

Assess

- Pertinent Healthy People 2010 Leading Health Indicators:**
- Substance Abuse
 - Responsible Sexual Behavior
 - Mental Health
 - Injury and Violence
 - Immunizations
 - Environmental Quality
 - Access to Health Care
 - Tobacco Use

- LTBI - TB infection, no disease**
- Positive reaction to tuberculin skin test, negative bacteriologic studies (if done) and no clinical and/or radiographic evidence of tuberculosis. (LTBI Guidelines TBC Manual 2003 page 2-6)
 - Educate regarding TB infection and preventive measures.
 - Offer INH preventive treatment for 6 or 9 months.
 - Complete PHN Assessment and provide intervention per protocol.
- ♦For SCF - follow the TB SCF Poster
 ♦For Contact Investigation - follow the TB Contact Investigation Poster

Plan

Plan for the following Public Health Nursing Interventions:

- Disease and Health Event Investigation**
 - Review index case's history for symptoms, source, mode of transmission, specific treatment, control measures.
 - Obtain TB educational & resource materials.
 - Obtain TST supplies as needed.
 - Elicit epidemiological data.
 - Determine probability of adherence.
 - Determine impact of diagnosis on cultural beliefs & psychosocial impact.
- Case Finding:**
 - Initiate source case finding per Source Case/Associate Investigation Standards in the TB Control Program Manual 2003 (Appendix L).
 - Initiate evaluation of client and associates per LTBI guidelines (TB Control Program Manual 2003 page 2-6).
 - Explain to associate that the identity of client is confidential.
 - Administer TST as indicated.
 - Refer suspected source case(s) for evaluation/treatment.
 - Initiate forms: H-289 and H-304.
- PHN Intervention - Health Teaching/Counseling:**
 - Educate client/caretaker and associates regarding disease process, necessary follow-up and medication prescribed.
 - Provide educational information as needed regarding TB infection vs. disease.

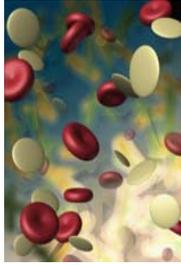
Diagnose

- Nursing Practice**
- Review referral documents when received from Public Health Nursing Supervisor (PHNS) on the Nursing Practice Management System (NPMS). Document Date/Time/Signature on referral when received from PHNS.
 - Analyze report for:
 - Source of referral (if under private provider care, contact provider prior to home visit if contact was not already made by TB Control)
 - Tuberculin skin test (TST) results and BCG status
 - Chest X-ray results
 - Travel history (i.e. time in the United States)
 - Medications for latent TB infection
 - Other medications
 - Assess client/household per PHN Assessment criteria.

Implement

- PHN interventions are implemented as stated in the plan.
- Document all consultations, collaborations, interventions and client/caretaker encounters on the investigation form(s), and/or in the medical record/NPMS.
- Referral and Follow-up:**
 - Refer associates to provider for evaluation and follow-up as needed.
 - If client born in Mexico, has a family in Mexico or may be visiting there, provide client with "Cure TB" Binational Referral Program Wallet Card to facilitate continuity of care in the event of an unplanned trip or move.
- Case Management:**
 - At discretion of the Area Nurse Manager, PHN may maintain desk card.
 - Document interventions in the medical record
- Surveillance:**
 - For clients under county health center supervision, monitor client adherence to recommended medical treatment and appointments per TB Control Program Manual 2003 page 2-12.
 - For clients under PMD supervision, close to further follow up.
- Other:**
 - Refer client/household/associates to community resources as needed according to needs identified in the PHN Assessment.

Identify Outcomes



- Outcome Objectives:**
- Prevent the spread of TB within families, communities, health facilities, or other sites.
 - Client is free of TB disease.
 - Identify source case(s).
- Nursing Practice:**
- Determine and document specific health needs/goals for client/household/associate situation.
 - Determine appropriate timeline for attainment of the outcomes according to the assessment and diagnoses. (TB Control Program Manual 2003 Appendix L)

Other References

- LAC TB Control Manual
- Public Health Nursing Practice Manual
- Education Resource Materials

Evaluate

- Evaluate effectiveness of interventions on the health of the client(s); e.g. document client/caretaker understands the difference between TB infection and disease.
- Determine and document action for the non-adherent client/caretaker:
 - Consult with PHNS.
- Complete investigation forms:
 - Disposition the H-304 as "closed to PMD", for clients who will continue with their PMD for medical supervision.
 - Disposition and submit the H-304 per instructions for clients under county health center supervision.
 - Complete and submit the H-289 with the dispositioned statistical copy of H-304s of the associates within 45 days of receipt of the original report or within timeframe agreed upon in consultation with PHNS.
 - Ensure that H-304 Preventative Treatment Closure copies are dispositioned and submitted, if indicated.
 - Complete and submit Interjurisdictional TB Notification Form (ITBN) if indicated.
- Document in the NPMS:
 - File a copy of the PHN Assessment per the PHN Assessment Form instructions.
- Evaluate client satisfaction:
 - Give client satisfaction form to client or client's caregiver for completion and submission in a pre-addressed, stamped envelope.