clinical decision-making algorithms Sputa induction protocol for BK tests GeneXpert triage guide Laboratory test sequences to search for BK	
6. Window-period prophylaxis if required		<ul> <li>For a child ≤ 5 years who is a contact of an active TB case and is in window period:</li> <li>if possibility of active TB was eliminated during previous stapes, initiate window-period prophylaxis. See Table 2;</li> <li>discuss with pediatric pneumologist.</li> </ul>		
7. Assessment #2 if required	<ul> <li>Assess signs and symptoms of active TB.</li> </ul>			

TABLE 1: INVEST	-       ON REQUEST         TABLE 1: INVESTIGATION       -       OR OF AN INDIVIDUAL SUSPECTED OF HAVING ACTIVE TB         -       OR OF A CONTACT OF AN ACTIVE TB CASE				
Steps in	Details of ta	sks to perform	Appliaghte toolo?		
investigation	Nurse	Physician	Applicable tools <sup>2</sup>		
8. Medical course of action	<ul> <li>If required, perform TST#2 after window period.</li> <li>Enter information into <i>Clinical</i> assessment tool (Section 4).</li> <li>Forward <i>Clinical assessment</i> form to DPH.</li> <li>Notify attending physician for medical course of action.</li> </ul>	<ul> <li>According to Step 7, determine medical course of action and enter it into <i>Clinical assessment</i> form (Section 5).</li> <li>Discuss with: <ul> <li>adult pneumologist PRN;</li> <li>pediatric pneumologist for patients &lt; 15 years.</li> </ul> </li> </ul>	TB clinical decision-making algorithms Clinical assessment of a suspected active TB case or a contact of active TB case		
9. CXR if required	<ul> <li>If required, have attending physician fill out form for radiology consultation.</li> <li>If radiology services are not available on site, refer to <i>GeneXpert triage guide</i>.</li> <li>Enter date on which CXR was taken into <i>Clinical assessment</i> form (Section 5).</li> </ul>	<ul> <li>If required, fill out <i>Consultation in diagnostic radiology – TB</i>.</li> <li>If radiology services are not available on site, refer to <i>GeneXpert triage guide</i>.</li> <li>Check results of CXR, determine medical course of action and enter it into <i>Clinical assessment</i> form (Section 5).</li> <li>Discuss with: <ul> <li>adult pneumologist PRN;</li> <li>pediatric pneumologist for patients &lt; 15 years.</li> </ul> </li> </ul>	TB clinical decision-making algorithms Consultation in diagnostic radiology – TB GeneXpert triage guide		
10. Bacteriological specimens if required	<ul> <li>If required, obtain prescription from attending physician to proceed with bacteriological specimens.</li> <li>Take bacteriological specimens prescribed by attending physician</li> </ul>	<ul> <li>If required, prescribe sputa induction.</li> <li>If portable negative-pressure chamber or tent is not available on site, refer to <i>GeneXpert triage guide</i>.</li> </ul>	TB clinical decision-making algorithms		

-       ON REQUEST <u>TABLE 1</u> : INVESTIGATION       -       OR OF AN INDIVIDUAL SUSPECTED OF HAVING ACTIVE TB         -       OR OF A CONTACT OF AN ACTIVE TB CASE				
Steps in	Details of ta	sks to perform	Applicable tools <sup>2</sup>	
investigation	Nurse	Physician		
	<ul> <li>according to Sputa induction protocol for BK tests.</li> <li>If portable negative-pressure chamber or tent is not available on site, refer to</li> </ul>	Check results of bacteriological specimens, determine medical course of action and enter it into <i>Clinical</i>		
	<ul> <li>or tent is not available on site, refer to <i>GeneXpert triage guide</i>.</li> <li>Enter dates on which specimens were taken into <i>Clinical assessment</i> form (Section 5).</li> <li>Forward results of bacteriological specimens to DPH once available.</li> </ul>	<ul> <li>assessment form (Section 5).</li> <li>Discuss with: <ul> <li>adult pneumologist PRN;</li> <li>pediatric pneumologist for patients &lt; 15 years.</li> </ul> </li> </ul>	GeneXpert triage guide Laboratory test sequences to search for BK	
11. Management of investigation results and medical course of action	<ul> <li>When results of CXR and bacteriological tests are available, notify attending physician for final medical course of action.</li> <li>Once medical course of action is completed, forward <i>Clinical assessment</i> form to DPH.</li> <li>If window-period prophylaxis is under way, refer to <b>Step 7 of Table 2</b>.</li> <li>Otherwise:         <ul> <li>if LTBI, refer to <b>Table 3</b>;</li> <li>if active TB, refer to <b>Table 4</b>.</li> </ul> </li> </ul>	<ul> <li>Review record and fill out medical follow-up and clinical impression into <i>Clinical assessment</i> form (Section 5).</li> <li>If window-period prophylaxis is under way, refer to Step 7 of Table 2.</li> <li>Otherwise: <ul> <li>if LTBI, refer to Table 3;</li> <li>if active TB, refer to Table 4.</li> </ul> </li> </ul>	TB clinical decision-making algorithms Clinical assessment of a suspected active TB case or a contact of active TB case	





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## **TABLE 2**: CARE PROCESS FOR AN INDIVIDUAL IN WINDOW-PERIOD PROPHYLAXIS

Stone in core process	Details of task	Details of tasks to perform	
Steps in care process	Nurse	Physician	Applicable tools <sup>3</sup>
1. Proposal for window- period prophylaxis		<ul> <li>Propose window-period prophylaxis:         <ul> <li>if accepted, go to Step 2;</li> <li>if refused, wait for end of window period and continue investigation with <i>Clinical</i> assessment form #2 (refer to Step 7 and following in Table 1).</li> </ul> </li> </ul>	Prescription of LTBI medication - RIF window- period
2. Prescription for window-period prophylaxis		<ul> <li>Prescribe window-period treatment with RIF.</li> <li>Prescribe <i>Follow-up protocol –</i> <i>RIF window-period</i> by signing at bottom of each page.</li> <li>Fill out physician's tasks in section on pre-treatment in <i>Follow-up protocol</i>, then sign in column to right.</li> <li>Refer to pediatric pneumologist.</li> </ul>	Follow-up protocol – RIF window-period Registration of the medication - RIF Compliance curve – RIF Adverse reactions of the main
3. Start of window-period prophylaxis	<ul> <li>Initiate required examinations and monitoring at start of treatment according to <i>Follow-up protocol</i> – <i>RIF window-period</i> prescribed by attending physician and sign in column to right.</li> <li>Initiate treatment prescribed by attending physician.</li> </ul>	Ensure follow-up to results of examinations prescribed in pre- treatment.	TB treatments Monthly clinical assessment

<sup>&</sup>lt;sup>3</sup> The TB tools are available in the regional TB toolkit : <u>Tuberculosis (TB) Toolbox | Nunavik Regional Board of Health and Social Services (nrbhss.ca)</u>

<u>TAB</u>	TABLE 2: CARE PROCESS FOR AN INDIVIDUAL IN WINDOW-PERIOD PROPHYLAXIS				
Sto	eps in care process	Details of tasks to perform		Applicable tools <sup>3</sup>	
Sie	eps in care process	Nurse	Physician	Applicable tools	
		<ul> <li>Register LTBI medication RIF (see Step 4), complete <i>RIF</i> <i>compliance curve</i> (see Step 4) and <i>Monthly clinical assessment</i> form (see Step 5).</li> <li>Forward <i>Prescription of LTBI</i> <i>medication - RIF window-period</i>, <i>Follow-up protocol – RIF window-</i> <i>period</i> and completed <i>Registration</i> <i>of the medication - RIF</i> to DPH.</li> <li>Fill out <i>Registration of the</i></li> </ul>	Throughout treatment:		
At start of window-period prophylaxis and at each patient visit	4. Registration of doses and assessment of compliance	<ul> <li>In our Registration of the medication - RIF and RIF compliance curve.</li> <li>Notify attending physician in case of difficulties with compliance.</li> </ul>	<ul> <li>Throughout treatment:</li> <li>Ensure follow-up to results of prescribed examinations.</li> <li>Determine medical course of action in case of problems during treatment (onset or aggravation of symptoms of active TB, appearance of side effects).</li> <li>Support nurse in establishing support measures for patient in case of difficulties with compliance.</li> </ul>	Registration of the medication - RIF RIF compliance curve	
	5. Monthly follow- up	<ul> <li>Fill out nurse's tasks according to <i>Follow-up protocol</i> prescribed by attending physician and sign in column to right.</li> <li>Check <i>Procedure for monthly clinical assessment</i>.</li> <li>Fill out <i>Monthly clinical assessment</i> form.</li> <li>Notify attending physician in case of onset or aggravation of symptoms of active TB or appearance of side effects.</li> </ul>		Follow-up protocol – RIF window-period Adverse reactions of the main TB treatments Monthly clinical assessment	

TABLE 2: CARE PROCESS FOR AN INDIVIDUAL IN WINDOW-PERIOD PROPHYLAXIS					
Steps in care process	Details of tasks to perform		Appliachte teolo <sup>3</sup>		
Steps in care process	Nurse	Physician	Applicable tools <sup>3</sup>		
6. End of window period	Continue investigation with Clinical assessment form #2 (refer to Step 7 of Table 1).	<ul> <li>Fill out physician's tasks in section on end of treatment (second month) of <i>Follow-up protocol</i>, then sign in column to right.</li> <li>Continue investigation with <i>Clinical assessment</i> form #2 (refer to Step 7 and following of Table 1).</li> </ul>	Follow-up protocol – RIF window-period		
7. Management of investigation results and medical course of action	<ul> <li><u>At end of investigation:</u></li> <li>If not infected, terminate window- period prophylaxis on medical prescription and forward completed <i>Clinical assessment</i>, <i>Follow-up protocol – RIF window- period, Registration of the medication - RIF</i> and <i>RIF compliance curve</i> to DPH.</li> <li>If LTBI confirmed, continue LTBI treatment on medical prescription and refer to <b>Step 4 of Table 3</b>.</li> <li>If active TB confirmed, refer to <b>Table 4</b>.</li> </ul>	<ul> <li><u>At end of investigation:</u></li> <li>If not infected, terminate window-period prophylaxis.</li> <li>If LTBI confirmed, continue with LTBI treatment and refer to Step 4 of Table 3.</li> <li>If active TB confirmed, refer to Table 4.</li> <li>Refer to pediatric pneumologist.</li> </ul>	Clinical assessment of a suspected active TB case or a contact of active TB case Follow-up protocol – RIF window-period Registration of the medication - RIF Compliance curve – RIF Prescription of LTBI medication - RIF window- period		

TABLE 3: CARE PROCESS FOR AN INDIVIDUAL WITH LTBI				
Steps in care process	Details of tasks to perform		Applicable tools <sup>4</sup>	
	Nurse	Physician		
1. Proposal for LTBI treatment		<ul> <li>Propose LTBI treatment: <ul> <li>if accepted, go to Step 2;</li> <li>if refused, complete <i>Clinical and radiological follow-up guide</i> and <i>Consultation in diagnostic radiology – TB</i> for entire duration of CRF.</li> </ul> </li> <li>Refer to: <ul> <li>adult pneumologist PRN;</li> <li>pediatric pneumologist for patients &lt; 15 years.</li> </ul> </li> </ul>	Prescription of LTBI medication - RIF/INH DOT/INH daily Follow-up protocol - RIF/INH DOT/INH daily Registration of the medication	
2. Prescription for LTBI treatment		<ul> <li>Prescribe selected LTBI treatment.</li> <li>Prescribe <i>Follow-up protocol</i> for selected LTBI treatment by signing at bottom of each page.</li> <li>Fill out physician's tasks in section on end of pre-treatment of <i>Follow-up protocol</i>, then sign in column to right.</li> <li>Refer to: <ul> <li>adult pneumologist PRN;</li> <li>pediatric pneumologist for patients &lt; 15 years.</li> </ul> </li> </ul>	<ul> <li>RIF/INH DOT/INH daily</li> <li>Compliance curve - RIF/INH daily</li> <li>Adverse reactions of the main TB treatments</li> <li>Monthly clinical assessment</li> <li>OR</li> </ul>	
3. Start of LTBI treatment	<ul> <li>Initiate required examinations and monitoring according to <i>Follow-up</i> <i>protocol</i> prescribed by attending physician and sign in column to right.</li> </ul>	<ul> <li>Ensure follow-up to results of examinations prescribed in pre- treatment.</li> </ul>	Clinical and radiological follow-up guide	

<sup>&</sup>lt;sup>4</sup> The TB tools are available in the regional TB toolkit : <u>Tuberculosis (TB) Toolbox | Nunavik Regional Board of Health and Social Services (nrbhss.ca)</u>

Steps in care process		Details of tasks to perform		
		Nurse	Physician	Applicable tools <sup>4</sup>
t visit	4. Registration of	<ul> <li>Initiate treatment prescribed by attending physician.</li> <li>Register LTBI medication (see Step 4) and complete Compliance curve (see Step 4) and Monthly clinical assessment form (see Step 5).</li> <li>Forward completed Prescription of LTBI medication, Follow-up protocol and sheet for Registration of the LTBI medication to DPH.</li> <li>Fill out Registration of the LTBI medication and Compliance curve.</li> <li>Notify attending physician in case</li> </ul>	<ul> <li><u>Throughout treatment:</u></li> <li>Ensure follow-up to results of prescribed examinations.</li> <li>Determine medical course of</li> </ul>	Registration of the medication - RIF/INH DOT/INH daily
At start of treatment and at each patient visit	doses and assessment of compliance	of difficulties with compliance.	<ul> <li>action in case of problems during treatment (onset or aggravation of symptoms of active TB, appearance of side effects).</li> <li>Support nurse in establishing</li> </ul>	Compliance curve - RIF/INH daily
	5. Monthly follow- up	<ul> <li>Fill out nurse's tasks according to <i>Follow-up protocol</i> prescribed by attending physician and sign in column to right.</li> <li>Check <i>Procedure for monthly clinical assessment</i>.</li> <li>Complete <i>Monthly clinical assessment</i> form.</li> <li>Notify attending physician in case of onset or aggravation of symptoms of active TB or appearance of side effects.</li> </ul>	support measures for patient in case of difficulties with compliance.	Adverse reactions of the main TB treatments Monthly clinical assessment

TABLE 3: CARE PROCESS FOR AN INDIVIDUAL WITH LTBI				
Steps in care process	Details of tasks to perform		Applicable tools <sup>4</sup>	
Steps in care process	Nurse	Physician	Applicable tools	
6. End of treatment	<ul> <li>At end of treatment, notify attending physician to obtain final medical course of action.</li> <li>Forward completed <i>Compliance</i> <i>curve</i> and registration of LTBI medication as well as <i>Clinical and</i> <i>radiological follow-up guide</i> prescribed by attending physician to DPH.</li> <li><u>If CRF required:</u></li> <li>Obtain applications for radiology consultation from attending physician for entire duration of CRF.</li> <li>Plan CXR according to dates indicated in <i>Clinical and</i> <i>radiological follow-up guide</i>.</li> </ul>	<ul> <li>Fill out physician's tasks in section on end of treatment (4<sup>th</sup> month) of <i>Follow-up protocol</i>, then sign in column to right.</li> <li>Complete <i>Clinical and radiological follow-up guide</i>.</li> <li><u>If CRF required:</u></li> <li>Complete <i>Consultation in diagnostic radiology – TB</i> for entire duration of CRF.</li> </ul>	Registration of the medication - RIF/INH DOT/INH daily Compliance curve - RIF/INH daily Clinical and radiological follow-up guide Consultation in diagnostic radiology – TB	





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## TABLE 4: CARE PROCESS FOR AN INDIVIDUAL WITH ACTIVE TB

Stopp in core process	Details of tasks to perform		Applicable to do <sup>5</sup>
Steps in care process	Nurse	Physician	Applicable tools <sup>5</sup>
<ol> <li>Report of new confirmed or probable active TB case</li> </ol>		<ul> <li>Report to DPH any new confirmed or probable cases of active TB.</li> <li><u>Note:</u> <ul> <li>The report may be by fax, e-mail or telephone.</li> <li>Responsibility is shared with reporting laboratory when TB case is confirmed by positive laboratory result.</li> </ul> </li> </ul>	Reportable diseases form (AS-770) (only available in French)
2. Isolation	<ul> <li>Explain isolation instructions to patient.</li> <li>If isolating at home:         <ul> <li>check Procedure for home isolation;</li> <li>provide patient with Instructions for home isolation.</li> </ul> </li> <li>Notify attending physician in case of break in isolation.</li> <li>Notify DPH in case of repeated breaks in isolation.</li> </ul>	<ul> <li>Determine appropriate type of isolation (hospital or home) depending on situation.</li> <li>Explain isolation instructions to patient, make sure he<sup>6</sup> understands them properly and agrees to comply therewith.</li> <li><u>If home isolation:</u> <ul> <li>check <i>Procedure for home isolation</i>;</li> <li>provide patient with <i>Instructions for home isolation</i>.</li> </ul> </li> </ul>	Procedure for home isolation Instructions for home isolation (available in all three languages)
3. Prescription for treatment for active TB		<ul> <li>Prescribe Phase 1 of active TB treatment.</li> <li>Prescribe <i>Follow-up protocol</i> for active TB treatment by signing at bottom of each page.</li> </ul>	Prescription of active TB medication – Phase 1 - Adult OR

<sup>&</sup>lt;sup>5</sup> The TB tools are available in the regional TB toolkit : <u>Tuberculosis (TB) Toolbox | Nunavik Regional Board of Health and Social Services (nrbhss.ca)</u> <sup>6</sup> In the interest of simplicity, the masculine or feminine form is used in this text to denote either sex.

TABLE 4: CARE PROCESS FOR AN INDIVIDUAL WITH ACTIVE TB			
Stone in care process	Details of tasks to perform		Annlinghin toolo <sup>5</sup>
Steps in care process	Nurse	Physician	Applicable tools <sup>5</sup>
		<ul> <li>Fill out physician's tasks in sections on pre-treatment, hospitalization or home isolation, and return to community in case of hospitalization, and sign in column to right.</li> <li>Refer to:         <ul> <li>adult pneumologist PRN;</li> <li>pediatric pneumologist for patients &lt; 15 years.</li> </ul> </li> </ul>	Prescription of active TB medication – Phase 1 - Child Active TB follow-up protocol
4. Start of Phase 1	<ul> <li>Initiate examinations and other follow-up required according to <i>Follow-up protocol</i> prescribed by attending physician and sign in column to right.</li> <li>Initiate treatment prescribed by attending physician.</li> <li>Register medication for Phase 1 of active TB treatment (see Step 9).</li> <li>Forward completed <i>Follow-up protocol</i>, <i>Prescription of active TB medication – Phase 1</i> and <i>Registration of the active TB medication – Phase 1</i> and <i>Registration of the active TB medication – Phase 1</i> to DPH.</li> </ul>	Ensure follow-up to results of examinations prescribed in pre- treatment.	Active TB follow-up protocol Procedure - Registration of the active TB medication Registration of the active TB medication – Phase 1 Adverse reactions of the main TB treatments Monthly clinical assessment
5. Identification of priority contacts	<ul> <li>Check Procedure for identification of contacts of an active TB case.</li> <li>Fill out form for Identification of contacts of an active TB case for priority contacts (domestic contacts and vulnerable contacts).</li> </ul>		Procedure for identification of contacts of an active TB case Identification of contacts of an active TB case

TABLE 4: CARE PROCESS FOR AN INDIVIDUAL WITH ACTIVE TB			
Stops in care process	Details of tasks to perform		Applicable tools <sup>5</sup>
Steps in care process	Nurse	Physician	Applicable tools
	<ul> <li>Fill out Section 1 (personal information) of <i>Clinical assessment</i> form for each priority contact.</li> <li>Forward form for <i>Identification of contacts of an active TB case</i> as well as Section 1 of <i>Clinical assessment</i> form for each priority contact to DPH.</li> </ul>		Clinical assessment of a suspected active TB case or a contact of active TB case
6. Identification of other contacts	<ul> <li>Once infectious period is determined by DPH, fill out form for <i>Identification of contacts of an active TB case</i>.</li> <li>Fill out Section 1 (personal information) of <i>Clinical assessment</i> form for each contact.</li> <li>Forward form for <i>Identification of contacts of an active TB case</i> as well as Section 1 of <i>Clinical assessment</i> form for mathematical assessment form for each contact to DPH.</li> </ul>		Procedure for identification of contacts of an active TB case Identification of contacts of an active TB case Clinical assessment of a suspected active TB case or a contact of active TB case
7. Commitment contract	<ul> <li>Check <i>Procedure for commitment contract relative to mandatory treatment.</i></li> <li>Explain commitment contract to patient and make sure he understands it clearly.</li> <li>Have patient fill out and sign commitment contract.</li> </ul>		Procedure for commitment contract relative to mandatory treatment Commitment contract relative to mandatory treatment
8. Appendix 4	<ul> <li>Fill out <i>Appendix 4</i> with information available at this step.</li> <li>Forward <i>Appendix 4</i> to DPH.</li> </ul>		Appendix 4
9. Registration of doses and	Check Procedure for registration of active TB medication.	<ul> <li>Support nurse in establishing support measures for patient in</li> </ul>	Procedure - Registration of the active TB medication

TABLE 4: CARE PROCESS FOR AN INDIVIDUAL WITH ACTIVE TB				
Steps in care process		Details of tasks to perform		Applicable toolo <sup>5</sup>
		Nurse	Physician	Applicable tools <sup>5</sup>
	assessment of compliance	<ul> <li>Fill out <i>Registration of the active TB</i> medication – Phase 1.</li> <li>Inform attending physician and DPH in case of difficulties with compliance.</li> </ul>	<ul><li>case of difficulties with compliance.</li><li>Inform DPH in case of difficulties with compliance.</li></ul>	Registration of the active TB medication – Phase 1
At start of treatment and at each patient visit	10. Monthly follow-up	<ul> <li>Fill out nurse's tasks according to Active TB follow-up protocol prescribed by attending physician and sign in column to right.</li> <li>Check Adverse reactions of the main TB treatments.</li> <li>Monitor signs and symptoms of active TB.</li> <li>Monitor side effects.</li> <li>Fill out Monthly clinical assessment form.</li> <li>Notify attending physician in case of onset or aggravation of symptoms of active TB or appearance of side effects.</li> <li>Forward all results of bacteriological specimens to DPH once available.</li> </ul>	<ul> <li>Fill out physician's tasks in <i>Active TB follow-up protocol</i> and sign in column to right.</li> <li>Ensure follow-up to results of prescribed examinations.</li> <li>Determine medical course of action in case of problems during treatment (onset or aggravation of symptoms of active TB, appearance of side effects).</li> <li>Notify DPH in case of change in treatment plan or difficulties with compliance with treatment.</li> </ul>	Adverse reactions of the main TB treatments Monthly clinical assessment Active TB follow-up protocol
11. End of Phase 1 and start of Phase 2		<ul> <li>Two weeks before end of Phase 1, notify attending physician to obtain <i>Prescription of active TB medication – Phase 2</i> and forward to pharmacy.</li> <li>Before starting Phase 2, make sure all doses prescribed in Phase 1 have been administered.</li> <li>Once Phase 2 has started, register doses on <i>Registration of the active TB medication – Phase 2</i>.</li> <li>Forward completed <i>Registration of the active TB medication – Phase 1</i> and</li> </ul>	<ul> <li>Confirm transition to Phase 2 according to <i>Active TB follow-up</i> <i>protocol.</i></li> <li>Prescribe Phase 2 of active TB treatment.</li> <li>Refer to: <ul> <li>adult pneumologist PRN;</li> <li>pediatric pneumologist for patients &lt; 15 years.</li> </ul> </li> </ul>	Prescription of active TB medication – Phase 2 - Adult Or Prescription of active TB medication – Phase 2 - Child Registration of the active TB medication – Phase 2

TABLE 4: CARE PROCESS FOR AN INDIVIDUAL WITH ACTIVE TB				
Stone in core process	Details of tasks to perform		Annlinghia tagla5	
Steps in care process	Nurse	Physician	Applicable tools <sup>5</sup>	
12. End of treatment	<ul> <li>Prescription of active TB medication – Phase 2 as well as start date of Phase 2.</li> <li>Continue with Steps 9 and 10.</li> <li>Make sure all doses prescribed in Phase 2 have been administered.</li> <li>Once Phase 2 complete, inform attending physician.</li> <li>Fill out Appendix 4 according to data at end of treatment.</li> <li>Forward forms Treatment outcome, Appendix 4, all sheets for registration of medication for active TB and Clinical and radiological follow-up guide prescribed by attending physician to DPH when required.</li> <li>Obtain Consultation in diagnostic radiology – TB completed by attending physician for entire duration of CRF.</li> <li>Plan CXR according to dates indicated</li> </ul>	<ul> <li>Fill out <i>Treatment outcome</i>.</li> <li>Fill out <i>Clinical and radiological follow-up guide</i>.</li> <li>Fill out <i>Consultation in diagnostic radiology – TB</i> for entire duration of CRF.</li> </ul>	Appendix 4 Registration of medication for Phase 1 treatment of active TB Registration of medication for Phase 2 treatment of active TB Treatment outcome Clinical and radiological follow-up guide	





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## **TABLE 5: CARE PROCESS FOR AN INDIVIDUAL SUBJECT TO CRF** Details of tasks to perform Applicable tools<sup>7</sup> Steps in care process **Physician** Nurse Perform clinical assessment and Check results of clinical • • assessment performed by nurse fill out section on STANDARD clinical and radiological follow-up as well as report from CXR. STANDARD clinical and Clinical evaluation and medical Determine medical course of • radiological follow-up - Clinical action. action and fill out section on evaluation and medical action Forward STANDARD or medical course of action of • OR ADDITIONAL clinical and STANDARD or ADDITIONAL ADDITIONAL clinical and radiological follow-up to DPH clinical and radiological follow-1. At each CRF radiological follow-up - Clinical once section on medical course of up. evaluation and medical action action has been completed by If additional CRF is required, fill • physician. out Consultation in diagnostic Consultation in diagnostic If additional CRF was prescribed radiology – TB. • radiology - TB by attending physician, obtain Consultation in diagnostic radiology – TB and plan CXR.

<sup>&</sup>lt;sup>7</sup> The TB tools are available in the regional TB toolkit : <u>Tuberculosis (TB) Toolbox | Nunavik Regional Board of Health and Social Services (nrbhss.ca)</u>