

TB Orientation for LPHAs and Other Health Care Providers

2014

Target Audience

The target audience is public health staff and other medical providers who are actively engaged in the identification, diagnosis, management and treatment of patients with tuberculosis infection and disease.

Agenda

9:00 – 9:10	Sign-In/Introduction
9:10 – 10:15	Latent TB Infection versus TB Disease
10:15 – 10:30	Break
10:30 – 11:30	TB Symptoms and Transmission
11:30 – 1:00	Lunch
1:00 – 2:15	TB Diagnosis and Treatment
2:15 – 2:45	Overview of TB Laboratory Services
2:45 – 3:00	Break
3:00 – 3:15	Diagnostic Services Program (DSP)
3:15 – 3:45	Refugee Program
3:45 – 4:00	Financial Assistance for LPHAs
4:00	Adjourn

Registration

Registration is free, but required as class size is limited and to ensure we have sufficient handouts available.

Please send the completed registration form to Lesha Peterson via email to

Lesha.Peterson@health.mo.gov

or by fax to

573-526-0235 by **August 22, 2014**.

If you have questions regarding this training, please call 573-751-6113.

Presented by:

The Missouri Department of Health and Senior Services
Bureau of Communicable Disease Control and Prevention
TB Control Program

REGISTRATION FORM

TB Orientation for LPHAs and Health Care Providers

Please indicate which session you would like to attend.

- September 4 – Adair County Health Department
1001 South Jamison Street, Kirksville, MO
- September 9 – Columbia/Boone County Department of Public Health and Human Services, 1005 West Worley, Columbia, MO
- September 11 – Jefferson County Health Department
1818 Londell Road, Arnold, Mo 63010
- September 17 - Phelps/Maries County Health Department
200 North Main Street, Rolla, MO
- September 23 – Texas County Health Department
950 North Highway 63, Suite 500, Houston, MO
- September 24 - Wayne County Health Department, Highway 67 North, Greenville, MO
- October 1 – The Library Center, 4653 South Campbell Avenue, Springfield, MO

The session will run from 9:00 to 4:00 pm each day and is targeted toward individuals in each region, but anyone can participate.

First Name:

Last Name:

Job Title:

Organization/Agency:

Address:

City/State/Zip:

Phone (include area code):

Fax: (include area code):

Email Address:

Email to Leshia.Peterson@health.mo.gov or fax to 573-526-0235 by **August 22, 2014**.
Confirmation will be sent via email.