## MYCOBACTERIOLOGY LABORATORY FORM COHORTS A AND B

Pa	rticipant ID:
Vis	sit Date: D D M O N Y Y Y Y
c	Sit Type:  COHORT A: B/L M1 M2 M3 M6* End of TX TX F/R/W Unscheduled  COHORT B: B/L TB Activation Eval Unscheduled  Govisit is for MDR/XDR participants only and should not be used as an end of treatment visit
Ins	structions: Complete one form for each sputum specimen processed.
<u>A.</u>	MYCOBACTERIOLOGY SPECIMEN COLLECTION Not done (End of form)
1.	Specimen source:  Sputum Pleural fluid Pericardial fluid Peritoneal fluid  CSF Bone marrow aspirate Abscess aspirate Joint fluid aspirate  Blood Lymph node aspirate, specify site Other, specify
2.	Specimen number: 2 Pooled Specimen N/A
3.	Lab accession number:
В.	AFB SMEAR Not done (Go to Section C)
	Date of AFB Smear:  D D M O N Y Y Y Y
2.	Smear preparation: Unconcentrated Unconcentrated
3.	Smear method: Routine AFB (e.g., Ziehl-Neelsen, Kinyoun) Fluorescence
4.	AFB Smear results: Positive Negative (Go to Section C)
5.	Quantification: Scanty 1+ (rare) 2+ (few) 3+ (many) Not Done

Form F3: Mycobacteriology Form

PI	REV1 24 FEB 2017				
Vis	sit Date: REV2 31 JUL 2019				
C.	LOWENSTEIN JENSEN (LJ) CULTURE				
1.	Date solid media inoculated:				
2.	Date of final solid culture determination:  Date of final solid culture determination:  Date of final solid culture determination:				
3.	3. Solid culture results <i>(Check all that apply)</i> :				
	Negative for Mycobacterium Tuberculosis complex				
	Positive for Mycobacterium Tuberculosis complex				
	Positive for non-tuberculosis mycobacteria (NTM)				
	Contaminated>				
3a. Please confirm whether a reprocessing was done: No Yes					
	3b. If Yes, provide the re-processing date:				
	3c. If No, please select the reason re-processing was not done				
	Procedure not part Lab error Other, specify:				
Ins	tructions: If re-processing was done, complete another F3 form to capture results of processed specimen.				
4.	If solid culture is positive for Mycobacterium Tuberculosis, provide colony count:				
	< 10 colonies; specify colony count:				
	10 – 100 (1+) 101 – 200 (2+) >200 (3+) Not Done				
D.	MGIT 960/320 CULTURE Not done (Go to Section E)				
1.	Date liquid media inoculated: D D M O N Y Y Y Y				
2.	Date of final liquid culture determination: D D M O N Y Y Y Y				
3.	Liquid culture results (Check all that apply):				
	Negative for <i>Mycobacterium Tuberculosis</i> complex				
	Positive for <i>Mycobacterium Tuberculosis</i> complex				
	Positive for non-tuberculosis mycobacteria (NTM)				
	Contaminated> 3a. Please confirm whether a reprocessing was done: No Yes				
	3b. If Yes, provide the re-processing date: D M O N Y Y Y				
	3c. If No, please select the reason re-processing was not done				
	Procedure not part Lab error Other, specify:				
	Instructions: If re-processing was done, complete another F3 form to capture results of processed specimen.  4. Report machine generated time to detection (TTD), if positive for MTB:				
4.	4. Report machine generated time to detection (TTD), if positive for MTB: Days Hours				

Form F3: Mycobacteriology Form FINAL 25 JUN 2015 REV1 24 FEB 2017 REV2 31 JUL 2019

PID:				
Visit Date:				
E. DRUG SUSCEPTIBILITY TESTING (DST)				
Drug(s)	Result	Not done		
Streptomycin	Susceptible Resistant Indeterminate Contaminated			
Isoniazid	Susceptible Resistant Indeterminate Contaminated			
Rifampin	Susceptible Resistant Indeterminate Contaminated			
Ethambutol	Susceptible Resistant Indeterminate Contaminated			
Pyrazinamide	Susceptible Resistant Indeterminate Contaminated			
Kanamycin	Susceptible Resistant Indeterminate Contaminated			
Ofloxacin	Susceptible Resistant Indeterminate Contaminated			
Ethionamide	Susceptible Resistant Indeterminate Contaminated			
Levofloxacin	Susceptible Resistant Indeterminate Contaminated			
Moxifloxacin	Susceptible Resistant Indeterminate Contaminated			
Para-aminosalicylate sodium (pas)	Susceptible Resistant Indeterminate Contaminated			
Linezolid	☐ Susceptible ☐ Resistant ☐ Indeterminate ☐ Contaminated			
Clofazimine	Susceptible Resistant Indeterminate Contaminated			
Capreomycin	☐ Susceptible ☐ Resistant ☐ Indeterminate ☐ Contaminated			
Amoxicillin/Clavulanate	☐ Susceptible ☐ Resistant ☐ Indeterminate ☐ Contaminated			
Clarithromycin	Susceptible Resistant Indeterminate Contaminated			
Bedaquiline	Susceptible Resistant Indeterminate Contaminated			
Delamanid	Susceptible Resistant Indeterminate Contaminated			
Other, specify	Susceptible Resistant Indeterminate Contaminated			
Other, specify	Susceptible Resistant Indeterminate Contaminated			
Other, specify	Susceptible Resistant Indeterminate Contaminated			
Other, specify	☐ Susceptible ☐ Resistant ☐ Indeterminate ☐ Contaminated			
F. MTB ISOLATE STORAGE		Not done		
1. Date of processing and storage: D D M O N Y Y Y Y				
2. Lab accession number (if applicable):				