

Referral Process for Central TB Services

Refer all symptomatic clients to Central Tuberculosis Services as below:

- Initial phone call to TB Lead for consultation is recommended
- Complete TB referral form and follow process as outlined below

Refer positive reactors to Central Tuberculosis Services as below:

- Recent contacts of active TB case (regardless of age)
- TST converters (documented previous negative results within the past 2 years) (regardless of age)
- Individuals with medical conditions/therapies that increase risk of progression from LTBI to active disease (regardless of age)
- Children 6 months to 14 years of age who have lived in a country with high TB prevalence and have immigrated within the past two years
- Refugees under 50 years of age from countries with high incidence of TB prevalence and have arrived within the past 2 years
- Travelers at high risk of exposure to TB due to travel to countries with high TB prevalence (regardless of age)

Individuals at risk for potential occupational exposure to infectious TB (see

<http://www.albertahealthservices.ca/assets/info/hp/cdc/if-hp-cdc-ipsm-tuberculin-skin-test-hcs-appdx-f-08-302.pdf>)

- With medical risk factors (regardless of age)
- In addition to the medical risk factors listed on the biologics page, the following additional factors should be assessed for this group only
 - Diabetes
 - Heavy alcohol consumption (>3 drinks/day)
 - Smoke at least 1 pack of cigarettes a day
 - Underweight (<90% ideal body weight; for most people, this is a body mass index <20)
- OR with radiologic descriptors demonstrated on chest x-ray (regardless of age)
- Individuals in correctional institutions (regardless of age)
- Ophthalmologist referred individuals for assessment of Uveitis

Special Considerations

- Individuals who are eligible for TST but are known to have previous positive reaction, verify follow up action(s) with “public health nurse with TB focus” on site

Radiologic descriptors of TB

The following descriptors may appear in radiography reports, and may suggest prior, inactive, or active TB disease:

- suspicion of current active TB disease (e.g., upper lung zone pneumonic process, particularly if cavitating or if associated with the acinar shadows of endobronchial spread)
- upper lobe fibronodular abnormality
- old granulomatous disease or old tuberculosis (does not include single, isolated granuloma)
- thoracoplasty
- intrathoracic adenopathy with or without a lung parenchymal abnormality in an immune compromised person

Referral Process from North and South zones

- Complete TB referral form (found at <http://www.albertahealthservices.ca/frm-07980.pdf>)
- Send individual for chest x-ray (unless pregnant)
- Collect sputum for AFB x3 on those who are symptomatic, screened for immigration medical surveillance, contacts of active cases, OR collect sputum for AFB x1 on all others
- Forward x-ray report (and sputum results if available) with TB referral form to Central TB Services

Referral Process for Central TB Services

Referral Process from Central zone

- Complete TB referral form (found at <http://www.albertahealthservices.ca/frm-07980.pdf>)
- Send individual for chest x-ray
- Collect sputum for AFB x3 on those who are symptomatic, screened for immigration medical surveillance, contacts of active cases, OR collect sputum for AFB x1 on all others
- Forward x-ray report (and sputum results if available) with TB referral form to
 - CDC-CDN of Central zone for all individuals

Central TB Services Contact Information

- **Phone: 780-735-1464 Fax: 780-735-1195**