

West Virginia Department of Health and Human Resources - Division of TB Elimination
CONTACT REPORTING SHEET

HEALTH DEPARTMENT												
INDEX CASE: _____			DATE OF DX: _____			SITE OF DISEASE: _____						
CONTACTS												
CONTACTS NAME		BIRTHDATE	RELATIONSHIP TO CASE	CLOSE EXPOSURE		TST		T-SPOT	CHEST X-RAY	PREVENTIVE THERAPY STARTED	DX. AS CASE	COMMENTS
LAST, FIRST				YES	NO	DATE	mm	Date +/-	DATE			

TB-1001 (August 2014) – Complete for each newly verified case of active TB.