HOUSTON METHODIST TB SCREENING FAQS

What is changing about the annual screening?

Mycobacterium tuberculosis (TB) blood testing is being introduced as the preferred and standardized surveillance test method for certain health care workers. Some locations have already implemented these changes in prior surveillance cycles.

Who will need the blood test instead of the skin test?

- Individuals born outside the United States who have or may have received a Bacillus Calmette Guerin (BCG) vaccine may be required to complete a blood test called QuantiFERON
- Individuals with a single prior positive TB skin test that was not confirmed by TB blood testing
- Individuals with certain immune disorders
- Individuals who have been directed by Employee Health Clinic nurses or doctors to undergo TB blood rather than TB skin testing due to special circumstances (borderline or indeterminate prior testing)

Why does being born outside the United States mean I need a blood test?

Many people born outside the United States have been given the BCG vaccine, which may cause a false positive on a TB skin test. The blood tests, however, are not affected by a prior BCG vaccine. View a world map of <u>countries</u> that give the BCG vaccine.

Which employees will continue to undergo skin testing?

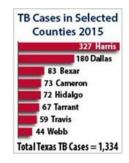
If you were born in the United States and do not fall into any of the other categories mentioned above, you will continue to receive a skin test.

What do I need to do?

Visit a TB testing station for instructions beginning May 30. Some employees will have email questionnaires sent to them and do not need to visit testing stations (those with prior confirmed positive TB tests).

Is TB really a threat?

- In 2016, the number of tuberculosis cases in the United States rose for the first time in nearly a quarter-century, according to the Centers for Disease Control and Prevention (CDC)
- In 2016, there were 1.4 million deaths worldwide due to tuberculosis.
- In 2015, Houston led the state for the number of active TB cases, according to the Texas Department of State Health Services.



Is TB really a threat in hospitals?

Houston Methodist has had outbreaks of tuberculosis infection among groups of co-workers periodically throughout the years.

What standards do we follow?

The CDC has extensive guidance for hospitals regarding the prevention of the spread of TB. We are aligned with these standards, which can be found <u>HERE</u>.

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TB SCREENING FAQS

What can Houston Methodist do?

- Houston Methodist Employee Health (EHC) and Infection Prevention & Control (IPC) have the following programs in place to reduce risk of TB transmission to and from hospital workers:
- Free testing and medical consultation for TB signs/symptoms or questions for any employee
- Mandatory new-hire TB testing, including CDC-recommended Interferon Gamma Release Assay (blood test) for all who are born outside the U.S. Two-step skin testing for U.S.-born employees to increase testing yield. New hires with high risk of TB disease (abnormal chest X-ray) are required to visit with their physician prior to work
- Mandatory annual TB testing with job suspension if non-compliant. Outreach stations and in-office services for convenient testing of staff
- Mandatory post-exposure TB testing and exposure investigation by IPC
- Mandatory medical consultation with an EHC provider or personal physician following a newly positive, in-service, TB test
- Free confirmatory testing for all newly positive TB tests to encourage latent disease treatment
- Free medical treatment for all cases where a hospital-acquired TB infection is likely

When is a chest X-ray part of a surveillance program?

A chest radiograph is not a substitute for tests for M. tuberculosis infection in a serial TB screening program. Skin or blood testing are the only two screening tests the CDC recommends. However, if you test positive on a TB blood test, you will be asked to have a chest X-ray at that time.

What happens if I test positive?

If you test positive on a TB blood test, there will be a review of any current symptoms and a single view chest X-ray. Once active TB disease has been excluded, you will receive information regarding latent (dormant) TB infection. A confirmation blood test may also be recommended by a physician following a positive TB test and prior to offering treatment for latent TB infection.



