Flowchart for TB - Acute Leukemia at VGH and pre-allogeneic/autologous BMT (L/BMT)

INPATIENT NEW LEUKEMIA Assess: Birth in high incidence country for TB? Stayed in high incidence country for ≥3 more months? 3. Prior history of exposure OR treatment for TB (active or latent) OR previous positive TB skin test (TST) or IGRA?@ 4. CT or CXR changes suggestive of prior TB (e.g. granulomas, apical scarring)? Any YES Rule out Active TB Lymphocyte NO for all count > 0.5 ? questions NO YES Clearance Order IGRA or prior IGRA Imaging abnormal AND IGRAborn in high incidence result available country? IGRA+ NO YES Okay to start Monitor for signs/symptoms LTBI? of active TB. Exceptions may require treatment of LTBI (e.g. history of exposure OR + NO ANY YES TST) PATIENT ON LTBI Complete and fax TB Consult Initiate LTBI treatment Transplant Physician transplant ID to when feasible. Referral form fax to initiate LTBI Monitor for OR IGRA coordinate medication and treatment signs/symptoms POSITIVE

of active TB.

follow-up 604-707-2690

^{**}Consult transplant ID for inpatient medication initiation. Send to TB Services at discharge for medication initiation. TB Services defines high incidence country as > 40/100,000. https://www.who.int/tb/country/data/profiles/en