




<p style="text-align: center;">THE UNIVERSITY OF KANSAS HOSPITAL <b>KUMED</b> 3901 Rainbow Boulevard Kansas City, Kansas 66160</p>	<p>Do not write in this box</p>  <b>DT0017</b>	<p>PATIENT LABEL</p>
<b>PHYSICIAN'S ORDER FORM</b>		

DATE & TIME	#	ORDERS
		<b>RULE OUT ACTIVE PULMONARY TUBERCULOSIS (ADULT)</b>
		<b>Reference:</b> CDC Guidelines for Preventing the Transmission of Mycobacterium TB in Health-Care Settings, 2005.
		<b>Allergies:</b> _____ <b>Patient Weight:</b> _____ kg
	1.	<b>Admit or transfer to:</b> <ul style="list-style-type: none"> <li>Airborne Isolation Room (negative airflow room) <b>Place order in O2.</b></li> <li>If negative airflow room is not available page Infection Control at 917- 1909 to discuss alternate placement options.</li> <li>Immediately, day or night, page Infection Control at 917-1909 and notify them about this patient. This is required by Kansas law.</li> </ul>
	2.	<b>Attending Physician:</b> _____ <b>Pager:</b> _____ <b>Resident Physician:</b> _____ <b>Pager:</b> _____
	3.	<b>Diagnosis:</b> Airborne Illness: Rule out active TB
	4.	<b>Activity:</b>
	5.	<b>Nursing:</b> <ul style="list-style-type: none"> <li>"Airborne Isolation" sign on patient door and follow instructions on sign</li> <li>N-95 Respiratory or Powered Air Purifying Respirator (PAPR) when entering room (Fit testing/training required)</li> <li>Patient may leave room only for medical tests and must wear surgical mask when out of room</li> <li><input type="checkbox"/> Postpone elective surgeries/procedures until TB diagnosis has been ruled out</li> <li><input type="checkbox"/> <b>POC TB Skin Test</b></li> </ul> Instructions: Do not apply controls (CDC recommendation). Administer 0.1 mL 5TU Purified protein derivative (PPD), intra-dermally, to volar surface of left arm, producing a wheal. Mark location with ink and document in in chart. Read between 48 and 72 hours after placement and document in POCT results flow-sheet.
	6.	<b>Laboratory:</b> <input type="checkbox"/> <b>Acid-fast bacilli (AFB) TB culture – sputum, every 8 hours x 3 (includes AFB stain, positives are confirmed by DNA probe testing)</b> Instructions: Collect sputum specimens at least 8 hours apart. All three specimens may be collected in a 24 hour period. At least one specimen must be collected in early AM. If patient is unable to expectorate sputum have Respiratory Therapy induce. <input type="checkbox"/> <b>QuantIFERON TB</b> Instructions: Draw blood before noon Monday thru Friday and send to lab. Specimen must be in laboratory by noon.
	7.	<b>Radiology :</b> <input type="checkbox"/> Portable chest X-ray <input type="checkbox"/> PA and Lateral chest X-ray <input type="checkbox"/> CT scan of chest
	8.	<b>Consults:</b> <input type="checkbox"/> Consult to infectious diseases <input type="checkbox"/> Consult to pulmonary <input type="checkbox"/> Service request to case management/social work for discharge planning with Public Health
	9.	<b>Medications:</b> <input type="checkbox"/> Tuberculin PPD (Tubersol) 5 units/0.1 mL, intradermally to volar surface of left forearm

Physician Signature: \_\_\_\_\_ Pager: \_\_\_\_\_

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