Providers must submit the following information when reporting a suspect/active tuberculosis case to their local health district:

- State of Nevada Confidential Morbidity Report Form
- Positive lab(s) indicating TB organism
- Discharge summary (if applicable)
- Chest imaging reports
- HIV result OR date ordered (if pending)
- Biopsy/pathology report (if performed)
- Patient’s emergency contact information

For additional information, please contact your local health district:

**Clark County**
Southern Nevada Health District (SNHD)
280 South Decatur Blvd.
Las Vegas, NV 89107
Ph. 702.759.1370
Fax 702.759.1435

**Washoe County**
Washoe County Health District (WCHD)
10 Kirman Avenue
Reno, NV 89502
Ph. 775.785.4785
Carson City and Rural Counties (Douglas and Lyon County)
Carson City Health & Human Services (CCHHS)
900 East Long Street
Carson City, NV 89706
775.887.2190

Rural Community Health Services
29 Clinics Locations
775.434.4358 (24 Hour Reporting Line)
http://dpbh.nv.gov/Programs/ClinicalCN/Locations/Rural_Community_Health_Services_Locations/

For General Inquiries about the Tuberculosis Program in the State of Nevada:

State of Nevada
Nevada Division of Public and Behavioral Health
Office of Public Health Informatics and Epidemiology
4150 Technology Way, Suite 300
Carson City, NV 89706
Ph 775.684.5936
Fax 775.684.5999

Funding Source:
This publication was supported by a grant (CDC-RFA-PS15-1501) funded by the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention or the Department of Health and Human Services.