

Case Details *omit if HIV pos: 2x2 name only code **NDD no.** _____

Surname* _____ Given name* _____

DOB ___ / ___ / ___ Age _____ yrs / mths Sex F M U Transgender

Address* _____

Suburb* _____ Postcode _____

Occupation / school* _____

Aboriginal Yes No COB Australia Other (Specify) _____ Language English Other (Specify) _____

Laboratory

Organism M tuberculosis M bovis M africanum Organism not confirmed (Presumed M tuberculosis -PMTB)

Specimen Sputum Aspirate Biopsy/FNAB Bronch lavage CSF Urine other (specify) _____

Specimen date ___ / ___ / ___

Symptomatic Y N U **ID method** Culture PCR / NAT Clinical (includes microscopy, histology & radiologically active)

Definition Presumptive Confirmed

Notification

Notifier type _____ Lab _____ Doctor _____ Hospital _____ Chest Clinic _____ Other _____

Notification date ___ / ___ / ___ **Notifier name** _____ **Onset Date** ___ / ___ / ___ **Received date** ___ / ___ / ___

Treating Doctor _____ Chest Clinic GP Private Physician ID Physician Other: (Specify) _____ **Telephone** _____ **Postcode** _____

Lab confirmed Y N U

Hospitalised Y N U **Admitted date** ___ / ___ / ___ **Discharge date** ___ / ___ / ___

Hospital Name _____

Deceased Y N **Date of Death** ___ / ___ / ___ **Was TB the cause of death?** Y N U

State of diagnosing medical officer _____

Outbreak reference number _____ (leave blank) **State of acquisition** _____ (leave blank)

Date of first health contact ___ / ___ / _____

Year of diagnosis _____

Case found by:

- Clinical presentation
- Contact tracing
- Screening
- Other
- Unknown

Case Classification:

- New active
- TB following full treatment in Australia
- TB following partial treatment in Australia
- TB following full treatment Overseas
- TB following partial treatment Overseas
- Unknown

Principle Diagnostic Site:

- Lung only
- Lung plus other sites
- Other sites only (excluding lung)
- Not stated

Extrapulmonary Site(s):

- Bone / Joint Y N Miliary Y N
- Brain / CNS Y N Other organ Y N
- GIT Y N Pleural Y N
- GUT Y N Unknown Y N
- Lymphatic Y N

Bacteriological Data:

Were laboratory tests undertaken? Yes No Unknown

Key: Y = Yes N = No NT = not tested U = unknown (circle relevant results below)

Test date	Specimen type	Direct smear positive	Culture positive	PCR Positive
/ /		Y N NT U	Y N NT U	Y N NT U
/ /		Y N NT U	Y N NT U	Y N NT U
/ /		Y N NT U	Y N NT U	Y N NT U
/ /		Y N NT U	Y N NT U	Y N NT U
/ /		Y N NT U	Y N NT U	Y N NT U
/ /		Y N NT U	Y N NT U	Y N NT U

Histology Results:

Test date ___ / ___ / _____

- Yes, histology changes consistent with active TB
- No, histology changes inconsistent with active TB
- Not tested
- Unknown

TB Page 3 - Risk Data

NDD no. _____

- | | | | |
|---|---|---|---|
| 1. Household member or contact with TB | Y | N | U |
| 2. Currently or recently homeless / residing in a shelter (< 5 years ago) | Y | N | U |
| 3. Currently or recently residing in an institution (correctional facility or long term care facility < 5 years ago) | Y | N | U |
| 4. Currently or previously employed in an institution (correctional facility, long term care facility, homeless shelter <5 years ago) | Y | N | U |
| 5. Ever employed in the health industry | Y | N | U |
| 6. Immune-suppressive health status / therapy | Y | N | U |
| 7. Born in a high risk country | Y | N | U |
| 8. Past residence (3 months or more) in a high risk country | Y | N | U |
| 9. Child (Australian born), of parent(s) born in high risk country | Y | N | U |
| 10. Previously diagnosed with TB | Y | N | U |
| 11. Other | Y | N | U |

HIV test undertaken: Yes No Declined Not offered testing

HIV test result: Positive Negative Indeterminate Unknown

Length of stay in Australia (in years): _____

- TBU history:**
- Never been on a TBU
 - Previously on a TBU
 - Currently on Onshore TBU
 - Currently on Offshore TBU
 - Currently on Offshore & Onshore TBU
 - Australian born
 - Unknown

- BCG Vaccination history:**
- Never vaccinated
 - Unknown
 - Vaccinated

Sputum Conversion:	Smear converted by 3 months	0
	Smear not converted by 3 months	0
	Smear negative at diagnosis	0
	Extrapulmonary / not tested	0
	Unknown / not evaluated	0

Out come Data:

Completed	Treatment completed sputum not tested	0
Cured	Culture negative on treatment completion	0
Defaulted	Failed to complete treatment	0
Died of other cause	Died before commencing or during treatment of a cause other than TB	0
Died of TB	Died before commencing or during treatment as a result of TB disease	0
Failure	Smear / culture positive \geq 5 months after treatment commenced	0
Incomplete	Continues on TB treatment	0
Transferred	Overseas	0
Treatment interrupted	Treatment interrupted for > 2 months before treatment completed	0
Unknown	Not followed up, outcome unknown	0

Contract Tracing Summary:

Number of contacts identified _____

Number of contacts screened _____

Number of contacts **not** completing screening _____

Number of contacts with active TB _____

Number of contacts TST positive on initial screening _____

Number of contacts TST positive with risk factors for TB exposure/BCG vaccination _____

Number of contacts with TST conversion _____

Number of contacts commenced on preventive treatment _____

Date form completed _____