



Partnering with Public Health

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Screening & Treating TB Infection • February 20, 2025 • Round Rock, Texas

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Has the following disclosures to make:

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



Partnering with Public Health

Building Stronger Connections

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WILLIAMSON COUNTY AND CITIES HEALTH DISTRICT

Objectives

- Identify the role of your local public health in Tuberculosis (TB) prevention and care.
- Discuss opportunities to collaborate with your local health department in the screening, testing, care and management of TB patients.



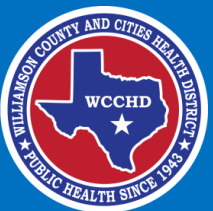
Public Health Role in TB Prevention and Care

- Evaluate, diagnose, and treat patients with active TB disease.
- Interview patients with TB to identify individuals who may have been exposed to TB – contact investigations.
- Find, test, and treat individuals who have been exposed to TB (LTBI and/or active TB disease).
- Collaborate with entities outside of HD including hospitals, health care providers, laboratories, schools, correctional facilities including jails and ICE facilities and other sources.



Public Health Role in TB Prevention and Care

- Evaluate patients referred through the CDC's Electronic Disease Notification (EDN) system and Status Adjusters (SA) through eMedical
 - * - B1s – suspicion of potential TB disease
 - * - B2s – LTBI
- Screen, test and treat those in our community who have entered US on humanitarian VISAs who need TB tests.
- Educate communities and healthcare providers about TB and LTBI.
- Passive and active surveillance strategies for identifying TB cases.
- Reporting of suspected and confirmed TB cases.



WCCHD TB Stats 2024

Active TB Cases =	17
LTBI Referrals =	>377
Evaluated those suspected of having TB	38
EDN referrals – B1s =	50
eMedical SA referrals – B2s =	277
Special Pops referrals =	633

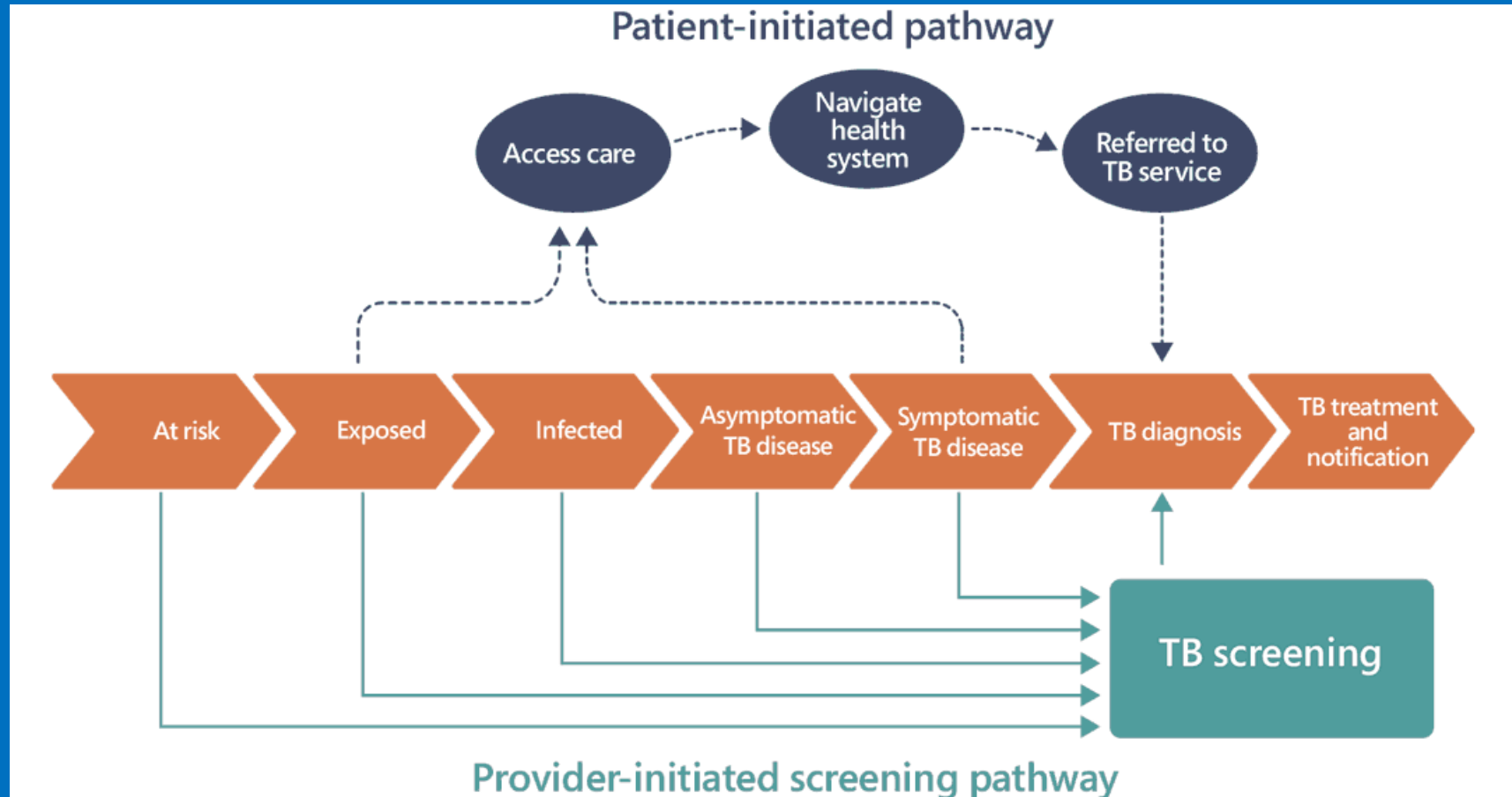


Opportunities for Collaboration

- Early Detection and Screening
- TB Testing and Diagnosis
- Treatment and Medication Adherence
- Case Management and Support Services
- TB Training and Capacity Building
- Surveillance and Reporting
- Culturally Competent Care
- Community Education and Awareness
- Emergency Response and Outbreak Management



Early Detection and Screening – 2 Approaches for Detection of TB




Referral Process

Reporting TB disease or TB infection is required by state statutes.

- Active TB patients – within 1 working day
- Patients suspected of having active TB – within 1 working day
- Latent TB Infection – within 1 week
- INCLUDE CXR report and TB Test report
- HD staff can act as a resource to let staff know exactly what is needed for reporting and follow-up.

Williamson County and Cities Health District
Positive TB Test Report
(PPD or IGRA)



Date: _____

Name of Patient: _____ DOB: _____

Phone: _____ Home _____ Cell _____

Sex: M F Race: _____ Hispanic Non-Hispanic

Patient's Address: _____
Street City Zip Code

Date of IGRA: _____ QFT or T-spot Result: _____

Date of PPD: _____ PPD Read: _____ Result: _____ (mm)

Reason for test? Symptoms Employment Immigration _____

Previous Test? Yes No Unknown Date of Previous Test: _____ Result: _____ (mm)

Agency Reporting: _____ Agency Phone: _____

Agency Fax: _____ Treating M.D.: _____

SYMPTOMS

Cough Hemoptysis Productive Cough Fever Chills Night Sweats

Weight Loss (>10%) No Symptoms Other: _____

Date of CXR: _____ CXR Results: + - Foreign Born? Yes No

Contact to case? Yes No BCG? Yes No International Travel? Yes No

Contact's Name: _____ Relationship: _____

If yes, where? _____ Date: _____

Comments: _____

If you suspect active disease, please call us immediately at 512-248-7651

Please fax all positive skin tests with the mm reading, a copy of the written CXR results and IGRA lab reports for all Williamson County residents to:

Williamson County & Cities Health District
Attn: TB Team Fax: 512-712-1256



Medical Consultation Opportunities

- Patients may have test results that are confusing or conflict with each other.
 - *Call WCCHD TB Management Team for assistance with case review.
- Patients may have complex co-morbidities, ie. HIV, diabetes, cirrhosis
 - *Assist in assessing medication regimen interactions.
 - *Coordinate with TB expert consultants.
- The HD can assist with additional diagnostics:
 - *sputum collection
 - *specialized TB laboratories to support quicker diagnosis
- Patients with unclear history of treatment for TB or TB infection.



Treatment and Medication Adherence

A patient diagnosed with TB disease needs medical management in the community.

- HD staff can manage the patient's course of treatment in tandem with the referring provider.
- The PCP remains the medical home.
- The PCP will still manage other chronic conditions.
- Patient education on importance of adherence to TB treatment

Patients may be mobile.

- HD staff can refer patients who move to the receiving jurisdiction to complete treatment.

*Interjurisdictional Transfer Notification Form (IJN)

*National TB Coalition of America – State, Big City and Territory TB Program Contacts

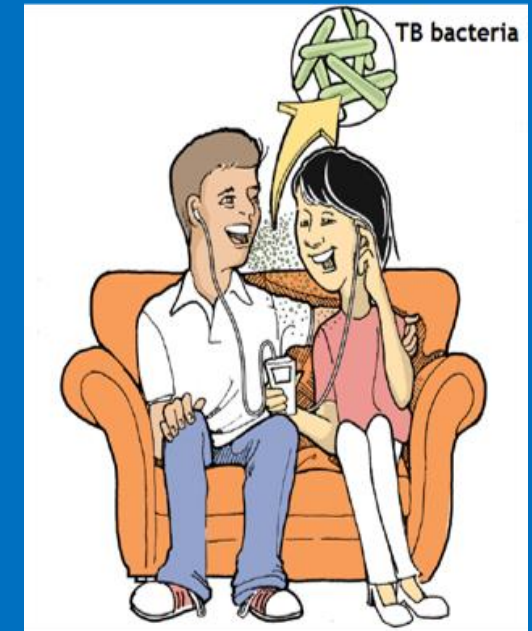
<https://www.tbcontrollers.org/community/statecityterritory/#.W1D70HmQwy9>



Contact Investigations

- Contact Investigations (CI) are an essential part of TB elimination programs.
- CI's help limit spread of TB.
- Patients have contacts who may have been exposed to or have been infected with TB.
- HD staff will:
 - *Interview the patient
 - *Contact contacts to set up screening and testing
 - *Perform home visits to determine individuals who were exposed to TB
 - *Provide treatment for those infected with LTBI

The information shared with the HD is kept confidential.



Opportunities for Training and Education

- Physicians new to the community or hospital may not have an extensive background in TB.
 - *HD staff can act as a resource to discuss the diagnostic process and provide information to help clarify the diagnosis.
- Community members who hear about a TB “outbreak” may become a little concerned.
 - *HD staff work with community members and provide presentations and testing to those who may have been exposed to TB.



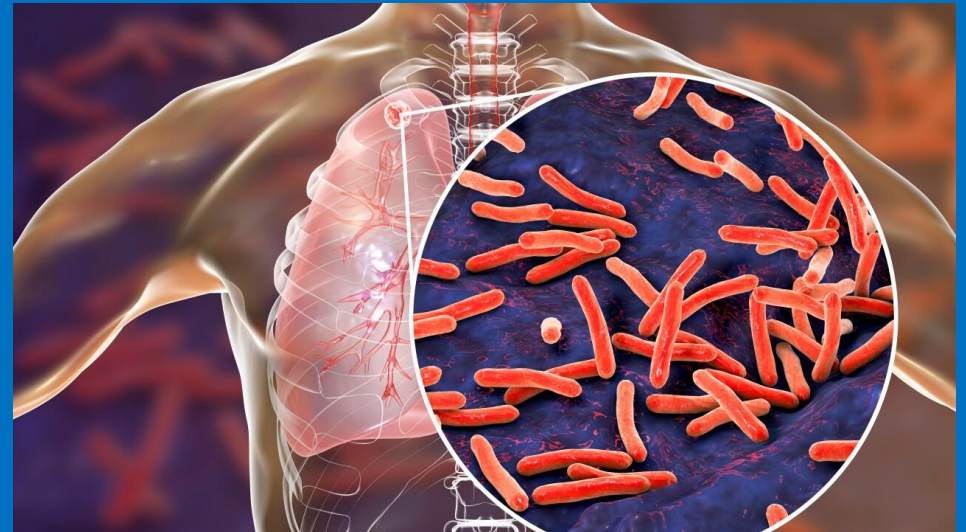
TB Training and Capacity Building

- Education for healthcare workers
- Workshops and conferences
- Call WCCHD's TB Management if you would like TB training for your staff either in person or virtually.



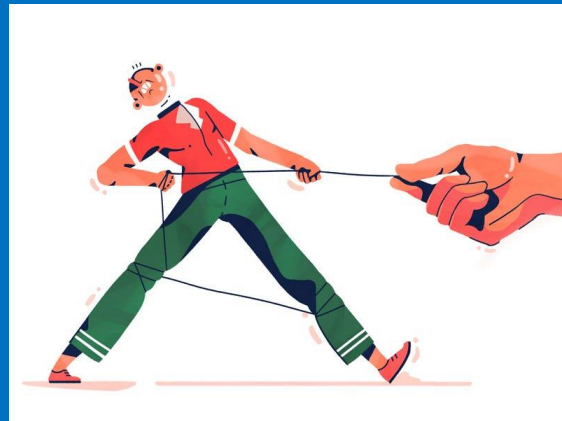
Emergency Response and Outbreak Management

- . TB outbreak response
 - * rapidly isolating suspected infectious TB cases
 - * conduct thorough CI
 - * provide immediate access to diagnostic testing and treatment
 - * raise awareness about transmission prevention
- . Coordination with congregate settings i.e. correctional facilities and shelters



What the HD Doesn't Do

- Take your patient away from you.
- Treat the patient for other medical ailments that are discovered during the course of treatment for TB.
- Arbitrarily test individuals for TB infection.
- Require individuals to take LTBI treatment.
- Indiscriminately lock up patients to force them to take TB medications.



How You Can Help Us

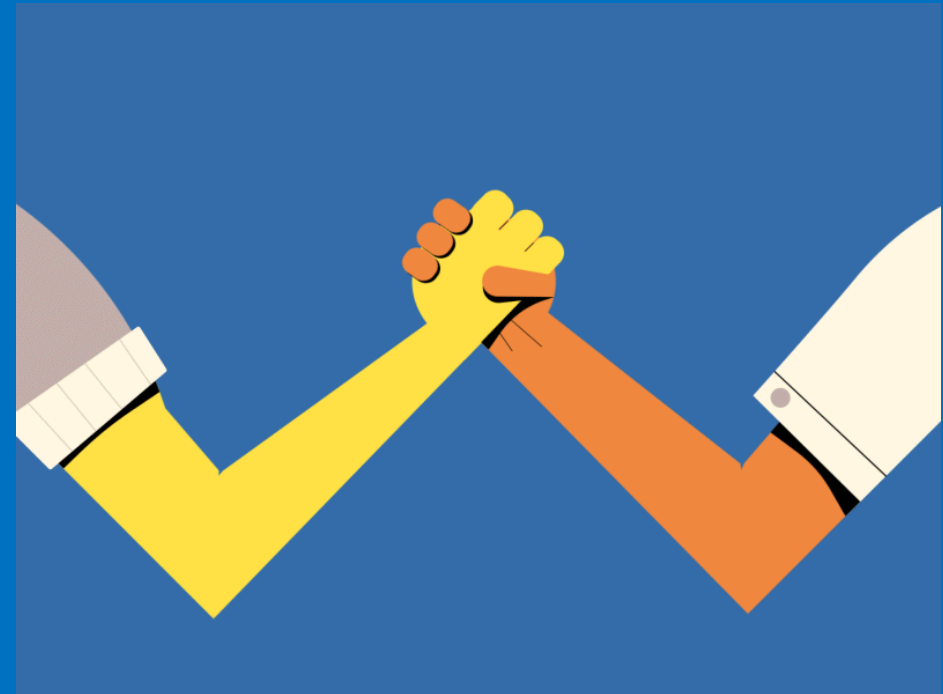
- THINK TB! Do you know your patient's TB status?
- If referring your patient to the HD, tell them the HD staff will contact them.
 - *Many people think we are scammers
- Explain what TB infection is, that treatment is available and reinforce why treatment is important
- Patient treatment refusals include:
 - *"I have immunity to TB due to the BCG vaccine"
 - *"My doctor says I don't have TB disease"
 - *"My doctor said my CXR was normal so I'm good"



Conclusion

The TB program of your local HD is here:

- To help you manage your patients diagnosed with TB or TB infection.
- To act as a resource for TB related questions and problems that arise.
- To build a solid foundation for public and private health partnership.



Thank you!

For more information:

WCCHD TB Management Program

P: 512-248-7651

F: 512-712-1256

Email: WCCHD-TB@wilco.org

Website: www.WCCHD.org



WILLIAMSON COUNTY AND CITIES HEALTH DISTRICT