

Refugee Health Microlearning Series: TB Transcript

UPDATED 7/22/2022

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Refugee Health Screening: Tuberculosis

- Hello and welcome to the micro-learning series presented by the Refugee Health Program at the Minnesota Department of Health. This series is meant to help providers, clinical teams, and public health better understand best practices for refugee health screenings. This video focuses on **Tuberculosis** screening guidance during refugee health assessments.

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What do you need to know

Who?

- All arrivals should be screened for signs, symptoms, and exposure to tuberculosis.
- Depending on age and overseas TB classification, additional screening should be conducted.

What?

- A detailed guidance on screening for refugees with a TB classification can be found on the website linked on the screen.
- Those without a TB classification should receive a TB test. IGRAs are the recommended TB test for refugees 2 years old and up; TSTs should be done for those younger than 2 years of age.
- Providers should accept positive IGRA (QFT or T-SPOT) results from overseas and proceed with a chest x-ray but should repeat an IGRA if there is a negative overseas IGRA result.
- Any suspect or confirmed cases of active TB must be reported to the MDH TB program.

When?

- TB screening should occur during the initial refugee health assessment, and any findings should receive appropriate follow-up.
- Repeat screening is recommended for arrivals younger than 6 months with a negative TST result, due to the risk of a false negative.

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Updates in Guidance

Is this different from previous MDH guidance?

- This updated guidance changes screening recommendation from those 5 years and older to those 2 years and older.
- Additional guidance has been added in light of expanded overseas IGRA testing for those ages 2-14.

Is this different from national guidance?

- Minnesota recommends re-drawing IGRA for those with negative results overseas.
- Minnesota adds specific limitations to when an overseas chest x-ray can be used in lieu of a domestic chest x-ray.
- Minnesota has specific resources including LTBI medication subsidies.

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Report Screening Results

- As part of the paperwork for the Refugee Health Assessment that is submitted to the Refugee Health Program, there is a section where domestic TB screening results can be recorded. Please make sure this section is being filled out appropriately.
 - Chest x-ray status must be marked to be considered complete.
 - A diagnosis must be marked to be considered complete.

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Resources to learn more

- If you're interested in learning more, please look at the full screening guidance and other resources outlined in this page.

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Thank you

- The well-being of all Minnesotans, including those with refugee status, depends on the work and dedication of our partners. Thank you so much for your work.

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