

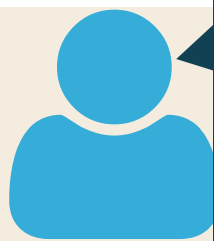


Tuberculosis



Administrative Controls and Reporting Requirements

Administrative Controls in MT Healthcare Facilities



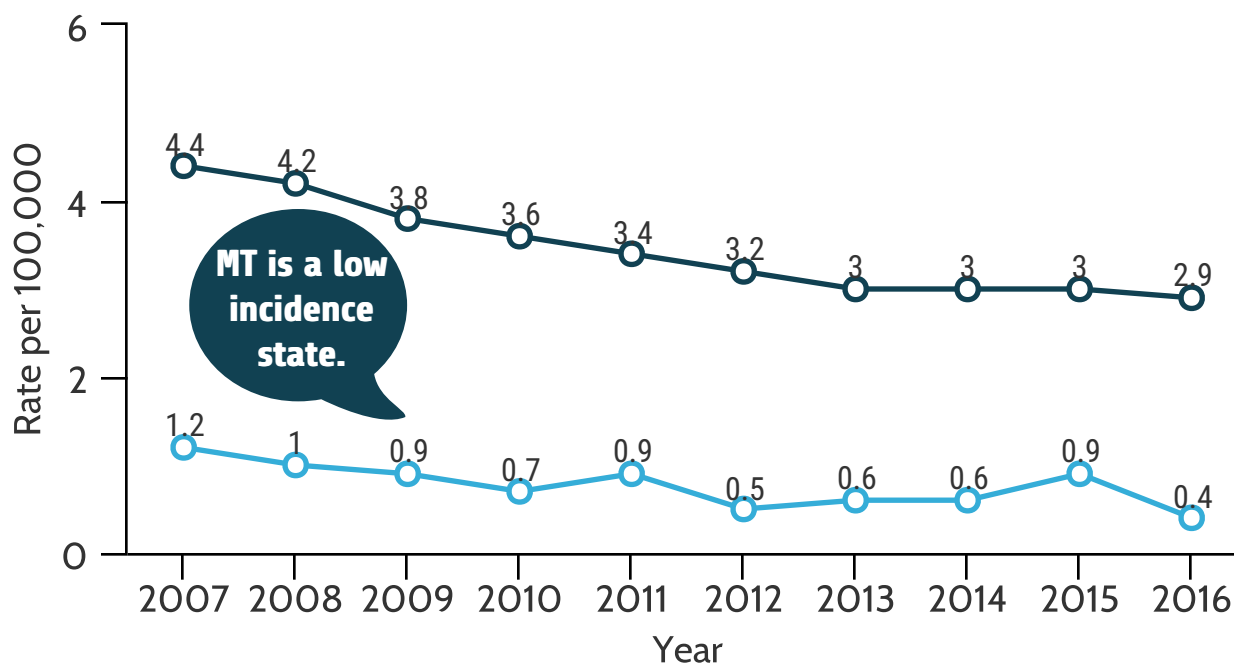
Shouldn't I be tested or at least screened every year for tuberculosis?

All healthcare facilities are required to have an infection control program to control communicable disease for both patients and employees. When considering TB screening for employees in low incidence areas, CDC guidelines recommend testing upon employment, and additional testing is not necessary unless there is an exposure to TB.

Some types of facilities are required to test every year by administrative rule.

Check to see how your facility is licensed to know which ARMs apply to your TB screening procedures.

Montana TB Incidence Rate 2007-2016



○ MT ○ US

What do the Administrative Rules of Montana (ARM) require of healthcare facilities regarding TB?

TB ARMs and Healthcare



Active TB disease is a reportable condition in the state of MT.



Notify local public health when suspected or confirmed cases are identified and prior to patient discharge.



Treatment of drug susceptible TB must be consistent with national guidelines, and directly observed therapy is required.



TB specimens must be sent to the Montana Public Health Laboratory for confirmation, drug susceptibility, and genotype testing.



Only the local health officer can impose involuntary isolation.

TB Specimen Collection in Healthcare Facilities

Why do I need multiple specimens to identify active TB cases?

TB Active Disease Cases, MT, Jan 2015–Oct 2017 Positives by Test Type, n=16	Percent of Cases with a Positive on First Sample Collected	Percent of Cases With at Least One Positive on Subsequent Samples
AFB	56%	63%
TB NAAT	88%	88%
TB Culture	75%	88%

When testing for TB, collect three sputum samples 8–24 hours apart with at least one collected in the early morning.

While TB sputum culture is the "gold standard" for diagnosis of active disease, nucleic acid amplification tests (NAAT) to detect *Mycobacterium tuberculosis* DNA can also be used. NAAT is useful early in disease when AFB smears are still negative for mycobacteria.