

病人教材

传染病的预防及控制



肺结核病

一种由空气传染需要采取防预措施的疾病

此简介为您提供有关肺结核 的资讯,以及何人易受感 染。亦为您解说此疾病是如 何传播的,并提供预防他人 被感染的步骤。

如需要更多有关肺结核的资 讯请参看下列网站:

www.cdc.gov/tb/pubs/ tbfactsheets/tb.htm

何谓肺结核病?

肺结核病(肺痨)是由*结核干菌*引起的疾病。此细菌一般是侵袭肺部。但它也可能侵入人体其他的器官如肾脏、脊椎及脑部。如不适当的医治,肺病是可致命的。肺结核曾经是美国第一位死亡病因。

并非每位被肺结核的细菌感染的都会引起病徵。没显病徵者被 称为潜伏性肺病。,他们没有任何病症,也不会传染给其他 人。但有些潜伏性肺结核也会转为活性肺结核。

活性肺结核患者如接受医治是可以痊愈的。更好的是潜伏性肺结核患者也可以服药以免除日后变为活性肺结核。

肺结核病是必须报告的疾病。每发现一病例必须通知医务署以便保护其他与病者有接触的人,避免受感染。

肺结核是如何传染的?

肺结核是种经空气由一人传给另一人。活性肺结核患者在咳嗽或打喷嚏时将肺部或喉部的病菌散播到空气中。周围的人吸入病菌而被感染。

肺结核有那些症状?

活性肺结核患者经常会有很严重的咳嗽持续至三周或以上。可能有胸痛、可能咳血或痰(肺部的分泌物)、亦也可能乏力、失去食欲、体重减轻、也有可能发烧、发冷或夜里出汗。

有症状的病者到诊所时应当遵守"呼吸道卫生"条例如戴口罩、经常洗手、将用过的纸巾丢在垃圾桶内。可向询问处及各个诊所的前台取拿免费的"口罩"。

肺结核如何诊断?

肺结核是以病症、皮下 测试呈阳性反应、胸部 X 光透视结果不正常、及痰液检示带菌、等等来作诊断。



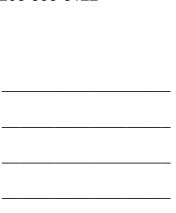
a passion for life

疑问?

请电: 206-598-6122

您的疑问是非常重要的。当有疑问或顾虑时,请致电您的医生或医护人员。华大医院诊所的工作人员也可随时给您协助。

传染病预防及控制科: 206-598-6122



如何预防?

在华大医院,我们在病者的病房门口放置"预防空气传染"的牌子,来提醒医护人员、及访客在照顾病者时,遵照特别加强的防预措施以保护他人不被传染。为保护他人,如病者的亲友有肺结核的症状,但尚未确诊,他们不应来探访病者。他们应请医生查看他们的症状。

什么是"预防空气传染病" 的措施?

医护人员及照顾者在护理时必须穿医院的袍子,戴手套及用强力的"空气过滤呼吸器"。为了保护他们,访客必须配戴为他们已准备的用品(N-95口罩、外袍、及手套)。

特别注意以酒精洗手液洗手最少 15 秒钟。以及加强周围环境的清洁。

除非需要到其他部门接受治疗,病者必须留在自己的病房内。如 要走出病房,病者必须穿黄色的外袍、戴手套、及口罩。

病者在隔离期间请勿进入营养室,如需要点心或饮料可请医护人 员为您服务。

何时可以解禁?

预防空气传染的措施要在连续三次验痰的结果均无显示病菌的存在,即确定疾病的不存在,才可解禁。

病者被诊断有肺结核时,必须继续采用预防空气传染措施,直到 三次验痰的结果呈阴性,证明已无结核菌,服用正确的抗生素及 病徵会渐渐减轻,此需二至三周的时间。

University of Washington MEDICAL CENTER UW Medicine

Healthcare Epidemiology and Infection Control

Box 356153 1959 N.E. Pacific St. Seattle, WA 98195 206-598-6122

Patient Education

Healthcare Epidemiology and Infection Control



Tuberculosis

A disease requiring airborne precautions

This handout describes tuberculosis and its symptoms. It also explains how this disease can be spread and offers steps to prevent others from getting it.

To learn more about tuberculosis, visit this Web site:

www.cdc.gov/tb/pubs/ tbfactsheets/tb.htm

What is tuberculosis?

Tuberculosis (**TB**) is a disease caused by bacteria called *Mycobacterium tuberculosis*. The bacteria usually attack the lungs. However, TB bacteria can attack any part of the body such as the kidney, spine, and brain. If not treated properly, TB disease can be fatal. TB disease was once the leading cause of death in the United States.

Not everyone infected with TB bacteria becomes sick. People who are not sick have what is called *latent TB infection* and do not have any symptoms, and cannot spread TB to others. But, some people with latent TB infection go on to get TB disease.

People with active TB disease can be treated and cured if they seek medical help. Even better, people with latent TB infection can take medicine so that they will not develop active TB disease.

Tuberculosis is a reportable disease and the health department is notified whenever a case is diagnosed to protect others who may have come in contact with you and are at risk of becoming ill.

How is tuberculosis spread?

TB is spread through the air from one person to another. The bacteria are put into the air when a person with *active TB disease* of the lungs or throat coughs or sneezes. People nearby may breathe in these bacteria and become infected.

What are the symptoms?

A person with active TB disease usually has a bad cough that lasts 3 weeks or longer, may have pain in the chest, may be coughing up blood or sputum (secretions produced in the lungs), may feel weak and have no appetite, may have lost weight and may have fever, chills, and/or night sweats.

Symptomatic persons should practice "respiratory hygiene" by wearing a mask, washing their hands often, and disposing of tissues in wastebaskets when coming into a health care facility. Free "Cover Your Cough Kits" are available at the Information Desk and at clinic intake areas.



a passion for life

Questions?

Call 206-598-6122

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff is also available to help at any time.

Epide nfect 206-5	ion	Cc	ontro	

How is it diagnosed?

Tuberculosis is diagnosed by symptoms, a positive TB skin test, an abnormal chest X-ray, and by laboratory confirmation of organisms seen in sputum.

How are others protected?

At University of Washington Medical Center, we place an "Airborne Precautions" sign near the doorway of your room to alert health care workers and your visitors to observe expanded precautions when caring for you to protect others who are at risk from acquiring the disease. For the protection of others, if any of your family members or friends have tuberculosis symptoms, but have not been diagnosed, they should not visit you. They should see a doctor to get their symptoms checked.

What does it mean to be in "airborne precautions?"

Health care workers and caregivers will wear gowns, gloves, and a Powered Air Purifying Respirator (PAPR) when caring for you.

For their protection, visitors should wear the provided protective equipment (N-95 masks, gowns, and gloves).

Hand washing for 15 seconds, using alcohol hand gels, and environmental cleanliness are emphasized.

You will be asked to stay in your room unless you need to go to other departments in the hospital for treatment. If you leave your room, you will be asked to wash your hands and to wear a mask, yellow gown, and gloves.

Please do not use the nutrition rooms while you are "in isolation." When you want a snack or ice water, ask a member of your health care team to bring it to you.

When can the precautions be stopped?

Airborne precautions for tuberculosis may be stopped if the disease is ruled out. That usually means that 3 sputum specimens do not show any organisms.

Persons diagnosed with tuberculosis will remain in precautions until 3 sputum specimens are negative for TB, they are taking the right TB antibiotics and their symptoms are improving. This process takes about 2 to 3 weeks.



Healthcare Epidemiology and Infection Control

Box 356153

1959 N.E. Pacific St. Seattle, WA 98195 206-598-6122