

Reporting Form Completion Guidelines Version 1.5

For use with:

Active Tuberculosis Case Report Form – New and Relapsed Cases Treatment Outcome of a New Active or Relapsed Tuberculosis Case

NOTE:

The reporting province/territory is the province/territory of usual residence.

Please complete all fields as allowed within the privacy laws of the reporting province/territory.

Cases Reported to the Canadian Tuberculosis Reporting System

Confirmed Case

Laboratory confirmed case

Cases with Mycobacterium tuberculosis complex demonstrated on culture, specifically *M. tuberculosis*, *M. africanum*, *M. canetti*, *M. caprae*, *M. microti*, *M. pinnipedii* or *M. bovis* [excluding *M. bovis* BCG strain]

Clinically confirmed Case

In the absence of culture proof, cases clinically compatible with active tuberculosis that have, for example:

- i. chest x-ray changes compatible with active tuberculosis;
- ii. active extrapulmonary tuberculosis (meningeal, bone, kidney, peripheral lymph nodes etc.);
- iii. pathologic or post-mortem evidence of active tuberculosis;
- iv. favourable response to therapeutic trial of anti-tuberculosis drugs.

Reporting

Report all cases of tuberculosis diagnosed in Canada among the various groups: Canadian born, immigrants, refugees, refugee claimants, work visas, student visas, visitor visas, other visitors, migrant workers and foreign nationals without status in Canada.

EXCEPT: For non-Canadians traveling, with or without a visa, and stopping in Canada en route, <u>report only TB</u> <u>cases for which treatment was started in Canada</u>. The province/territory where treatment starts is to report the case.

New and relapsed cases of tuberculosis

New Case

No documented evidence or adequate history of previously active tuberculosis.

Relapsed Case

Documented evidence or adequate history of previously active tuberculosis that became inactive* but now meets the active tuberculosis case definition.

- * Definition of inactive tuberculosis:
 - i. cultures for Mycobacterium tuberculosis negative for at least six months; or
 - ii. in the absence of cultures, chest (or other) x-rays have been stable for a minimum of six months.

Please send one copy of the notification form through your provincial/territorial TB program to:

Tuberculosis Prevention and Control

Community Acquired Infections Division Centre for Infectious Disease Prevention and Control Public Health Agency of Canada 100 Eglantine Driveway A.L. 0603B, Tunney's Pasture Ottawa, ON K1A 0K9 Tel: (613) 941-0238 Fax: (613) 946-3902



Completion of Form

BOX 1: Reporting province/territory

The reporting province/territory is the province/territory of usual residence. Enter the corresponding **number code** provided below.

PROVINCE/TERRITORY CODES

48 Alberta

- 59 British Columbia
- 46 Manitoba
- 13 New Brunswick
- 10 Newfoundland and Labrador
- 61 Northwest Territories
- 12 Nova Scotia
- 62 Nunavut
- 35 Ontario
- 11 Prince Edward Island
- 24 Quebec
- 47 Saskatchewan
- 60 Yukon

BOXES 2 AND 3: Register case number/Unique identifier

Complete one or both depending on your province's/territory's numbering system.

BOX 2: Register case number

This number should uniquely identify the case. If your province/territory does not typically provide the number a suggested format for this field could be as follows: **ccyypp###** where **cc** is the century, **yy** is the year of diagnosis, **pp** is the provincial/territorial number and **###** is a three digit number with the first case being 001.

For example: The first case reported from PEI for the year 2007 would be: 200711001.

BOX 3: Unique identifier

This should be a number that identifies the person.

BOX 6: Usual residence

The usual residence is the address of the patient at the time of diagnosis.

Usual Residence - Postal Code (X1X1X1). If not permitted to provide all six characters of the postal code, the first three are acceptable.

PLEASE NOTE: The item "LIVES ON FIRST NATION'S RESERVE MOST OF THE TIME?" is to be answered for all individuals.

For example: If a non-aboriginal person lives on a reserve, full time, because he is working on the reserve, the answer to the question "Lives on First Nation's reserve most of the time?" for this person would be **YES**.

BOX 7: Canadian born?

Option 1: Status Indian (Registered)

Status Indians are people registered with the federal government as Indians, according to the terms of the Indian Act. Status Indians are also known as Registered Indians.

Option 2: Métis

Aboriginal people of mixed First Nation and European ancestry who identify themselves as Métis, distinct from First Nations people, Inuit or non-Aboriginal people.

Option 3: Inuit

An Aboriginal person in northern Canada, who live primarily in Nunavut, Northwest Territories, northern Quebec and northern Labrador. The word means "people" in the Inuit language – Inuktitut.



Option 4: Other Aboriginal (*specify***)**

Refers to those persons, born in Canada, who reported at least one Aboriginal origin not covered under Status Indian, Métis or Inuit groups (e.g.: Non-status Indian).

Option 5: Canadian-born non-Aboriginal

For country of birth of mother/country of birth of father, please enter the appropriate numeric code found in Appendix A.

Option 6: Foreign-born

For country of birth, enter the appropriate numeric code found in Appendix A.

Date of arrival: For all foreign-born cases enter the date of first arrival in Canada (if full date is unavailable, indicate the year).

Immigration status at time of diagnosis

Immigration status at time of diagnosis is necessary to assess the effectiveness of the immigration TB screening program and to determine rates of disease within specific subgroups of the population.

Option 8: Other (specify)

Includes short-term (< 6 months) stay.

Option 9: Unknown

If the immigration status at the time of diagnosis is unknown, please indicate by checking Box 9.

BOX 8: Date of diagnosis

Defined as the earlier date of:

a. Clinical diagnosis (positive smear, pathology, x-ray or starting treatment);

OR

b. Culture confirmation.

Diagnosis

The diagnosis codes are based on the International Classification of Diseases (ICD-CA) version 9 or 10, depending on which coding structure your province/territory is using. Record all appropriate ICD-CA code(s). See Appendix B.

BOX 9: Chest x-ray

Results obtained within one month before or after the start of treatment.

BOXES 10 and 11: Microscopy/Culture

- For each type of specimen submitted for analysis, please report the results of microscopy and culture laboratory tests. If initial specimens of a certain type are negative and later ones are positive, report the specimens of that type as positive.
- If results cannot be interpreted or are unknown, enter as "unknown".
- If tests were not done, enter as "not done" as is the case for a clinical diagnosis.
- Under "other", please report type of specimen (e.g., bone) in the appropriate category box (i.e., Negative, Positive, Not done, Unknown or Not applicable,).

Before submitting a notification, please wait until the results of the microscopy, culture and genotyping (if done) are available.

BOX 12: Case criteria

Indicate whether the diagnosis was a clinical diagnosis only, or whether it was confirmed through culture.

NOTE: In the event that diagnosis was confirmed with a positive culture, there should be an entry in BOX 11 indicating a positive culture. Use of DNA amplification or PCR technology, rather than culture, to confirm a case is not standard practice and therefore unless culture is performed, indicate clinical diagnosis.



BOX 13: If initial positive culture – Antibiotic resistance?

For each of the 1st line drugs listed please indicate whether the result was susceptible, resistant or unknown. If the drug was not tested please check 'Not Done'.

If the test result is borderline resistant or sensitive, the isolate is to be sent to another lab for repeat testing or sent to National Reference Centre for Mycobacteriology for genotyping of molecular targets.

Codes of drugs

EMB – Ethambutol	INH - Isoniazid
PZA – Pyrazinamide	RMP – Rifampin

If second-line resistance was tested, please indicate all drugs that were tested. Please note that as of 2005 streptomycin (SM) is considered a second line drug in Canada, even though it may be one of the drugs initially prescribed.

Listed are the classes of second line drugs currently used and examples within each class.

CLASS	EXAMPLES
Aminoglycosides	amikacin, kanamycin, streptomycin
Cyclic Polypeptides	capreomycin
Cycloserine	cycloserine
Fluoroquinolones	ciprofloxacin, gatifloxacin, levofloxacin, moxifloxacin, ofloxacin, sparfloxacin
Rifamycin	rifabutin
Salicylic acid – anti folate	para-aminosalicylate (PAS)
Thioamides	ethionamide

BOX 14: Genotyping results

Report if available at the time of reporting.

BOX 15: Date treatment started

Indicate the date the treatment started.

BOX 16: Initial drugs prescribed (check all that apply)

List all of the initial drugs prescribed, both first line and second line. Note that as of January 2005 streptomycin is considered a second line drug in Canada, although it may be one of the drugs initially prescribed.

BOX 17: Death before or during treatment?

Indicate if death occurred before or during treatment. If yes, provide the date of death, and the whether TB was the cause of death, contributed to the death or did not contribute to the death.

BOX 18: First episode of TB disease?

Please indicate "**No**" only if the individual has had a previous episode of **TB disease**. If the individual has had a previous diagnosis of latent TB infection (LTBI), indicate, "**Yes**".

If the case represents a third or fourth case, to complete "Year of previous diagnosis", please indicate the year of the most recent episode.

BOX 19: Case finding

Only one item should be filled in per case.

BOX 20: Risk factors

The collection of risk factor information is important to determine the relative contribution of each risk factor/marker to the total number of cases. In turn, this information will help guide the development of prevention and control strategies. For the risk factors listed, please indicate if they are present or not. If unknown, please indicate. Definitions for some risk factors are provided below.



NOTE: If reporting province/territory has an alternate definition for the risk factors it is appropriate to continue using the provincial/territorial definition.

HIV status

Can be self-reported test result if documentation is not easily accessible.

Substance abuse

The fourth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM_IV) issued by the American Psychiatric Association defines substance abuse as:

A maladaptive pattern of substance use leading to clinically significant impairment or distress, as manifested by one (or more) of the following, occurring within a 12-month period:

- Recurrent substance use resulting in a failure to fulfill major role obligations at work, school, or home (e.g., repeated absences or poor work performance related to substance use; substance-related absences, suspensions or expulsions from school; neglect of children or household);
- Recurrent substance use in situations in which it is physically hazardous (e.g., driving an automobile or operating a machine when impaired by substance use);
- · Recurrent substance-related legal problems (e.g., arrests for substance-related disorderly conduct; and/or
- Continued substance use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of the substance (e.g., arguments with spouse about consequences of intoxication, physical fights).

Silicosis

Silicosis is a respiratory disease caused by inhalation of silica dust, which leads to inflammation and scarring of the lung tissue.

http://www.nlm.nih.gov/medlineplus/ency/article/000134.htm.

End-stage renal disease

End-stage kidney disease is defined as a complete or near complete failure of the kidneys to function to excrete wastes, concentrate urine, and regulate electrolytes. Also called end-stage renal disease (ESRD). http://www.nlm.nih.gov/medlineplus/ency/article/000500.htm.

Previous abnormal chest x-ray

Includes fibronodular disease.

Homeless

Lacks a fixed, regular and adequate night-time residence and has a night-time residence that is:

- A supervised publicly or privately operated shelter designed to provide temporary living accommodations;
- An institution that provides a temporary residence for individuals intended to be institutionalized; or
- A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings. (This does not include prisoners. It is interpreted to include only those persons who are literally homeless, i.e. on the streets or in shelters and persons who face imminent eviction, within a week, from a private dwelling or institution and who have no subsequent residence or resources to obtain housing. http://www.nationalhomeless.org/publications/facts/Whois.pdf.)

Other risk factors

Includes: (based on Canadian Tuberculosis Standards, 6th edition)

- Carcinoma of the head and neck
- Cigarette smoker (I package per day or more)
- Congenital or acquired immunodeficiency disorders
- Leukemia
- Lymphoma
- Recent TB infection (within 2 years)
- Tumour necrosis factor (TNF) alpha inhibitor
- Underweight (in most people defined as BMI <= 20)
- Young age when infected (0-4 years)



Treatment Outcome of a New Active or Relapsed Tuberculosis Case Reporting Form Completion Guidelines

This form is to be completed twelve months after the date of diagnosis by the province/territory that initially reported the case. Please complete this form even if treatment is still in progress after twelve months. Report the status at twelve-month intervals until the case is closed. If the patient has transferred to another province/territory after diagnosis (and registration by the reporting province/territory) and is receiving treatment in the province/territory to which they transferred, the treating province/territory is to forward the completed treatment outcome form to the reporting province/territory to facilitate reporting of the treatment outcome information. If this treatment outcome form is not received, the reporting province/territory should contact the treating province/territory.

Please complete all fields as allowed within the laws of the reporting province/territory.

Completion of Form:

BOX 1: Reporting province/territory

The province/territory that originally reported the case should report the outcome.

BOX 2: Register case number

For each individual case, please ensure that the register case number on the outcome form matches the register case number on the new and relapsed case form.

BOX 3: Unique identifier

BOX 4: Date of birth

Indicate the date of birth, Year/Month/Day. This should be the same date as appeared on the original case report form.

BOX 5: Sex

Indicate the sex of the patient in the boxes provided.

BOX 6: Province/territory of treatment

If transfer from diagnosing province/territory, please state the treating province/territory. If diagnosing province/ territory unknown, please indicate.

BOX 7: Register case number

If different from the number reported in BOX 2.

BOX 8: Unique identifier

If different from that reported in BOX 3.

BOX 9: Date of diagnosis

Date of diagnosis is defined as the earlier date of:

- a. clinical diagnosis (positive smear, pathology, x-ray or starting treatment);
- OR
- b. culture confirmation.

BOX 10: Date treatment started.

Indicate the first day the patient received treatment.

BOX 11: Last day of treatment

Indicate the last day the patient received treatment for the current reported TB case.

BOX 12: Initial drugs prescribed:

Indicate all the drugs that were initially prescribed for treatment.

BOX 13: Did resistance develop during treatment?

If yes, indicate all drugs to which individual showed any resistance.



If the test result is borderline resistant or sensitive, the isolate is to be sent to another lab for repeat testing or sent to National Reference Centre for Mycobacteriology for genotyping of molecular targets.

BOX 14: What was the treatment outcome?

Please check the appropriate box.

Cure: a patient who is culture negative at the completion of treatment.

For MDR-TB (resistance to at least rifampin and isoniazid) a patient has been consistently culture-negative (with at least five results) for the final 12 months of treatment. If there was only one positive culture with no clinical evidence of deterioration, a patient may be considered cured provided that the positive culture is followed by at least three consecutive negative cultures taken at least 30 days apart.

Treatment completed: a patient who has completed treatment but does not meet the criteria for cure or failure.

Death before or during treatment: a patient who dies before treatment or during the course of treatment and TB was the cause of death, TB contributed to death but was not the underlying cause or TB did not contribute to death.

Transfer: a patient who has transferred out of country and the outcome of treatment is unknown.

Treatment failure (active TB): Positive sputum cultures after 4 or more months of treatment or two positive sputum cultures in different months during the previous 3 months of treatment, even if the final culture is negative.

For MDR-TB (resistance to at least isoniazid and rifampin), treatment is considered to have failed if: 2 or more of 5 cultures recorded in the final 12 months are positive; or any one of the final 3 cultures is positive; or if a clinical decision has been made to terminate treatment early due to poor response or adverse events

Absconded: a patient was lost to follow-up before completion of 80% of doses.

Other: Please specify the outcome in the space provided.

BOX 15: Treatment regimen (for drugs taken > 1 month)

i.

ii.

Please check the appropriate box(es).

This information is needed even though Initial Drugs Prescribed appears on the Active Tuberculosis Case Report Form. The treatment regimen may have changed during the course of treatment and this information is used for evaluation purposes.

BOX 16: Major mode of treatment

Please check the appropriate box. If 'Other', please specify in the space provided. If the mode of treatment was Directly Observed Treatment (DOT) indicate DOT on the form. If available, please indicate whether it was Modified DOT, Standard DOT or Enhanced DOT.

Definition:

DOT (Directly observed therapy): Refers to treatment where the patient is observed swallowing each dose of medication.

- Modified DOT refers to DOT for only part of the treatment period, typically during the initial phase, followed by self-administered therapy during the continuation phase.
- Standard DOT refers to DOT throughout the initial phase and the continuation phase.
- iii. Enhanced DOT refers to DOT throughout both phases but also includes incentives and enablers.

BOX 17: Adherence estimate

Please check the appropriate box indicating the extent of the patient's adherence to treatment based on percentage of prescribed medication actually received.

In the event that the patient died during treatment, the adherence estimate will be the proportion of the amount of medication taken over the amount prescribed up to the time of death.



APPENDIX A

Country Codes and the STOP-TB Partnership / WHO TB Epidemiological Regions*

Country	Code	Region
Afghanistan	4	Eastern Mediterranean
Albania	8	Established Market Economies & Central Europe
Algeria	12	Africa, Low HIV Prevalence
American Samoa	16	Western Pacific Region
Andorra	20	Established Market Economies & Central Europe
Angola	24	Africa, Low HIV Prevalence
Antigua and Barbuda	28	American Region - Latin American and Caribbean Countries
Azerbaijan	31	Eastern Europe
Argentina	32	American Region - Latin American and Caribbean Countries
Australia	36	Established Market Economies & Central Europe
Austria	40	Established Market Economies & Central Europe
Bahamas	44	American Region - Latin American and Caribbean Countries
Bahrain	48	Eastern Mediterranean
Bangladesh	50	South-East Asia
Armenia	51	Eastern Europe
Barbados	52	American Region - Latin American and Caribbean Countries
Belgium	56	Established Market Economies & Central Europe
Bermuda	60	American Region - Latin American and Caribbean Countries
Bhutan	64	South-East Asia
Bolivia	68	American Region - Latin American and Caribbean Countries
Bosnia and Herzegovina	70	Established Market Economies & Central Europe
Botswana	72	Africa, High HIV Prevalence
Brazil	76	American Region - Latin American and Caribbean Countries
Belize	84	American Region - Latin American and Caribbean Countries
Solomon Islands	90	Western Pacific Region
British Virgin Islands	92	American Region - Latin American and Caribbean Countries
Brunei Darussalam	96	Western Pacific Region
Bulgaria	100	Eastern Europe
Myanmar	104	South-East Asia
Burundi	108	Africa, High HIV Prevalence
Belarus	112	Eastern Europe
Cambodia	116	Western Pacific Region
Cameroon	120	Africa, High HIV Prevalence

Country	Code	Region
Canada	124	Established Market Economies & Central Europe
Cape Verde	132	
Cayman Islands	136	American Region - Latin American and Caribbean Countries
Central African Republic	140	Africa, High HIV Prevalence
Sri Lanka	144	South-East Asia
Chad	148	Africa, Low HIV Prevalence
Chile	152	American Region - Latin American and Caribbean Countries
China	156	Western Pacific Region
Colombia	170	American Region - Latin American and Caribbean Countries
Comoros	174	Africa, Low HIV Prevalence
Mayotte	175	
Congo	178	Africa, High HIV Prevalence
Democratic Republic of the Congo	180	Africa, High HIV Prevalence
Cook Islands	184	Western Pacific Region
Costa Rica	188	American Region - Latin American and Caribbean Countries
Croatia	191	Established Market Economies & Central Europe
Cuba	192	American Region - Latin American and Caribbean Countries
Cyprus	196	Eastern Mediterranean
Czech Republic	203	Established Market Economies & Central Europe
Benin	204	Africa, Low HIV Prevalence
Denmark	208	Established Market Economies & Central Europe
Dominica	212	American Region - Latin American and Caribbean Countries
Dominican Republic	214	American Region - Latin American and Caribbean Countries
Ecuador	218	American Region - Latin American and Caribbean Countries
El Salvador	222	American Region - Latin American and Caribbean Countries
Equatorial Guinea	226	Africa, Low HIV Prevalence
Ethiopia	231	Africa, High HIV Prevalence
Eritrea	232	Africa, Low HIV Prevalence
Estonia	233	Eastern Europe
Falkland Islands (Malvinas)	238	American Region - Latin American and Caribbean Countries
Fiji	242	Western Pacific Region
Finland	246	Established Market Economies & Central Europe
Åland Islands	248	

Country Codes and the STOP-TB Partnership / WHO TB Epidemiological Regions* (continued)

Country	Code	Region
France	250	Established Market Economies & Central Europe
French Guiana	254	American Region - Latin American and Caribbean Countries
French Polynesia	258	Western Pacific Region
Djibouti	262	Eastern Mediterranean
Gabon	266	Africa, High HIV Prevalence
Georgia	268	Eastern Europe
Gambia	270	Africa, Low HIV Prevalence
Occupied Palestinian Territory	275	
Germany	276	Established Market Economies & Central Europe
Ghana	288	Africa, Low HIV Prevalence
Gibraltar	292	Eastern Europe
Kiribati	296	Western Pacific Region
Greece	300	Established Market Economies & Central Europe
Greenland	304	
Grenada	308	American Region - Latin American and Caribbean Countries
Guadeloupe	312	American Region - Latin American and Caribbean Countries
Guam	316	Western Pacific Region
Guatemala	320	American Region - Latin American and Caribbean Countries
Guinea	324	Africa, Low HIV Prevalence
Guyana	328	American Region - Latin American and Caribbean Countries
Haiti	332	American Region - Latin American and Caribbean Countries
Holy See	336	
Honduras	340	American Region - Latin American and Caribbean Countries
Hong Kong Special	344	Western Pacific Region
Administrative Region of China		
Hungary	348	Established Market Economies & Central Europe
Iceland	352	Established Market Economies & Central Europe
India	356	South-East Asia
Indonesia	360	South-East Asia
Iran, Islamic Republic of	364	Eastern Mediterranean
Iraq	368	Eastern Mediterranean
Ireland	372	Established Market Economies & Central Europe
Israel	376	Established Market Economies & Central Europe

Country	Code	Region
Italy	380	Established Market Economies & Central Europe
Côte d'Ivoire	384	Africa, High HIV Prevalence
Jamaica	388	American Region - Latin American and Caribbean Countries
Japan	392	Established Market Economies & Central Europe
Kazakhstan	398	Eastern Europe
Jordan	400	Eastern Mediterranean
Kenya	404	Africa, High HIV Prevalence
Democratic People's Republic of Korea	408	South-East Asia
Republic of Korea	410	Western Pacific Region
Kuwait	414	Eastern Mediterranean
Kyrgyzstan	417	Eastern Europe
Lao People's Democratic Republic	418	Western Pacific Region
Lebanon	422	Eastern Mediterranean
Lesotho	426	Africa, High HIV Prevalence
Latvia	428	Eastern Europe
Liberia	430	Africa, Low HIV Prevalence
Libyan Arab Jamahiriya	434	Eastern Mediterranean
Liechtenstein	438	Eastern Europe
Lithuania	440	Eastern Europe
Luxembourg	442	Established Market Economies & Central Europe
Macao Special Administrative Region of China	446	Western Pacific Region
Madagascar	450	Africa, Low HIV Prevalence
Malawi	454	Africa, High HIV Prevalence
Malaysia	458	Western Pacific Region
Maldives	462	South-East Asia
Mali	466	Africa, Low HIV Prevalence
Malta	470	Established Market Economies & Central Europe
Martinique	474	American Region - Latin American and Caribbean Countries
Mauritania	478	Africa, Low HIV Prevalence
Mauritius	480	Africa, Low HIV Prevalence
Mexico	484	American Region - Latin American and Caribbean Countries
Monaco	492	Established Market Economies & Central Europe
Mongolia	496	Western Pacific Region
Republic of Moldova	498	Eastern Europe

Country Codes and the STOP-TB Partnership / WHO TB Epidemiological Regions* (continued)

Country	Code	Region
Montenegro	499	Established Market Economies & Central Europe
Montserrat	500	American Region - Latin American and Caribbean Countries
Morocco	504	Eastern Mediterranean
Oman	512	Eastern Mediterranean
Namibia	516	Africa, High HIV Prevalence
Nauru	520	Western Pacific Region
Nepal	524	South-East Asia
Netherlands	528	Established Market Economies & Central Europe
Netherlands Antilles	530	American Region - Latin American and Caribbean Countries
Aruba	533	American Region - Latin American and Caribbean Countries
New Caledonia	540	Western Pacific Region
Vanuatu	548	Western Pacific Region
New Zealand	554	Established Market Economies & Central Europe
Nicaragua	558	American Region - Latin American and Caribbean Countries
Niger	562	Africa, Low HIV Prevalence
Nigeria	566	Africa, High HIV Prevalence
Niue	570	Western Pacific Region
Norfolk Island	574	Western Pacific Region
Norway	578	Established Market Economies & Central Europe
Northern Mariana Islands	580	Western Pacific Region
Micronesia, Federated States of	583	Western Pacific Region
Marshall Islands	584	Western Pacific Region
Palau	585	Western Pacific Region
Pakistan	586	Eastern Mediterranean
Panama	591	American Region - Latin American and Caribbean Countries
Papua New Guinea	598	Western Pacific Region
Paraguay	600	American Region - Latin American and Caribbean Countries
Peru	604	American Region - Latin American and Caribbean Countries
Philippines	608	Western Pacific Region
Pitcairn	612	
Poland	616	Established Market Economies & Central Europe
Portugal	620	Established Market Economies & Central Europe
Guinea-Bissau	624	Africa, Low HIV Prevalence
Timor-Leste	626	South-East Asia

Country	Code	Region
Puerto Rico	630	American Region - Latin American and Caribbean Countries
Qatar	634	Eastern Mediterranean
Réunion	638	
Romania	642	Eastern Europe
Russian Federation	643	Eastern Europe
Rwanda	646	Africa, High HIV Prevalence
Saint Helena	654	
Saint Kitts and Nevis	659	American Region - Latin American and Caribbean Countries
Anguilla	660	American Region - Latin American and Caribbean Countries
Saint Lucia	662	American Region - Latin American and Caribbean Countries
Saint Pierre and Miquelon	666	
Saint Vincent and the Grenadines	670	American Region - Latin American and Caribbean Countries
San Marino	674	Established Market Economies & Central Europe
Sao Tome and Principe	678	Africa, Low HIV Prevalence
Saudi Arabia	682	Eastern Mediterranean
Senegal	686	Africa, Low HIV Prevalence
Serbia	688	Established Market Economies & Central Europe
Seychelles	690	Africa, Low HIV Prevalence
Sierra Leone	694	Africa, Low HIV Prevalence
Singapore	702	Established Market Economies & Central Europe
Slovakia	703	Established Market Economies & Central Europe
Viet Nam	704	Western Pacific Region
Slovenia	705	Established Market Economies & Central Europe
Somalia	706	Eastern Mediterranean
South Africa	710	Africa, High HIV Prevalence
Zimbabwe	716	Africa, High HIV Prevalence
Spain	724	Established Market Economies & Central Europe
Western Sahara	732	Eastern Mediterranean
Sudan	736	Eastern Mediterranean
Suriname	740	American Region - Latin American and Caribbean Countries
Svalbard and Jan Mayen Islands	744	
Swaziland	748	Africa, High HIV Prevalence
Sweden	752	Established Market Economies & Central Europe
Switzerland	756	Established Market Economies & Central Europe



Country Codes and the STOP-TB Partnership / WHO TB Epidemiological Regions* (continued)

Country	Code	Region
Syrian Arab Republic	760	Eastern Mediterranean
Tajikistan	762	Eastern Europe
Thailand	764	South-East Asia
Тодо	768	Africa, Low HIV Prevalence
Tokelau	772	Western Pacific Region
Tonga	776	Western Pacific Region
Trinidad and Tobago	780	American Region - Latin American and Caribbean Countries
United Arab Emirates	784	Eastern Mediterranean
Tunisia	788	Eastern Mediterranean
Turkey	792	Eastern Europe
Turkmenistan	795	Eastern Europe
Turks and Caicos Islands	796	American Region - Latin American and Caribbean Countries
Tuvalu	798	Western Pacific Region
Uganda	800	Africa, High HIV Prevalence
Ukraine	804	Eastern Europe
The former Yugoslav Republic of Macedonia	807	Eastern Europe
Egypt	818	Eastern Mediterranean
United Kingdom of Great Britain and Northern Ireland	826	Established Market Economies & Central Europe
Channel Islands	830	
Guernsey	831	
Jersey	832	
Isle of Man	833	
United Republic of Tanzania	834	Africa, High HIV Prevalence
United States of America	840	Established Market Economies & Central Europe
United States Virgin Islands	850	American Region - Latin American and Caribbean Countries
Burkina Faso	854	Africa, Low HIV Prevalence
Uruguay	858	American Region - Latin American and Caribbean Countries
Uzbekistan	860	Eastern Europe
Venezuela (Bolivarian Republic of)	862	American Region - Latin American and Caribbean Countries
Wallis and Futuna Islands	876	Western Pacific Region
Samoa	882	Western Pacific Region
Yemen	887	Eastern Mediterranean
Zambia	894	Africa, High HIV Prevalence

APPENDIX B

Code Table Listing by ICD-9 Code for DIAGNOSIS

010 Primary Tuberculosis

- 010.0 Primary tuberculous complex
- 010.1 Tuberculous pleurisy in primary progressive tuberculosis

This disease state is characterized by pleuritis and pleural effusion, usually in an adolescent or young adult, but possibly in any age group, due to recent (within the preceding 24 months) infection with *Mycobacterium tuberculosis* complex. If another site of tuberculosis disease such as CNS or disseminated/miliary disease is believed to have occurred as a consequence of recent infection (within the preceding 24 months), it ought to be referred to as CNS or miliary tuberculosis.

010.8 Other primary progressive tuberculosis (excl. tuberculous erythema nodosum {017.1})

This is usually, but not always, in a child, and is due to infection within the preceding 24 months with *Mycobacterium tuberculosis* complex. It includes pulmonary (lung parenchyma) tuberculosis, as well as tuberculosis of the intrathoracic lymph nodes, larynx, trachea, bronchus, or nasopharyngeal sinuses.

010.9 Unspecified

011 Pulmonary Tuberculosis (with associated silicosis use code 502)

- 011.0 Tuberculosis of lung, infiltrative
- 011.1 Tuberculosis of lung, nodular
- 011.2 Tuberculosis of lung with cavitation
- 011.3 Tuberculosis of bronchus (excl. isolated bronchial TB {012.2})
- 011.4 Tuberculous fibrosis of lung
- 011.5 Tuberculous bronchiectasis
- 011.6 Tuberculous pneumonia (any form)
- 011.7 Tuberculous pneumothorax
- 011.8 Other pulmonary tuberculosis
- 011.9 Unspecified (respiratory tuberculosis NOS, tuberculosis of lung NOS)

012 Other Respiratory Tuberculosis (excl. respiratory tuberculosis, unspecified {011.9})

- 012.0 Tuberculous pleurisy
- 012.1 Tuberculosis of intrathoracic lymph nodes
- 012.2 Isolated tracheal or bronchial tuberculosis
- 012.3 Tuberculous laryngitis
- 012.8 Other (incl. tuberculosis of: mediastinum, nasopharynx, nose (septum), sinus (any nasal)

013 Tuberculosis of Meninges and Central Nervous System

- 013.0 Tuberculous meningitis (320.4) (excl. tuberculoma of meninges {013.1})
- 013.1 Tuberculoma of meninges (349.2)
- 013.8 Other (tuberculoma/tuberculosis of brain {348.8}, tuberculous abscess of brain {324.0}, tuberculous myelitis {323.4})
- 013.9 Unspecified (tuberculosis of central nervous system NOS)

014 Tuberculosis of Intestines, Peritoneum and Mesenteric Glands

Tuberculosis of: anus, intestine (large, small), rectum, retroperitoneal (lymph nodes) Tuberculous: ascites, enteritis, peritonitis (567.0)

015 Tuberculosis of Bones and Joints

Incl. tuberculous: arthritis (711.4), necrosis of bone (730.-), osteitis (730.-), osteomyelitis (730.-), synovitis (727.0), tenosynovitis (727.0).

- 015.0 Vertebral column
 - Pott's: curvature (737.4), disease (730.4)
 - Tuberculous: kyphosis (737.4), spondylitis (720.8)
- 015.1 Hip
- 015.2 Knee
- 015.7 Other bone (tuberculous dactylitis, mastoiditis {383.1})



- 015.8 Other joint
- 015.9 Unspecified

016 Tuberculosis of Genitourinary System

- 016.0 Kidney (tuberculous pyelitis {590.8}, tuberculous pyelonephritis {590.8})
- 016.1 Other urinary organs (tuberculosis of bladder {595.4}, tuberculosis of ureter {593.8})
- 016.2 Epididymis (604.9)
- 016.3 Other male genital organs (tuberculosis of: prostate {601.4}, seminal vesicle {608.8}, testis {608.8})
- 016.4 Female genital organs (tuberculous: oophoritis {614.2}, salpingitis {614.2})
- 016.9 Unspecified

017 Tuberculosis of Other Organs

- 017.0 Skin and subcutaneous cellular tissue
 - Lupus: NOS, exedens, vulgaris, Scrofuloderma
 - (excl. lupus erythrematosus {695.4}, disseminated {710.0})
 - Tuberculosis: colliquativa, cutis, lichenoides, papulonecrotica, verrucosa cutis
- 017.1 Erythema nodosum with hpersensitivity reaction in tuberculosis
 - Bazin's disease, Tuberculosis indurativa
 - Erythema: induratum, nodosum (tuberculous)
 - Excl. erythema nodosum NOS (695.2)
- 017.2 Peripheral lymph nodes (scrofula, scrofulous abscess, tuberculous adenitis)
- 017.3 Eye

Tuberculous: chorioretinitis, disseminated (363.1), episcleritis (379.0), interstitial keratitis (370.5), iridocyclitis (chronic) (364.1), keratoconjunctivitis (phlyctenular) (370.3)

017.4 Ear

Tuberculosis of ear (382.3), otitis media (382.3) (excl. Tuberculous mastoiditis {015.7})

- 017.5 Thyroid gland
- 017.6 Adrenal glands (255.4), Addison's disease (tuberculous)
- 017.7 Spleen
- 017.8 Other

Tuberculosis of: endocardium [any valve] (424.-), oesophagus (530.1), myocardium (422.0), pericardium (420.0)

018 Miliary Tuberculosis

Incl.: tuberculosis: disseminated, generalized, miliary (whether of a single specified site, multiple sites or unspecified site), polyserositis

- 018.0 Acute
- 018.8 Other
- 018.9 Unspecified

137 Late Effects of Tuberculosis

- 137.0 Late effects of respiratory or unspecified tuberculosis
- 137.1 Late effects of central nervous system tuberculosis
- 137.2 Late effects of genitourinary tuberculosis
- 137.3 Late effects of tuberculosis of bones and joints
- 137.4 Late effects of tuberculosis of other specified organs

502 Pneumoconiosis due to other silica or silicates (see Pulmonary Tuberculosis {011})

Pneumoconiosis due to talc Silicotic fibrosis (massive) of lung Silicosis (simple) (complicated)



Code Table Listing by ICD-10 Code for DIAGNOSIS

Source: ICD-10 CA/CCI Tabular List - CIHI, 2003

A15	Respiratory tuberculosis, bacteriologically and histologically confirmedIncludes:infections due to Mycobacterium tuberculosis and Mycobacterium bovisExcludes:congenital tuberculosis (P37.0)pneumoconiosis associated with tuberculosis (J65)sequelae of tuberculosis (B90-)eilioptuberculosis (J65)
A15.0	silicotuberculosis (J65) Tuberculous of lung, confirmed by sputum microscopy with or without culture Includes:
	Tuberculous: bronchiectasis fibrosis of lung pneumonia pneumothorax
A15.1	Tuberculosis of lung, confirmed by culture only Includes: Conditions listed in A15.0, confirmed by culture only
A15.2	Tuberculosis of lung, confirmed histologically Includes: Conditions listed in A15.0, confirmed histologically
A15.3	Tuberculosis of lung, confirmed by unspecified means Includes: Conditions listed in A15.0, confirmed but unspecified whether bacteriologically or
hist	tologically
A15.4	Tuberculosis of intrathoracic lymph nodes, confirmed bacteriologically and histologically Includes:
A15.5	Tuberculosis of lymph nodes: hilar mediastinal tracheobronchial Excludes: specified as primary (A15.7) Tuberculosis of larynx, trachea and bronchus confirmed bacteriologically and histologically Includes: Tuberculosis of: glottis larynx trachea
A15.6	Tuberculosis pleurisy (pleura, empyema) confirmed bacteriologically and histologically Excludes: Primary respiratory tuberculosis (A15.7)
A15.7	Primary respiratory tuberculosis, confirmed bacteriologically and histologically This is usually, but not always, in a child, and is due to infection within the preceding 24 months with <i>Mycobacterium tuberculosis</i> complex. It includes pulmonary (lung parenchyma) tuberculosis, as well as tuberculosis of the intrathoracic lymph nodes, larynx, trachea, bronchus, nasopharyngeal sinuses or pleura. If another site of tuberculosis disease such as CNS or disseminated/miliary disease is believed to have occurred as a consequence of recent infection (within the preceding 24 months), it ought to be referred to as CNS or miliary tuberculosis.
A15.8	Other respiratory tuberculosis, confirmed bacteriologically and histologically Includes: Mediastinal tuberculosis Nasopharyngeal tuberculosis Tuberculosis of:

- nose
- sinus [any nasal]

A15.9 Respiratory tuberculosis, unspecified, confirmed bacteriologically and histologically



A16 Respiratory tuberculosis, not confirmed bacteriologically or histologically

A16.0 Tuberculosis of lung, bacteriologically and histologically negative *Includes:*

Tuberculous:

- bronchiectasis fibrosis of lung pneumonia pneumothorax
- A16.1 Tuberculosis of lung, bacteriological and histological examination not done Includes: Conditions listed in A16.0, bacteriological and histological examination not done
- A16.2 Tuberculosis of lung, without mention of bacteriological or histological confirmation Tuberculosis of lung

Tuberculous:	
bronchiectasis	
fibrosis of lung	
pneumonia	
pneumothorax	

NOS (without mention of bacteriological or histological confirmation)

A16.3 Tuberculosis of intrathoracic lymph nodes, without mention of bacteriological or histological confirmation

Includes:

Tuberculosis of lymph nodes:	`	
hilar		
intrathoracic		l

NOS (without mention of bacteriological or histological confirmation)

Excludes: when specified as primary (A16.7)

mediastinal tracheobronchial

A16.4 Tuberculosis of larynx, trachea and bronchus, without mention of bacteriological or histological confirmation

Includes:

Tuberculosis of:			
bronchus			
glottis			
larynx			
trachea			

NOS (without mention of bacteriological or histological confirmation)

- A16.5 Tuberculous pleurisy, (pleura, empyema) without mention of bacteriological or histological confirmation. Excludes: primary respiratory tuberculosis (A16.7)
- A16.7 Primary respiratory tuberculosis without mention of bacteriological or histological confirmation This is usually, but not always, in a child, and is due to infection within the preceding 24 months with *Mycobacterium tuberculosis* complex. It includes pulmonary (lung parenchyma) tuberculosis, as well as tuberculosis of the intrathoracic lymph nodes, larynx, trachea, bronchus, nasopharyngeal sinuses or pleura. If another site of tuberculosis disease such as CNS or disseminated/miliary disease is believed to have occurred as a consequence of recent infection (within the preceding 24 months), it ought to be referred to as primary CNS or miliary TB.



A16.8 Other respiratory tuberculosis, without mention of bacteriological or histological confirmation

Mediastinal tuberculosis Nasopharyngeal tuberculosis **Tuberculosis of:** nose sinus [any part]

NOS (without mention of bacteriological or histological confirmation)

A16.9 Respiratory tuberculosis unspecified, without mention of bacteriological or histological confirmation Includes: Respiratory tuberculosis NOS Tuberculosis NOS

A17† Tuberculosis of nervous system

- A17.0† Tuberculous meningitis (G01*)
 - Includes: Tuberculosis of meninges (cerebral) (spinal) Tuberculous leptomeningitis
- A17.1† Meningeal tuberculoma (G07*) Includes: Tuberculoma of meninges
- A17.8† Other tuberculosis of nervous system *Includes:*

Tuberculoma of:

brain (G07*) spinal cord (G07*) **Tuberculosis of:** brain (G07*) spinal cord (G07*) **Tuberculous:** abscess of brain (G07*) meningoencephalitis (G05.0*) myelitis (G05.0*) polyneuropathy (G63.0*)

A17.9† Tuberculosis of nervous system, unspecified (G99.8*)

A18 Tuberculosis of other organs

A18.0† Tuberculosis of bones and joints Includes:

Tuberculosis of:

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hip (M01.1*)
knee (M01.1*)
vertebral column (M49.0*)
Tuberculous:
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arthritis (M01.1*)

mastoiditis (M75.0*) necrosis of bone (M90.0*) osteitis (M90.0*) osteomyelitis (M90.0*) synovitis (M68.0*) tenosynovitis (M68.0*)

A18.1 Tuberculosis of genitourinary system Includes:

Tuberculosis of:

bladder† (N33.0*) cervix† (N74.0*) kidney† (N29.1*) male genital organs† (N51.-*) ureter† (N29.1*) Tuberculous female pelvic inflammatory disease (N74.1*)

A18.2 Tuberculous peripheral lymphadenopathy *Includes:* Tuberculous adenitis



	Excludes:		
		Tuberculosis of lymph nodes: intrathoracic (A15.4, A16.3)	
		mesenteric and retroperitoneal (A18.3) Tuberculous tracheobronchial adenopathy (A15.4, A16.3)	
A18.3	Tuberculosis Includes:	of intestines, peritoneum and mesenteric lymph nodes	
		Tuberculosis (of): anus and rectum† (K93.0*) intestine (large) (small)† (K93.0*) retroperitoneal (lymph nodes) Tuberculous: ascites enteritis† (K93.0*) peritonitis† (K67.3*)	
A18.4 Inclu	Tuberculosis udes:	of skin and subcutaneous tissue Erythema induratum, tuberculous Lupus: exedens vulgaris: NOS of eyelid† (H03.1*) Scrofuloderma	
	Excludes:	lupus erythematosus (L93) systemic (M32)	
A18.5	Tuberculosis Includes:	of eye	
		Tuberculous: chorioretinitis† (H32.0*) episcleritis† (H19.0*) interstitial keratitis† (H19.2) iridocyclitis† (H22.0*) keratoconjunctivitis (interstitial) (phlyctenular)† (H19.2*)	
	Excludes:	lupus vulgaris of eyelid (A18.4)	
A18.6		of ear Tuberculosis otitis media† (H67.0*) Tuberculous mastoiditis (A18.0†)	
A18.7†	Tuberculosis Includes:	of adrenal glands (E35.1*) Addison's disease, tuberculous	
A18.8	Tuberculosis Includes:	of other specified organs	
		Tuberculosis of: endocardium† (I39.8*) myocardium† (I41.0*) oesophagus† (K23.0*) pericardium† (I32.0*) thyroid gland† (E35.0*) Tuberculous cerebral arteritis† (I68.1*)	
A19	Miliary Tuberculosis		
	Includes:	Tuberculosis: disseminated generalized Tuberculous polyserositits	

A19.0 Acute miliary tuberculosis of a single specified site



- A19.1 Acute miliary tuberculosis of multiple sites
- A19.2 Acute miliary tuberculosis, unspecified
- A19.8 Other miliary tuberculosis
- A19.9 Miliary Tuberculosis, unspecified