



Disease Control Branch
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PROTOCOL FOR EVALUATION AND TREATMENT OF INDIVIDUALS EXPOSED TO TUBERCULOSIS (TB) JANUARY 29, 2015

SITUATION UPDATE

A health care worker from Southwest Healthcare System has been diagnosed with TB. The exposure periods are considered to be September 29, 2014 through December 28, 2014 and January 5, 2015 through January 12, 2015. Drug susceptibility studies for the source patient are pending. TB testing is recommended for identified contacts. Some individuals may choose to be tested by their primary physician.

PROTOCOL FOR TB EVALUATION AND TREATMENT

- Administer a TB skin test (TST) per standard protocol
- Read the TST in 48-72 hours
- Record the results in millimeters (mm)
- An Interferon Gamma Release Assay (IGRA), such as Quantiferon (QFT), can be done instead of a TST. Please note that IGRAs are not recommended for children less than five years of age.
- Individuals with less than 5 mm of induration, or a negative IGRA may require a repeat test in 8-10 weeks to confirm whether they converted their TB test.
- If the TST is 5 mm of induration or greater, obtain a chest x-ray. If IGRA is positive, follow the same protocol for positive TST.
- If the chest x-ray is normal, offer 6-9 months of Isoniazid (INH) for treatment of latent TB infection (LTBI). Please contact Disease Control for questions on other treatment options.

Please send the results of the TST or IGRA and chest x-ray report (if the test is positive) to TB Control. Fax to (951) 358-7922; or mail to: County of Riverside Department of Public Health TB Control P.O. Box 7600, Riverside, CA 92513-7600.

Report individuals with positive TST or IGRA and abnormal chest x-rays immediately to TB Control by telephone (951) 358-5107. The case will be reviewed to determine if exclusion from school is indicated. Please contact TB Control if you have any questions.