TUBERCULOSIS (TB) DISCHARGE NOTIFICATION

ONLY - Low Risk TB Suspects – ONLY

- If your patient is a **low risk suspect** for active TB disease and meets the four conditions below, he / she may be discharged without prior authorization from the Santa Cruz County Communicable Disease Unit (CDU) once this form is completed and faxed with the required documentation.

  - **Four Required Conditions:**
    - Resident of Santa Cruz County; not homeless
    - Immunocompetent adult
    - Released from airborne isolation
    - Has a **completed** infectious disease (ID) consultation indicating that he / she is a low risk suspect for active TB disease.

- Please fully complete Parts I and II below, and fax this form with the required documentation to the Santa Cruz County CDU at 831-454-5049.

### To be Completed by the Discharging Facility

<table>
<thead>
<tr>
<th>Name:</th>
<th>Date of Birth:</th>
<th>Discharging Facility:</th>
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<th>County of Residence:</th>
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#### Part I
**Patient was released from airborne isolation; it is unlikely he /she has active TB disease.**

**Date** released from respiratory isolation per hospital policy and procedure: _____________________

#### Part II
**Infectious Disease (ID) consultation has been completed**

**Date** ID consultation completed: __________________

- **ID consultation report must be faxed to the Santa Cruz County CDU with this form to be exempt from the prior authorization requirement for TB discharge.**

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<th>Form Completed by:</th>
<th>Date Completed:</th>
<th>Phone Number:</th>
<th>Fax Number:</th>
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