



State of Connecticut

Department of Public Health

INSTRUCTIONS FOR COMPLETING THE REVISED CONTACT INVESTIGATION WORKSHEET (TB-5)

The State of Connecticut Tuberculosis Control (TB) Program has revised the Contact Investigation Worksheet (TB-5). Please be sure to fill out the worksheet as completely as possible. There are new variables and information being collected.

Infectious period: The start date is determined by the onset of symptoms. Go back three months from onset and test closest contacts. The end date of infectious period can be determined in consultation with the State TB Program and/or treating physicians.

Exposure Setting Codes: Indicate where the contact was exposed to the suspect/confirmed case in the box next to the contact information. If other, please specify.

Risk Factor Codes: Indicate whether the contact has any additional risk factors (other than being a contact) in the box under the exposure setting code box. Leave blank if there is no additional risk factors.

Report and date: TB Control Program use only.

Contact information: Demographic/locating information.

<8 weeks TST/QFT (Quantiferon blood test): Indicate which test was used for the initial round of contact testing. Note the tuberculin skin test (TST) results in numerical millimeters, even if the result is negative. 5mm or greater is considered positive for contacts of suspect/confirmed cases of TB.

>8 weeks TST/QFT: Indicate which test was used for the second round of contact testing. The second round of testing should be performed 8-10 weeks after the last known exposure to the case or the end of the infectious period (see above).

CXR: Contacts with positive TST (>5mm) or positive QFT for recent exposure need a CXR to rule out TB disease.

HIV: It is strongly recommended that HIV testing be made available to all contacts who are TST positive, QFT positive, or contacts to HIV positive suspect/confirmed case of TB.

LTBI treatment: Indicate any start/end of treatment for latent TB infection (LTBI) or window prophylaxis. If no treatment started for positive TST/QFT results, please indicate the reason. Complete provider information for follow-up care.



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