

**New Jersey Department of Health
Tuberculosis Program
P. O. Box 363
Trenton, NJ 08625-0363**

QUARTERLY CHEST CLINIC ACTIVITY REPORT

(Submit no later than the 15th day after the end of the quarter)

Name of Clinic	Year of Report:
Days and Hours of Operation	Quarter Covered: <input type="checkbox"/> January-March <input type="checkbox"/> April-June <input type="checkbox"/> July-September <input type="checkbox"/> October-December
Scheduled Physician Hours	

Number of Clinic Visits During the Reporting Period by Category of Patient	Category of Patient					
	Cases	Suspect	Contacts	Reactors	Others	Total

Prepared By	
Telephone Number	Date

DEFINITIONS

Category of Patient

CASE is a patient whose diagnosis of active TB disease is confirmed by laboratory findings or clinically.

SUSPECT is a patient with suspected active TB disease pending confirmation by laboratory findings or clinically.

CONTACT is a patient that is under medical supervision due to exposure to a suspected or confirmed active TB disease.

REACTOR is a patient with a significant reaction to a Mantoux tuberculin skin test who is neither a contact nor has an abnormal chest x-ray resembling active TB disease. Report Class IV TB patients in this category.

OTHER is a patient who does not conform to any of the categories above.