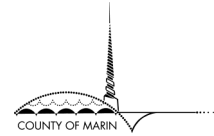




DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 COMMUNICABLE DISEASE PREVENTION AND CONTROL  
 415 473 4163 T  
 415 473 6002 F  
 www.marinhhs.org/cdpc



## TUBERCULOSIS DISCHARGE TREATMENT PLAN

**Prior to anticipated discharge:** Complete this form in entirety and fax to County of Marin TB Control Program: 415-473-6002.

PATIENT LAST NAME	PATIENT FIRST NAME	DATE OF BIRTH	FACILITY				
<b>PART 1: DISCHARGE INFORMATION</b>							
ANTICIPATED DISCHARGE DATE / /	DISCHARGE TO: <input type="checkbox"/> Home <input type="checkbox"/> Skilled Nursing Facility <input type="checkbox"/> Shelter <input type="checkbox"/> Jail/Prison <input type="checkbox"/> Other (Specify) _____						
DISCHARGE STREET ADDRESS		CITY AND ZIP	PHONE				
NAME & ORGANIZATION OF MEDICAL PROVIDER AFTER DISCHARGE		PHONE	FAX				
NAME OF PATIENT'S EMERGENCY CONTACT		PHONE					
MEDS PROVIDED AT DISCHARGE: # of Days _____	FOLLOW UP APPT DATE & TIME	HOUSEHOLD (HH) MEMBERS: # in HH _____ Any <5? _____ Any elderly? _____ Any immunosuppressed? _____					
<b>PART 2: DISCHARGE MEDICATIONS/TREATMENT PLAN</b>							
<b>CURRENT BACTERIOLOGY</b>					<b>DISCHARGE MEDICATIONS</b>		
DATE (Month/Day/Year)	SOURCE	SMEAR + / -	NAAT + / - / Not Done	CULTURE + / - / Pending	Medication	Daily Dosage	Start Date
					ISONIAZID		
					RIFAMPIN		
					PYRAZINAMIDE		
					ETHAMBUTOL		
					B6		
<b>CXR REPORTS</b>					OTHER		
DATE	FINDINGS				OTHER		
DATE	FINDINGS				<input type="checkbox"/> TST <input type="checkbox"/> QFT DATE: _____ RESULT: _____		WEIGHT
COMMENTS/SPECIAL INSTRUCTIONS							
COMPLETED BY		PHONE	FAX	DATE			
<b>PART 3: HEALTH DEPARTMENT REVIEW</b>							
DISCHARGE APPROVED: <input type="checkbox"/> Yes <input type="checkbox"/> No							
Problems Identified: _____							
Actions Required Prior to Discharge: _____							
AUTHORIZED BY _____							
Name of Health Officer / Designee				Signature		Date	

**\*\*\*The patient cannot be discharged until this discharge plan has been evaluated and approved by the Health Officer or TB Controller of Marin County.\*\*\***