



# **Prioritizing Contacts**

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Introduction to TB Nurse Case Management Online  
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# **Barbara Kuntz, RN** has the following disclosures to make:

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- No conflict of interests
- No relevant financial relationships with any commercial companies pertaining to this educational activity



# Contact Investigation Case Study

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***Presented by Barbara Kuntz, RN***

***Presentation developed by TB Nurse Consultant Erica Mendoza***

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# Objectives

- Discuss factors associated with prioritizing contacts identified in an investigation
- Explore methodology for contact testing at a work site

# Prioritize contacts

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## Determine infectious period

- Think about your patient
- Think about your contacts
- Think about exposure (time/setting)

# Background

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1. A 28 year old male, newly arrived from Guatemala, sought care at a local hospital for cough, chills, night sweats and weight loss.
2. The patient lived with his father and uncle in a one bedroom apartment. He worked in the kitchen of a local restaurant.
3. Both household contacts tested positive, and were started on TBI treatment. Patient could not provide social contacts. The decision was made to test at the work place.

# To Expand or Not to Expand?

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1. The patient was a dishwasher at a restaurant. He had worked while considered infectious.





# Patient Characteristics

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Diagnostic	Result
Symptoms?	Cough with chest pain, chills, weight loss, night sweats
TB Test?	QFT (-) in hospital, Tspot (+) DCPH
PCR?	Positive for M. tb complex
Smears?	Sputum smear positive (4+)
CXR?	Abnormal without cavitation
Culture?	Positive for M. tb

Determining infectious period is crucial to identifying contacts who need testing!

# Contact Characteristics

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- Congregate setting, restaurant kitchen
- Multiple shifts involved
- Kitchen small, workers are in close proximity
- Contacts reside in multiple counties
- Some workers speak Spanish only

# Investigation Results

Contact Category	Contacts Screened	Contacts Infected with TB	Contacts with TB Disease	Infected Contacts on Treatment	Disease on Treatment
Household	2	2	0	2	0
Work site	10	0	0	0	0
Total	12	2	0	0	0

14 co workers were identified for testing, but 3 did not show up for 2<sup>nd</sup> test. A fourth co worker turned borderline on 2<sup>nd</sup> test. She was lost to follow up, when we attempted to send her for CXR. Therefore, only 12 out of 16 contacts were fully screened. Positivity = 17%

# Limitations

- Screening mishap: all 14 co workers were present for 1<sup>st</sup> round testing, but not all specimens were tested.
- Employee turnover: the borderline co worker moved to a far away county. (lost to follow up)

# Review

## Significant exposure factors

- Physical proximity
- Duration of exposure
- Ventilation systems
- Immunosuppression, HIV, DM
- [TB Forms Resources | Texas DSHS](#)

# Review

- Figure out the infectious period
- Develop contact list, choose testing method, and determine testing dates/site
- Expanding the contact investigation
- Enlist the assistance of work site manager
- Analyze and summarize results



# Thank you

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*Barbara Kuntz, RN*