

Insert Ministry of Health Logo Here/

Insert National TB Program Logo Here

Tracking Tool for TB patients who meet the criteria to be screened for MDR-TB

Facility name: _____

Period covered: Year _____ Quarter _____

Level (*to be modified to the setting*): ☐ Health Center

☐ Sub-District Hospital/Community Hospital

☐ District Hospital

☐ Provincial/Zone/Regional Hospital



USAID
FROM THE AMERICAN PEOPLE

TB CARE II

[Back of front cover]

This tool has been developed by the TB CARE II project and is made possible by the generous support of the American people through the United States Agency for International Development (USAID).

Insert Ministry of Health Logo Here/

Insert National TB Program Logo Here

Tracking Tool for TB patients who meet the criteria to be screened for MDR-TB

Healthcare worker responsible for this tool

Name: _____

Title: _____

Date first patient registered for the quarter: _____

Date last patient's outcome recorded: _____

Signature: _____

INTRODUCTION

Objective:

This tracking tool is intended to ensure appropriate microbiologic screening for all potential suspects who meet local criteria for evaluation of MDR-TB. This tool will assist in identifying potential local challenges or bottlenecks, which prevent diagnosing and/or result in long delays between diagnosis and treatment initiation.

Who should use this Tool?

This tracking tool should be completed by the healthcare worker (HCW), often times a program supervisor or coordinator, who is responsible for ensuring screening and initiation of treatment for MDR-TB; this may be within a single center, in a network or zone, or in a district. However, one individual (one HCW) should be responsible for filling out all components of this tool. This tool can be adapted as needed.

How to fill in this Tool:

This tool comprises both columns and rows. Each row represents information that should be completed for one MDR-TB suspect. Each column represents the specific criteria for screening and for evaluation of MDR-TB suspects as determined by national guidelines.

Columns 1-11 should be completed at first awareness of patients who meet national criteria for MDR-TB; this information will be found in either the suspect register at the facility or the sputum request form for MDR-TB screening. Subsequent columns should be filled out in real time as information becomes available. Some of this information will be found in the laboratory register, treatment register, or patient treatment card. The HCW completing the form is responsible for checking with the lab for pending results, sharing results with treating health centers, and following up until treatment has been initiated or ruled out. In short, the HCW completing this form will be responsible for verifying and checking with each clinical department, patient forms, and laboratory registers to ensure that all patient information is correctly and quickly captured. Every patient should be followed until treatment has been initiated or ruled out.

Before the first suspect is entered into the register, the HCW must sign and date the tool, indicating which quarter it is being used. A new tool should be started at the beginning of each quarter, however, the patients in each tool should be followed until one of the following happens: 1) MDR-TB is ruled out or confirmed and APPROPRIATE treatment is started; 2) TB is ruled out and no treatment is deemed necessary; or 3) the patient being tracked dies before any treatment is initiated.

On the next page are detailed instructions, outlined per column, on how to fill out this tool.

DETAILED INSTRUCTIONS

1. This number reflects the order in which patients are entered into the tool. At the beginning of a quarter, the first patient to be followed for MDR-TB screening should be numbered 1, the second 2, etc. until the quarter ends.
2. Enter the date the responsible healthcare worker entered the patient into this tracking tool.
3. Enter the name of the treatment facility at which the patient is being screened or treated.
4. Enter the ID number of the treatment facility at which the patient is being screened or treated (if applicable).
5. Print the full name of the patient.
6. Enter the patient ID (if applicable).
7. Enter the patient's age.
8. Enter the patient's sex.
9. Enter the patient's full home address.
10. Indicate the type of screening testing being performed. There are three options: 1) GeneXpert®; 2) Culture with DST; or 3) GeneXpert® and Culture with DST.
11. Enter the date the specimen was collected from the patient. This information may be on the lab request form or in a suspect register from the facility.
12. At the time the patient's specimen is collected, please calculate the anticipated or expected result date of the GeneXpert® testing. In other words, enter the date the final results of the GeneXpert® are known to the performing laboratory and ready to report to the treatment facility. For GeneXpert®, results should be ready within 3 days from the time when the specimen was collected. This accounts for some transport time as the test technically only takes 90 minutes. (*Note: the time referenced for this column is a maximum expectant return time, which means results may be ready sooner, however, if they are not reported after the maximum time listed, 3 days, then this specimen must be followed up on.)
13. Fill in the date the GeneXpert® results were actually received by the ordering facility.
14. Indicate the result of the GeneXpert® testing. Indicate the results for BOTH MTB and RIF. Put one tick mark indicating the MTB result, and a second tick mark indicating the RIF result.
15. At the time the patient's specimen is collected, please calculate the anticipated or expected result date for culture and DST. Since this is a tool for screening for MDR-TB we are considering the time of the expected results for the full culture and DST report. For solid Löwenstein-Jensen (LJ), culture and DST can take between 60 and 90 days. For liquid culture (such as MGIT®), culture and DST results should be back within 42 days. (*Note: the time referenced for this column is a maximum expectant return time, which means results may be ready sooner, however, if they are not reported after the maximum time listed, then this specimen must be followed up on.)
16. Fill in the date the full culture and DST results are actually received by the ordering facility.
17. Indicate the result of the culture and DST results. There are three options for culture: 1) negative; 2) positive; or 3) contaminated. Please tick one result. There are two options for DST: 1) H resistant; and 2) R resistant. If the patient is resistant to both, tick both. (This tool can be modified if DST to other drugs is routinely part of MDR-TB screening.)
18. Indicate type of TB treatment started by ticking the appropriate box for treatment category. If treatment was not initiated, then tick the "no treatment initiated" box.
19. Enter the date that treatment was initiated. This may be on the patient treatment card, TB or MDR-TB register, or other patient form.
20. Fill in the number used to identify the patient in the treatment register.
21. Insert any additional comments as needed in this section, including why a patient may not have started treatment. If the patient died or was lost to follow-up, indicate in the comments and include date of the event. If there were long delays between when a laboratory test was expected back to when it actually came back, provide further explanations of the delays.

[Left page – excel version available]

[illegible]

[Right page – excel version available]

[illegible]