

TB Follow-up Recommendations for Arrivals with a TB Class Condition

| Arrival's Class Status | TB Follow-up Recommendations |
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| <p>Class A TB – active pulmonary TB disease, sputum smear or culture positive; requires a waiver (i.e., on treatment and smear-negative prior to travel).</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Consider this patient to have active TB disease (suspected or confirmed). <input type="checkbox"/> Review overseas medical exam and treatment documentation. <input type="checkbox"/> Assess the patient clinically and do additional diagnostic testing, such as CXR, sputum collection, and other tests, if indicated. <input type="checkbox"/> Continue or revise treatment regimen, as indicated. <input type="checkbox"/> If MDH has not already notified you of this arrival with TB disease, please report this TB case to MDH by calling 651-201-5414 within one working day. <input type="checkbox"/> Directly observed therapy (DOT) is the standard of practice for treating persons with active TB. |
| <p>Class B1 TB – evidence of pulmonary or extrapulmonary TB disease, sputum smear-negative; includes “old healed TB”, and previously treated TB.</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Evaluate for signs and symptoms of TB disease that may have developed since their overseas exam. <input type="checkbox"/> Administer a tuberculin skin test (TST) or Interferon Gamma Release Assay (IGRA), such as a QFT® or T-SPOT®, regardless of BCG history, unless the person has a reliable history of previous treatment for TB or reliable documentation of a previous positive test. <input type="checkbox"/> Do a CXR regardless of TST/IGRA result. <input type="checkbox"/> Do additional tests (e.g., sputa for AFB, etc.), as indicated, to determine TB diagnosis (i.e., latent TB infection [LTBI] or active TB disease). |
| <p>Class B2 TB – LTBI (TST \geq 10 mm)</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Consider this patient to have LTBI. Evaluate for signs and symptoms of TB disease that may have developed since their overseas exam. <input type="checkbox"/> If previous results are unreliable, consider a repeat TST or IGRA to confirm or rule-out an overseas diagnosis of LTBI. <input type="checkbox"/> Do a CXR unless the patient had repeated CXRs overseas showing improvement or stability and the most recent CXR was less than 3 months ago. If HIV+, do a CXR regardless of overseas CXR results. <input type="checkbox"/> Do a chest x-ray (CXR) for those who have signs or symptoms compatible with TB disease, regardless of previous results. <input type="checkbox"/> It is a standard of practice in the United States to offer treatment for LTBI. A domestic medical evaluation must be done before initiating LTBI treatment. |
| <p>Class B3 TB – TB Contact (contact to a confirmed case of TB overseas)</p> | <ul style="list-style-type: none"> <input type="checkbox"/> This person is a contact to a case and had a negative screening test (TST or IGRA) overseas. Evaluate for signs and symptoms of latent TB infection or active TB disease that may have developed since their overseas exam. <input type="checkbox"/> Administer a tuberculin skin test (TST) or Interferon Gamma Release Assay (IGRA) such as a QFT® or T-SPOT®, regardless of BCG history. <input type="checkbox"/> Do a chest x-ray (CXR) for individuals with a positive TST or IGRA; or symptoms compatible with TB disease, regardless of the TST or IGRA result. <input type="checkbox"/> If more information is needed about the source case, call the TB Program Refugee and Immigrant Coordinator at 651-201-5414. |
| <p>NOTE:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Pregnancy is not a medical contraindication for TB testing or for treatment of active or latent TB. <input type="checkbox"/> A TST administered prior to 6 months of age may yield a false negative result. <input type="checkbox"/> IGRA testing is approved for use in anyone \geq5 years of age. <input type="checkbox"/> Return completed <i>TB Class Follow-up Worksheet</i> to: Marge Higgins, MDH TB Program Freeman Office Building P.O. Box 64975 St. Paul, MN. 55164-0975 Fax: 651-201-5500, Phone: 651-201-5414 | |

