

SUSPECTED TUBERCULOSIS (PEDIATRIC)

REFERRAL GUIDELINE

MAINE MEDICAL PARTNERS - PEDIATRIC SPECIALTY CARE (DIV. OF INFECTIOUS DISEASE) • 887 CONGRESS ST, PORTLAND, ME • (207) 662-5522

HIGH RISK

SUGGESTED EMERGENT CONSULTATION

SYMPTOMS AND LABS

Fevers, weight loss, night sweats
 On exam may have abnormal chest exam, lymphadenopathy
 Positive PPD or positive interferon assay
 Abnormal chest x-ray

SUGGESTED PREVISIT WORKUP

Contact MMP PSC ID 662-5522 option 9 to discuss evaluation and possible hospital admission

MODERATE RISK

SUGGESTED CONSULTATION OR CO-MANAGEMENT

SYMPTOMS AND LABS

Patient is well. TB testing done for routine screen (i.e. pre-volunteer, college physical, international adoptees, refugees, or immigrants)
 Normal exam
 Positive PPD or positive interferon assay
 Normal chest x-ray

SUGGESTED WORKUP

Referral to MMP - Pediatric Specialty Care ID: (207) 662-5522 option 9.
 Assessment will be made about need for preventative therapy

LOW RISK

SUGGESTED ROUTINE CARE

SYMPTOMS AND LABS

Child with prior effective preventative therapy or treatment for tuberculosis
 Normal exam
 No labs necessary

SUGGESTED MANAGEMENT

Reasonable to have non-urgent call with pediatric ID physician about prior evaluation and management

CLINICAL PEARLS

- Prior to patient visit, please send patient visit notes, Date/size of PPD or Interferon results, imaging, LFTs and CBC with diff results with referral. If imaging is not available in IMPAX, please supply on disc/CD if possible.
- PPD, interferon testing may be done at our office.
- Let office know if interpreter services will be necessary.