

TB Regulation Forum
March 19, 2015

Presented for the
Kentucky Hospital Association

Presented by
Robert L. Brawley, MD, MPH, FSHEA, Chief, Infectious Disease Branch
Emily A. Anderson, RN, BSN, TB Program Manager
Maria Dalbey, RN, BSN, MA, MBA, TB Nurse Consultant




The logo features the word "Kentucky" in a stylized white font with a red and blue horse head silhouette to the right. Below it, the words "UNBRIDLED SPIRIT" are written in a smaller, blue, sans-serif font. A small "TM" trademark symbol is located to the right of the horse head.

Goal

To align Kentucky regulations with
CDC TB guidelines

Cabinet for Health and Family Services



The logo features the word "Kentucky" in a stylized blue font with a red and blue horse head silhouette to the right. Below it, the words "UNBRIDLED SPIRIT" are written in a smaller, blue, sans-serif font.

Two TB Regulations

- 1) Health Care Workers (HCW) - *new*
- 2) Long-term Care Residents - *amendment*

Cabinet for Health and Family Services



Issue

Why does KDPH favor annual TB screening for health care workers?

Cabinet for Health and Family Services





Health Care Worker (HCW)

11 Sections (One new section):

1. Definitions
2. **TB Infection Control Program. Administrative Controls, Environmental Controls, and Respiratory Protection**
3. TB Testing Requirements for TSTs
4. TB Risk Assessment and TSTs or BAMTs for HCWs on Initial Employment – risk factors and TST cut-off (similar to a symptom screen). Two-step TST or one-step BAMT on hire with serial testing thereafter for those whose tests are interpreted as negative
5. Annual TB Risk Assessments and Annual TSTs or BAMTs for HCWs – staggered testing
6. Medical Record Documentation for HCWs – TST-positive or BAMT-positive, written or electronic

Cabinet for Health and Family Services



Health Care Worker (HCW)

7. Medical Evaluations, Chest X-rays, and Monitoring of HCWs with a Positive TST, a Positive BAMT, a TST Conversion, or a BAMT Conversion – offer HIV; offer LTBI Rx; if refusal, educate and monitor every six months for two years with a TB risk assessment
8. Medical Evaluations, Chest X-rays, Laboratory Tests, Treatment, and Monitoring of HCWs with Suspected TB Disease or Active TB Disease – off work, isolated, cleared by licensed physician or clinician with state and local health department
9. Responsibility for Screening and Monitoring Requirements – facility administrator or designee

Cabinet for Health and Family Services



Health Care Worker (HCW)

10. Reporting to Local Health Departments – report any positives/conversions, abnormal CXR for TB, positive AFB smear, MTB culture, PCR-positive, TB treatment
11. Treatment for LTBI – offer treatment; offer HIV testing; licensed clinician to clear; DOPT; if refusal, educate and monitor every six months for two years/risk assessment; if LTBI treatment completed, TB risk assessment only annually

Cabinet for Health and Family Services



Kentucky TB Program Staff

- Robert Brawley, MD, MPH, FSHEA, Chief, Infectious Disease
robert.brawley@ky.gov (502) 564-3261 x4235
- Emily Anderson, RN, BSN, Program Manager
emilya.anderson@ky.gov (502) 564-4276 x4298
- Maria Dalbey, RN, BSN, MA, MBA, Nurse Consultant
maria.dalbey@ky.gov (502) 564-4276 x4292
- Lindsay Pappas, RN, BSN, Nurse Educator
lindsay.pappas@ky.gov (502) 564-4276 x4296
- Teresa Goins, BS, Procedures Development Coordinator
teresa.goins@ky.gov (502) 564-4276 x4293
- Tammy Hall, Administrative Specialist III
tammy.hall@ky.gov (502) 564-4276 x4294

Cabinet for Health and Family Services

