

National TB Control Programme

Programmatic Management of Drug Resistant Tuberculosis (PMDT)

Laboratory Register for Culture, Xpert MTB/RIF and Drug

Susceptibility Testing (for NTRL/RTRLs)

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Laboratory serial number e-TB number	Date of specimen received Date of specimen collected	Local lab ID	Type of specimen received	Date of specimen inoculated	Name & address of referring health authority with cell phone number	Patient name	Patient address and cell phone number	Sex M/F	Age	HIV status (yes/no/unknown)	*Type of patient	Current and previous TB registration number (if any)/ e-TB no. (if any)

\*Type of Patient (Code): 1. Failures of Category I (remain positive at month 5 or later and smear negative patients who become smear positive at month 2), 2. Failures of Category II (remain positive at month 5 or 8), 3. Non converters of Category II (remain positive at month 3), 4. Non converters of Category I (remain positive at month 2), 5. Relapses- a) Category I b) Category II, 6. Treatment after loss to follow up- a) Category I b) Category II, 7. Close contacts of DR TB patient with symptoms, a) Unknown history b) New c) Prev. treated, 8. HIV infected person with TB S/S, a) Unknown history b) New c) Prev. treated, 9. Others (Specify) i. Pulmonary, clinically diagnosed, a) Unknown history b) New c) Prev. treated ii. Extra Pulmonary, a) Unknown history b) New c) Prev. treated, iii. Pulmonary, Bacteriologically Confirmed a) Unknown history b) New, 10. Presumptive Pulmonary Smear Negative TB Cases a) Unknown history b) New c) Prev. treated.

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Reason for examination			Examination Results		Result of confirmatory test for M. tuberculosis (positive or negative)	Culture sent for DST (Yes or No)	Date of results reported	Name and designation of person reporting results	Signature	Date of result sent to Referring health facility	Comments
Diagnosis	**Follow-up		<sup>a</sup> Xpert MTB/RIF	<sup>b</sup> Culture (specify method) L-J/LC							
	Month	DR TB Reg No. e-TB <sup>m</sup> No.									

\*\*Patient on TB treatment indicates months of treatment at which follow-up examination is performed.

<sup>a</sup> Xpert MTB/Rif test result reported as follows:  
T = MTB detected, Rif resistance not detected  
RR = MTB detected, Rif resistance detected  
TI - MTB detected, Rif resistance indeterminate  
N = MTB not detected,  
I = invalid/ no result/ error

<sup>b</sup> Culture result reported as follows: (L-J)  
0 = No growth  
(1-19) = < 20 colonies (report number of colonies)  
1+ = 20- 100 colonies  
2+ = > 100 -200 colonies  
3+ => 200, innumerable or confluent growth

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<sup>c</sup> Results of Drug Susceptibility Testing (DST)											***Method of DST	Date of results reported	Date of report sent back to refining health facility	Name and designation	Signature	Comments
H	R	E	S	Amk	Km	Cm	FQ	Others (specify)	Others (specify)	Others (specify)						

<sup>c</sup>Report Results as  = Susceptible,  = Resistant,  = Contaminated,  = Testing not done

\*\*\*Method: 1) Xpert MTB/RIF 2) Line Probe Assay (LPA) 3) Liquid Culture 4) Solid culture (L-J)