

POLICY ON INFECTION CONTROL FOR TUBERCULOSIS FOR UTHSC EMPLOYEES, FACULTY AND STAFF

Effective date: January 1, 2014

I. INTRODUCTION

The University of Tennessee Health Science Center (UTHSC) will provide an environment for the safe conduct of its mission in education, research, community service, and patient care. This policy is intended to provide reasonable protection for employees, faculty and staff against the transmission of infectious diseases within the environment of an educational and health care institution. University Health Services (UHS) is responsible for the implementation and interpretation of this policy. A provider may be reached at (901) 448-5630 at any time.

II. DEFINITIONS AND ABBREVIATIONS IN POLICY

- a. Tuberculosis (TB)
- b. Tuberculin Skin Test (TST)
 - i. Liquid called tuberculin injected into skin to see if there is a reaction
 - ii. Also referred to as purified protein derivative (PPD)
- c. Interferon-Gamma Release Assay (IGRA)
 - i. Referred to as T-Spot or Quantiferon-TB Gold
 - ii. Blood test to measure a person's immune reactivity to tuberculosis
- d. Bacille Calmette-Guerin (BCG)
 - i. TB vaccine given to individuals living outside the United States
- e. Symptoms Checklist
 - i. Questionnaire and interview with healthcare worker completed annually for individuals that have previously tested positive
- f. University Health Services (UHS)
- g. Employees (Clinical Staff, Researchers and workers in a high risk area for exposure whose department deemed them necessary to have a TB skin test.

III. NEW HIRES/PRE-EMPLOYMENT REQUIREMENT-

All UTHSC employees are required to have documentation of a tuberculosis test (TST or IGRA) completed within three (3) months prior to their start date. These records must be forwarded to University Health Services for documentation and approval. New employees may elect to have a new TST or IGRA completed at UHS prior to their start date at no cost. Employees that test positive or whose documentation show a previous positive result must receive a chest x-ray. The chest x-ray arrangements will be set up through the UHS current vendor.

If the chest x-ray is abnormal, then UHS will decide how best to have you evaluated further. This can be done by a specialist in Infectious Disease, Pulmonary Medicine or the Shelby County Health Department. The individual may also be referred to the Shelby County Health Department for medication and sputum testing for smears and culture. TST and IGRA tests results should take no longer than four days and the scheduling of a chest x-ray should take no longer than two business days. No

employee will be placed on payroll or begin working until all results have been identified and cleared by UHS. For employees that fail to start the process in a timely manner this may result in a delayed start date.

IV. EXISTING EMPLOYEE ANNUAL REQUIREMENT

All UTHSC employees are required to have an annual tuberculosis evaluation. UHS will determine the most appropriate TB screening which may include TST, IGRA, symptom checklist, or chest x-ray. These services are provided to the employee at no cost. All employees must have the results of their annual exam done no later than seven days after the past due date from the previous year test or they will not be permitted to work until the results have been documented in UHS.

V. TESTING PROTOCOL

Employees with newly positive TST or IGRA result, and those with known previous positive results and new symptoms, will receive a chest x-ray and may continue working while awaiting results. If the chest x-ray is abnormal the employee will be pulled from work, placed on sick leave, and the UHS staff will decide if further evaluation should be done by Infectious Disease, Pulmonary Medicine or the Shelby County Health Department. The UTHSC faculty will evaluate and as necessary refer the individual to the Shelby County Health Department. The Shelby County Health Department can provide medication at no cost and provide sputum testing for smears and culture. The employee may not return to any work-related activities until they are cleared and released by UHS via the UTHSC Infectious Disease and/or Pulmonary faculty or Shelby County Health Department.

VI. MEDICATION FOR LATENT TB

It is strongly recommended by the University of Tennessee for those individuals who test positive for latent TB (positive TST or IGRA with normal chest x-ray and no other evidence of TB disease) take isoniazid (or other approved drug therapy for latent TB, if isoniazid is contraindicated). In most cases, UHS can write the prescription and provide follow-up lab work for latent TB. UTHSC cannot mandate that you take this medication for latent TB but they will be required to document it was offered and you declined to accept. Generally, active TB cases are treated at the Shelby County Health Department in cooperation with UHS. Note that if you have active TB the Shelby County Health Department will mandate that you take the medication to be released.

VII. PREGNANCY/BREASTFEEDING

No exemption is granted for the mandatory annual tuberculosis evaluation. Employees that are pregnant or breastfeeding may elect to have blood drawn for a T-Spot rather than a tuberculin test at their discretion at no cost.

VIII. UNIVERSITY HEALTH SERVICES

UHS has the final authority to determine the appropriate tests to give employees and the protocol to follow. All requirements given by UHS must be followed by each

employee and their department. Failure to follow the guidelines may result in disciplinary action up to and including termination from UTHSC.

IX. COMMUNICATION

UHS will be responsible for tracking the results and follow-up for the employees. UHS will work closely to communicate information to the employee and their department head. UHS will notify the department head when an employee is placed on leave and not permitted to work. UHS will notify the employee and department head when the employee is permitted to return to work.