



Centre de Santé et Services Sociaux Inuulitsivik  
Inuulitsivik Health & Social Services Centre  
Puvirnituq, Québec J0M 1P0  
T 819 988-2957 / F 819 988-2796



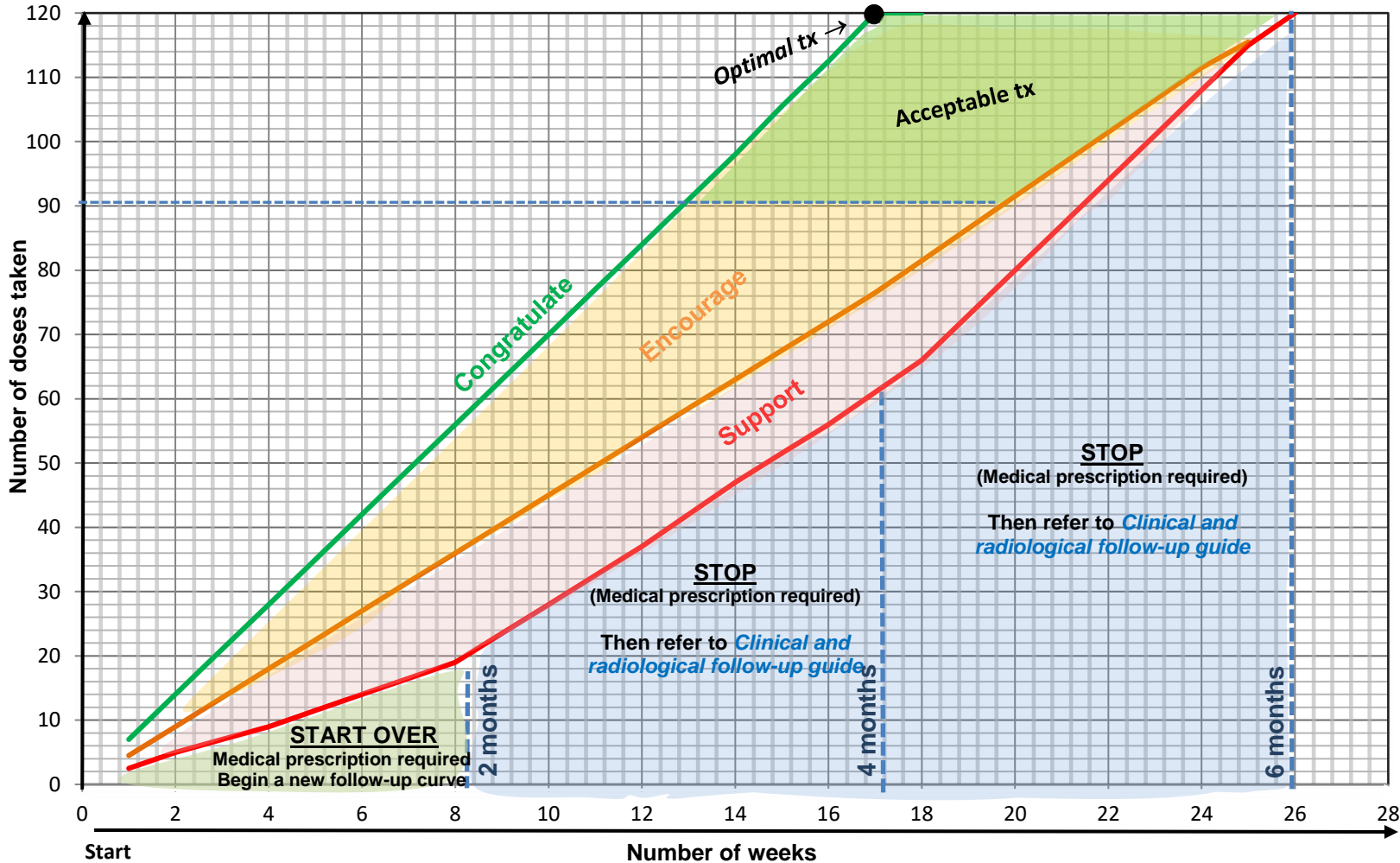
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UNGAVA TULLATTAVIK HEALTH CENTER  
CENTRE DE SANTÉ TULLATTAVIK DE L'UNGAVA

### IDENTIFICATION

EMBOSSER ICI LA CARTE DU CSI OU CSTU,  
SI NON DISPONIBLE, INSCRIRE LES NOM, PRÉNOM,  
DATE DE NAISSANCE ET NUMÉRO DOSSIER

EMBOSS HERE THE CARD OF IHC OR UTHC,  
IF NOT AVAILABLE, WRITE THE NAME, SURNAME,  
DATE OF BIRTH AND FILE NUMBER

## COMPLIANCE CURVE – RIFAMPICIN SELF-ADMINISTERED 4 MONTHS PROPHYLAXIS FOR LATENT TB INFECTION (LTBI) – RIFAMPICIN, SELF-ADMINISTERED, 4 MONTHS BEHAVIOUR RECOMMENDED ACCORDING TO THE DEGREE OF COMPLIANCE



Date and result of significant TST:

Date:      /      /     

Result:      mm

Prophylaxies :

Date of the first dose:      /      /     

Date of the last dose:      /      /     

Total number of doses taken:     

If stopped, reason:

\_\_\_\_\_

\_\_\_\_\_

Date of the final report:

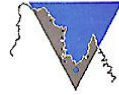
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Nurse's signature



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<b>Title</b>	COMPLIANCE CURVE – RIFAMPICIN, SELF-ADMINISTERED, 4 MONTHS
<b>TB toolbox CODE</b>	DSPu-TB_ITL_COURBE-RIF_EN
<b>Date modified</b>	2024-05-17

## PURPOSE

- Ensure use of the most effective prophylaxis for latent TB infection and in so doing, prevent the development of active TB disease.
- Prevent the appearance of strains of *Mycobacterium tuberculosis* resistant to rifampicin.

## OBJECTIVES

- Ensure regular and optimal follow-up of people with LTBI who are undergoing treatment.
- Quickly identify any issues regarding compliance and offer the appropriate support.
- Ensure the established number of doses are taken in the defined timeframe (120 doses in 4 month – maximum 6 months).

## RESPONSIBILITIES

- **Nurse:** Make adequate use of the compliance curve for the full duration of the prophylaxis, by adhering to this procedure.
- **Physician:** - **Make sure to exclude active TB disease prior to beginning a prophylaxis.**
  - Based on the indications in this compliance curve, prescribe clinical and radiological follow-up recommendations by completing and signing the tool entitled *Clinical and radiological follow-up guide (TB-ACT-ITL\_GUIDE-SCR\_EN)*.

## PROCEDURE

- Begin recording the number of doses taken **as of** the 2<sup>nd</sup> visit. Validate (as accurately as possible) the number of doses taken.
- Indicate, by making a point on the curve, the number of doses taken according to the number of weeks since the onset of the treatment. Take the following actions, based on where the point noted above falls on the curve:
  - Yellow zone - **Encourage** → Acknowledge the progress made with the prophylaxis, despite it being suboptimal, and encourage the person to continue taking the medication.
  - Pink zone - **Support** → Identify the causes of any delays/lapses and introduce measures to facilitate taking the medication.
  - Green zone - **Start over** → Discuss obstacles preventing compliance and if appropriate, come to an agreement with the person to start over with the medication. Notify the physician if a new prescription or additional follow-up is needed.
  - Blue zone - **Stop** → Refer the person to the physician, who will be able to prescribe the follow-up recommended in the *Clinical and radiological follow-up guide* directives.
- The decision to stop taking the medication must be taken by the treating physician, unless the person refuses or ceases the prophylaxis on their own.
- If the person refuses to continue taking the medication, refer them to the physician, who will prescribe follow-up as recommended in the *Clinical and radiological follow-up guide*.
- Enter the reason for stopping the medication under “*If stopped, reason*”.
- Note the date of the end of the prophylaxis (**the date on which the last dose was taken**).
- Once the treatment is over or has been stopped, submit the completed Compliance curve graph to the Public Health department : *Tuberculose Sante Publique (RRSSSN)* [tuberculose-santepublique.nrbhss@ssss.gouv.qc.ca](mailto:tuberculose-santepublique.nrbhss@ssss.gouv.qc.ca) and *Tuberculose Saisie (RRSSSN)* [tuberculose.saisie.rr17@ssss.gouv.qc.ca](mailto:tuberculose.saisie.rr17@ssss.gouv.qc.ca).

(DSPu-TB\_ITL\_COURBE-RIF\_EN, V2024-05-17)