



Chapter 12: Patient Education

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Introduction

Purpose

Use this section to do the following:

- Determine what information to cover in education sessions
- Educate patients about tuberculosis (TB)
- Educate patients about latent TB infection (LTBI)
- Identify which forms to use to document education efforts

An important part in helping patients to adhere to treatment plans is to educate them about TB. This means talking to them about what causes TB, the way TB is spread, how TB is diagnosed, and their specific treatment plan.¹ Patients cannot be expected to adhere to treatment recommendations if they are not educated about TB and how it is treated, and patients who understand these concepts are more likely to adhere to treatment.

Patients with LTBI need to understand that they are infected with TB, that they may have specific risks for progressing to TB disease, and that they can take precautions to protect themselves, their family, and their friends. Patients with TB disease need to understand the seriousness of the disease and why it is important to adhere to treatment. In order to prevent relapse and drug resistance, clinicians must prescribe an adequate regimen and make sure that patients adhere to treatment.² To ensure completion of treatment, the public health department should thoroughly educate the patient, monitor the patient's adherence, and use incentives and enablers.^{3,4,5}

Policy

Each local or Tribal health department determines individual client need for TB education and should provide education to patients with TB disease and LTBI. The Wisconsin Tuberculosis Program offers many [fact sheets and other educational materials](#) in several languages that can facilitate patient education.



For roles and responsibilities, refer to the “Roles, Responsibilities, and Contact Information” topic in the Introduction.

General guidelines

Table 12.1: Guidelines for the educational process

When educating tuberculosis patients

Do	Don't
<ul style="list-style-type: none"> • Find out what patients know and believe about TB. Reinforce and provide correct TB information and address any misconceptions • Use good skills to interview and influence patients and to problem solve. Use motivational interviewing techniques to understand the client's reason for wanting treatment (that is, to avoid progression to TB disease, so they can obtain their green card, to keep their children healthy). If the client is hesitant about treatment, it may be helpful to remind them of their why. • Go through the educational material with patients. Use language appropriate to their level of understanding. If necessary, use an interpreter or cultural liaison. Family or friends are not to be expected to interpret and access to professional medical interpreters is a right. • Whenever possible, provide educational materials in the client's preferred language. • Assess the patient's understanding of what you have taught them through return demonstration or having them repeat what you have taught in their own words. 	<ul style="list-style-type: none"> • Flood patients with information about TB and its effects without allowing them to participate in the discussion. • Hand out pamphlets and brochures to patients without going through the materials with them. Not all patients will be able to read the materials or the materials in the language(s) offered. • Leave the visit without establishing that the client understands general expectations and responsibilities, what the next steps are and that you've answered all of their questions.

Language and comprehension barriers

In the initial assessment, assess for and address any potential language and comprehension barriers.

- Assess the patient's ability to speak and understand instructions, including potential barriers, such as not understanding or speaking the same language as the health care worker, inability to read or write, deafness, speech deficit, or learning disability.
- Assess literacy in the patient's preferred language for the communication type (clients may prefer one language verbally but read and write in another).
- Provide all instructions and communications in the appropriate language.
- Use interpreters, visuals, or other educational methods to promote understanding.
- Provide educational materials appropriate to the patient's language and reading level.
- Make referrals to an appropriate service and notify it of any language and comprehension concerns.



For more information on cultural sensitivity, refer to the *Participant's Workbook* for Session 4: "[Working with Culturally Diverse Populations](#)" in the [Directly Observed Therapy Training Curriculum for TB Control Programs](#).



For assistance with language barriers, see the [Language Services Resource Guide for Health Care Providers](#).



The Wisconsin Tuberculosis Program offers [educational materials](#) about Tuberculosis and Latent Tuberculosis Infection in a number of languages.



If you find that you frequently need educational materials, pamphlets, or forms in another language that is not currently available, please contact the Wisconsin Tuberculosis Program at 608-261-6319.

Education topics

During the initial assessment, directly observed therapy (DOT) appointments, and monthly monitoring, educate the patient as needed on the topics that follow.



For more information on case management activities, see the Case Management section.

Medical diagnosis

In the initial interviews with the patient, provide information about TB and the patient's treatment plan. During DOT appointments and monthly monitoring, confirm and reinforce the patient's understanding of these topics.

- Discuss the difference between TB disease and TB infection.
- Explain the signs and symptoms of TB, how TB is transmitted, prevention activities, and treatment.
- Explain that TB is both treatable and preventable.
- Explain the importance of completion of treatment.
- Discuss diagnostic procedures used to make diagnosis of TB, such as chest radiography, sputum microscopy, and tuberculin skin testing. Stress the importance of testing and follow-up.

- Discuss the current medical treatment plan and rationale. Have the patient sign the treatment plan and a DOT agreement. You can find a sample Active TB Disease Treatment Agreement template in the [Nurse Case Management for Active Tuberculosis Disease](#) guidance document.
- Explain the need for regular medical monitoring and follow-up during the disease process. Discuss how treatment will be monitored (that is, sputum, blood tests, vision screening, weight check). Encourage the patient to be an active participant in care and treatment.
- Discuss the roles of the patient (engage in treatment), the health department (DOT, case management, monitoring, contact tracing, and supervision of treatment), and the private provider (treatment and monitoring). Encourage the patient to contact the case manager for issues and problems that arise during treatment.
- Explain the risk of treatment relapse or failure and the need to complete treatment to prevent relapse.
- Explain the signs and symptoms of possible relapse or failure and encourage the patient to report them immediately to the case manager.

Contact investigation

When a contact investigation is necessary, educate the index patient about the process and confidentiality.

1. Discuss the contact investigation process.
2. Reinforce the confidentiality of investigation but warn the patient of the potential for contacts to guess the patient's identity.



For more information, see [Effective TB Interviewing for Contact Investigation: Self Study Modules](#) (Department of Health and Human Services Centers for Disease Control and Prevention Division of Tuberculosis Elimination)

Isolation

If isolation is necessary, educate the patient about how to take proper precautions.

- Explain respiratory isolation and restrictions (RIR), if appropriate. Have the patient sign an isolation agreement.
- Explain the behavior changes needed for infection control. Discuss permitted and prohibited activities, limiting and excluding visitors, covering the mouth and nose when coughing and sneezing, and using a mask.
- Explain the home environmental changes needed for infection control. Discuss ventilation and sunlight. Explain how to dispose of items soiled with potentially infectious material.

- Discuss the requirements for release from isolation. Advise the patient that clearance is contingent upon clinical condition and continued compliance with the treatment regimen and that the health department maintains the ability to implement more strict requirements or reinstate previously removed measures if necessary. It may be helpful to also remind the client that ultimately, the health department, not their provider, has the authority and expertise about public health and safety and that individual situations vary. The Wisconsin Tuberculosis Program offers a [helpful template](#) that can be used for discussion about isolation. Also see the [memo](#) for more information from the TB program regarding updated 2024 RIR guidance.

Side effects and adverse reactions

Educate all patients on antituberculosis medications about the medications' potential side effects and adverse reactions.

- Explain the names, dosages, and rationale for the drug treatment plan as well as the importance of treatment.
- Explain the common side effects and methods to improve symptoms.
- Explain signs and symptoms of drug toxicity.
- Direct the patient on what actions to take if side effects or signs and symptoms of toxicity appear.
- Explain potential effects of alcohol and drug use on treatment and the increased risk for side effects and toxicity.
- Reinforce that alternate methods of birth control (barrier methods) may be necessary, due to drug-drug interactions.



For more information on side effects and adverse reactions, see the “Side Effects and Adverse Reactions” topics in the Treatment of Tuberculosis Disease section or the Treatment of Latent Tuberculosis Infection section. The Southeastern National Tuberculosis Center offers [medication trackers and educational materials in several languages](#) for a number of regimens.

Adherence

All patients have the potential for barriers to the treatment plan (including DOT adherence), so it is important to educate the patient about the importance of treatment, the patient's responsibilities during treatment, and the consequences of nonadherence (including unintentional and medically necessary missed doses or treatment interruptions).

- Explain the drug names and dosages and the rationale for the drug treatment plan.
- Explain the importance of treatment and follow-up for active TB.
- Explain the importance of regular monitoring visits.

- Discuss the treatment plan and expectations. Advise the patient on the patient's responsibilities and expected behavior regarding treatment compliance and follow-up activities. Have the patient sign the treatment plan and a DOT agreement. Treatment assistance aids may be covered by the Treatment Assistance Program, please see the Supplies, Materials, and Services section for more information.
- Advise the patient on laws regarding TB disease and isolation.

Patient education materials

In addition to the educational materials available through the [Wisconsin Tuberculosis Program website](#), the Centers for Disease Control and Prevention (CDC) offers the following patient education materials online:

- [Tuberculosis: Get the Facts About TB Disease brochure](#)
- [Protect Your Friends and Family from TB: The TB Contact Investigation](#)
- [Questions and Answers About Tuberculosis Booklet](#)
- [Staying on Track with Tuberculosis Medicine Booklet](#)
- [Stop TB Poster](#)
- [About Tuberculosis](#)
- [What You Need to Know About Tuberculosis Fact Sheet](#)
- [About Inactive Tuberculosis](#)
- [What You Need to Know About the TB Skin Test Fact Sheet](#)

For other sources of patient education materials, consult the resources at the end of this section.

Resources and references

Resources

Patient education information for health care workers

CDC. "[Targeted Tuberculin Testing and Treatment of Latent Tuberculosis Infection](#)" (*MMWR* 2000;49[No. RR-6]). and [Targeted Tuberculin Testing and Treatment of Latent Tuberculosis Infection \(cdc.gov\)](#).

ATS, CDC, IDSA. "[Treatment of Tuberculosis](#)" (MMWR 2003;52[No. RR-11]).

CDC. *Self-Study Modules on Tuberculosis* (Division of Tuberculosis Elimination Web site; 1999). Available at: [Self-Study Modules on Tuberculosis | Tuberculosis \(TB\) | CDC](#)

CDC. *TB Elimination: Now Is the Time! 2007* (Division of Tuberculosis Elimination Web site; 2007). Available at: [TB Elimination: Now is the time! \(cdc.gov\)](#)

Patient education materials for patients

CDC. *TB Education and Training Resources* [TB Education and Training Resources Web site]. Available at: [General Public Communication and Education Resources | Tuberculosis \(TB\) | CDC](#)

Wisconsin Department of Health Services Tuberculosis Program website has educational materials in several languages. Available at: [Wisconsin Tuberculosis Program | Wisconsin Department of Health Services](#)

EthnoMed website contains social and cultural information for various ethnicities. Available at: [Home - EthnoMed](#)

References

- ¹ CDC. Module 4: treatment of TB infection and disease. *Self-Study Modules on Tuberculosis* [Division of Tuberculosis Elimination Web site]. 1999:12. Available at: [Self-Study Modules on Tuberculosis | Tuberculosis \(TB\) | CDC](#)
- ² CDC. Module 4: treatment of TB infection and disease. *Self-Study Modules on Tuberculosis* [Division of Tuberculosis Elimination Web site]. 1999:12. Available at: [Self-Study Modules on Tuberculosis | Tuberculosis \(TB\) | CDC](#)
- ³ CDC. Targeted tuberculin testing and treatment of latent tuberculosis infection. *MMWR* 2000;49(No. RR-6):38–39.
- ⁴ National Tuberculosis Controllers Association, National Tuberculosis Nurse Consultant Coalition. *Tuberculosis Nursing: A Comprehensive Guide to Patient Care*. Atlanta, GA: 1997:64, 69, 74.
- ⁵ CDC. Module 9: patient adherence to tuberculosis treatment. *Self-Study Modules on Tuberculosis* [Division of Tuberculosis Elimination Web site]. 1999:9–11. Available at: [Self-Study Modules on Tuberculosis | Tuberculosis \(TB\) | CDC](#)