

**[Part 1: To be completed by DOCTOR requesting TB denotification]**

To: Statistics Unit, Wanchai Chest Clinic, 99 Kennedy Road, Hong Kong (Fax: 28346627)

**Denotification of Previously Notified TB Case**

Clinic/ Hospital:		Clinic Hospital number:	
Name of patient:	HKID/ passport number:		
Date notified:	Smear:	Positive / Negative / Unknown	
Revised diagnosis or other remarks:	Culture:	Negative / M tuberculosis / Non-tuberculous mycobacteria / Unknown / Others _____	
Denotification requested by (Name and signature of doctor):		Tel:	Date:
		Fax:	

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**[Part 2: To be completed by Statistics Unit of TB&CS]**

From: Statistics Unit of TB&CS

To: DOCTOR who sent in this request for denotification (Fax no. )

It is confirmed that the above TB denotification request has been received by the Statistics Unit of TB & Chest Service at Wanchai Chest Clinic.

Date:

Chop or signature:
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**[Part 3: To be completed by Statistics Unit of TB&CS]**

From: Statistics Unit of TB&CS

To: \_\_\_\_\_ Chest Clinic (AE Chest Clinic) (Fax no.: )

Please note the above request for denotification for further necessary actions.

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**[Part 4: To be completed by AE Chest Clinic]**

We have taken note of the above request for denotification. We have the following comments:

- No comments
- Agree with the request for denotification
- Please ignore the request for denotification, reason:

Signature and name of Chest Clinic doctor:	Chest Clinic:	Date:
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Notes for using the Form “TBdenotification/1403” for requesting denotification of a case previously notified as TB

1. If a doctor wants to request for denotification of a previously notified TB case, he fills in Part 1 and fax the form to Wanchai Chest Clinic (Fax: 28346627; Attention: Statistics Unit of TB&CS)
2. Upon receiving the request for denotification, Statistics Unit of TB&CS fills in Part 2 and fax back to the doctor for acknowledgment of receiving the request.
3. The Statistics Unit of TB&CS then fills in Part 3, and fax the form to the NO of the relevant Chest Clinic (the AE Chest Clinic) which has been handling this case as AE case, for further necessary actions.
4. The health nurse of AE Chest Clinic, upon receiving the fax, will take note of the denotification for further necessary actions. For example, if there is no evidence to suggest otherwise, the AE Chest Clinic will treat the case now as not a TB case, and discontinue the public health actions which would then become unnecessary. Alternatively, if the AE Chest Clinic, with the input of the doctor i/c of the case (when necessary), is of the opinion that the case should not be denotified, it will continue to carry out the necessary public health actions and inform Statistics Unit of TB&CS to ignore the request for denotification. Thus, the doctor i/c of the AE Chest Clinic fills in Part 4 and tick the appropriate item, and fax the form back to Statistics Unit of TB&CS. If the AE chest clinic does not have any additional information on whether to support or refute the denotification (e.g., patient is not being followed up at chest clinic), the doctor i/c of the AE Chest Clinic may tick the item “No comments”.
5. Upon receiving the fax return back from the AE Chest Clinic, the Statistics Unit will act accordingly, e.g., denotify the case or ignore the denotification request.
6. For cases denotified by chest clinic doctors, there is no need to fill in Part 3 and Part 4.