

Checklist for return to referring correctional facility for placement in general population following evaluation for suspected tuberculosis (TB)*

Dear Doctor,

This patient is in a correctional facility/congregate setting and has an abnormal chest x-ray (CXR). We do not have a respiratory isolation room available at this time and therefore are not able to manage this patient appropriately. Please note the requirements below to safely accept the patient back to our facility for housing in the general detention population.

If you have additional questions or concerns, please reach out to me, the referring provider:

provider's name

phone number

Required prior to accepting this patient back:

- 3 sputum specimens (induced if the patient is asymptomatic) negative for AFB smear
 - 1 specimen may be from bronchoscopy but the other 2 should be from separate sputum collections
 - Specimens may be collected 8–24 hours apart
- 1 specimen above includes *M. tuberculosis* (MTB) NAA (TB PCR)
- TB skin test [TST (PPD)] or interferon gamma release assay [IGRA (QFT gold, T-spot)]
- HIV screen
- Baseline CBC, LFTs, creatinine
- For AFB smear negative patients, weight-based four drug therapy of isoniazid, rifampin, pyrazinamide, and ethambutol + B6 (RIPE/B6) x 5 days unless another diagnosis explaining the CXR findings is confirmed
- For AFB positive patients, weight-based RIPE/B6 for a minimum of 14 days in addition to 3 negative, consecutively collected AFB smears

Appreciated, but not required to accept the patient back:

- Hgba1c
- Enrollment with CureTB:
https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/phs/documents/CureTB_Binational_Notification_Form.pdf

***if a respiratory isolation room becomes available at the referring facility, a patient may be accepted back prior to completion of this initial phase of management with advance notification and coordination**