

GRANT COUNTY

County Courthouse
P.O. Box 37
Ephrata, WA 98823
(509) 754-6060



HEALTH DISTRICT

1038 W. Ivy Avenue
Moses Lake, WA 98837
(509) 766-7960

REQUEST FOR HEALTH OFFICER CONSULTATION

for TUBERCULOSIS (TB) or SUSPECT TB

PLEASE COMPLETE AND FAX TO (509) 766-6519

Health Care Provider: _____

Requesting Agency: _____

Staff Member: _____ Telephone: _____ Fax: _____

Patient Name: _____ **DOB:** _____

CLINICAL INFORMATION:

TB Symptoms: _____

PPD: _____ CXR Results: _____

Laboratory Mycobacterial Results: _____

Epidemiological Risks and Contact Investigation:

Nature of Request:

HO (MD Consultant) Advice: _____

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