

X-RAY EXAMINATION RECORD

Name: Ray, James Earl Date: 9-15-68 County of Exam: Shelby
 Address: Shelby County Jail Community: _____ Resident County: Shelby
 Physician: _____ Race: W Sex: M Age: 41
 Address: _____
 Reason for X-ray: (State contacts and symptoms) Routine Screening.

Anti-Tuberculosis Drug Therapy (Type, dates begun and discontinued):				
Tuberculin	Date	Type	Result	Sputum Examinations (Date and results):
Tests:	Date	Type	Result	

Former Diagnosis: _____ Date: _____ X-ray No: _____

Present X-ray No: 09478 Reading:

Right lung: Normal.

Left lung: Normal.

Impression: Negative.

Recommendations: Annual chest x-ray.

Note: If a 14"x17" chest x-ray is desired, we have a portable x-ray unit available for this purpose.

Michael G. Botten, M. D.
9-16-68

cc: Dr. James F. Bradley

RECOMMENDED DAILY DOSAGE OF ISONIAZID (100 MGM. TABLETS)

Schedule	Age	Weight	Amount	Tablets	
				A.M.	P.M.
A	1-3 years	20-34 lbs.	100 mgm.	½	½
B	4-6 years	35-49 lbs.	150 mgm.	½	1
C	7-9 years	50-64 lbs.	200 mgm.	1	1
D	10-12 years	65-79 lbs.	250 mgm.	1	1½
E	13 year and older	80 lbs. and over	300 mgm.	1½	1½

This drug is often recommended because of tuberculin skin reaction or skin reaction and history of contact to tuberculosis in order to prevent development of clinical disease. (X-ray shows only gross disease).

100 MGM. TABLETS should be used because they are more economical. Fewer tablets to handle will help to eliminate error in dosage. Drugs should be product of a well known and reliable company.

CHILDREN need and tolerate higher dosage per unit of weight than adults, as indicated in the above schedule. The prophylactic and therapeutic dosage of isoniazid is the same.

DURATION OF TREATMENT—prophylactic, at least 12 months; therapeutic, 18 to 24 months, or more, depending upon severity of the disease.

TOXICITY OF ISONIAZID—In the suggested dosage, toxic effects are very infrequent. When toxicity does occur, the most common symptoms are headache, drowsiness, dryness of mouth, nervousness, insomnia, flushing of face, and mild muscular twitching. These side effects do not usually warrant discontinuation of the drug. Occasionally hyperpyrexia occurs and should be suspected if unexplained high fever occurs. This is an indication to discontinue the drug. Very occasionally, nervous system involvement occurs. The most common nervous system involvement is peripheral neuritis, which is more likely to occur in alcoholics and the debilitated. Epileptics should be closely observed while under isoniazid medication and seizures controlled with anticonvulsives. Local health departments can furnish physicians a pamphlet entitled "Tolerance and Toxicity of Isoniazid" that discusses this problem more completely.

FOLLOW-UP OF PATIENT—When antituberculosis drugs are advised for a patient, the physician should notify the health department whether he will supervise the patient's medication or whether follow-up should be done by the health department.

PURCHASE OF ISONIAZID—All individuals who can financially afford to do so, should purchase isoniazid commercially. However, when indicated, this drug can be obtained through local health departments at cost, or free of charge when necessary.

DIVISION TUBERCULOSIS CONTROL

MEMPHIS AND SHELBY COUNTY

HEALTH DEPARTMENT

814 JEFFERSON AVENUE

MEMPHIS, TENNESSEE 38105

Dr. James F. Bradley
Shelby County Jail