Section 4: Management of Tuberculosis Cases	Policy Number: <b>4.5</b>
Subject: Accessing and Dispensing of Tuberculosis Medication	Issued: June 2007
	Revised: July 1, 2018

## 1. POLICY

- 1.1 In Ontario, tuberculosis (TB) drugs are publicly-funded for the treatment of either active TB or latent tuberculosis infection (LTBI) through the local public health unit (PHU).
  - 1.1.1 In order to support First Nations and Inuit Health Branch-Ontario Region's (FNIHB-OR) commitment to ensure and improve the provision of Directly Observed Therapy/Directly Observed Preventative Treatment (DOT/DOPT) for individuals with active TB and/or LTBI, TB medications will be provided to the client by the Community Health Nurse (CHN) or Directly Observed Therapy (DOT) worker.

## 2. PROCEDURE

- 2.1 Prescriptions are to be written by the treating physician or Nurse Practitioner (NP), with an order that medications be dispensed in unit dose format.
  - 2.1.1 In communities where clients receive care from physicians off reserve, medications will be picked up at the public health unit by the client and brought to the health facility. In isolated and remote communities, the public health unit will ship the medications to the community's health facility.
  - 2.1.2 The client will meet with the CHN and DOT worker in the community to arrange DOT/DOPT. Refer to Policy 4.1: DOT for the Treatment of Active TB Cases and Policy 3.3: DOPT for the Treatment of LTBI.
  - 2.1.3 The multi-dose medication will be stored in the health facility.
  - 2.1.4 The CHN will dispense the medication into single dose packaging/medicine vials/oral syringes as appropriate to the medication and dose as per FNIHB-OR Nursing Policy III 03 Dispensing Medications.
  - 2.1.5 Single oral doses will be picked up by the DOT worker and administered to the client as per the FNIHB-OR DOT Manual and the DOT schedule for the client. The CHN will assess the client and DOT worker circumstances to determine the frequency to release TB medications to the DOT worker (eg., daily, short course) depending on timing of DOT, access to the health facility, ability to monitor medication administration, etc.
  - 2.1.6 The CHN will contact the public health unit when the medication supply needs to be replenished.

## 3. REFERENCES

- 3.1 First Nations and Inuit Health Branch Ontario Region. (2012). Directly Observed Therapy Manual. Retrieved from: <u>www.onehealth.ca</u>.
- 3.2 First Nations and Inuit Health Branch Ontario Region. (2015). Nursing Policy III 03 Dispensing Medications. Retrieved from: www.onehealth.ca.