

AFP Clinical Answers

Tuberculosis, COPD, Pelvic Floor Muscle Training, Burns, Sepsis

How often should health care professionals be screened for tuberculosis?

Health care professionals should be assessed for tuberculosis (TB) risk with baseline TB testing and confirmation of positive results in low-risk individuals according to the Centers for Disease Control and Prevention. After initial testing, routine serial TB testing is no longer recommended. The Centers for Disease Control and Prevention strongly recommends that health care professionals with latent TB infection receive treatment.

<https://www.aafp.org/afp/2020/0301/p312.html>

What are the benefits of pharmacologic and nonpharmacologic treatments for exacerbations of COPD in adults?

In adults with exacerbations of chronic obstructive pulmonary disease (COPD), antibiotic therapy increases the clinical cure rate and decreases the clinical failure rate. Systemic corticosteroid therapy improves dyspnea and reduces the clinical failure rate. Titrated oxygen reduces mortality compared with high-flow oxygen. Resistance training improves dyspnea and quality of life. Early pulmonary rehabilitation initiated during hospitalization improves dyspnea.

<https://www.aafp.org/afp/2020/0501/p557.html>

Does pelvic floor muscle training improve the symptoms of urinary incontinence in women?

Use of pelvic floor muscle training to treat women with all subtypes of urinary incontinence results in improvement or cure vs. no treatment (number needed to treat = 2.5; 95% CI, 1.4 to 5.4). Treatment with pelvic floor muscle training also results in one fewer episode of leakage per day and a reduction in leakage

volume of 9.7 g per hour. Treatment is cost-effective, and risks are minimal.

<https://www.aafp.org/afp/2020/0401/p393.html>

What are the initial steps in treating burn injuries in the outpatient setting?

The burn surface should be cooled with running tap water for at least 20 minutes within three hours of the burn injury. Patients with partial- or full-thickness burns who have unknown or inadequate tetanus immunization status should be vaccinated and given tetanus immune globulin.

<https://www.aafp.org/afp/2020/0415/p463.html>

What are the initial treatment steps for patients presenting with sepsis?

Patients with sepsis should complete the sepsis bundle (fluid resuscitation, antibiotics, lactate measurement, and cultures) within three hours of presentation. As part of fluid resuscitation, patients with sepsis should receive an intravenous crystalloid at 30 mL per kg. Norepinephrine is the first-line vasopressor agent for patients with septic shock if initial fluid resuscitation fails to restore mean arterial pressure to 65 mm Hg or greater.

<https://www.aafp.org/afp/2020/0401/p409.html>

Tip for Using AFP at the Point of Care

Looking for more information about COPD? Go to the "Chronic Obstructive Pulmonary Disease" collection at <https://www.aafp.org/afp/copd>. Check out more than 70 collections in AFP by Topic at <https://www.aafp.org/afp/topics>. When you find your favorite topics, click "Add to Favorites" to add them to your personal Favorites list.

A collection of AFP Clinical Answers is available at <https://www.aafp.org/afp/answers>.