

# Diagnosis: Reporting Requirements for Tuberculosis

## Reporting suspected and confirmed tuberculosis

Medical providers and infection control practitioners are required by the New York City Health Code Article 11, in particular, Sections 11.03, 11.05 and 11.21, to report all patients suspected and confirmed with tuberculosis (TB) to the New York City Department of Health and Mental Hygiene (DOHMH), Bureau of Tuberculosis Control, within 24 hours of diagnosis or clinical suspicion. Medical providers must report these patients even though microbiologists and pathologists are also required to report findings consistent with TB. Note that the reports must be received by the DOHMH within 24 hours, whether by express or overnight mail, fax, telephone, or electronically.

It is **mandatory** to report patients who meet any of the following criteria:

- Smear (from any anatomic site) positive for acid-fast bacilli (AFB)
- Nucleic acid amplification (NAA) test (e.g., Roche's AMPLICOR<sup>®</sup>, Genprobe's MTD<sup>™</sup>)<sup>1</sup> result positive for *Mycobacterium tuberculosis* complex
- Culture positive for *M. tuberculosis* complex including: *M. tuberculosis*, *M. africanum*, *M. bovis-BCG*, *M. caprae*, *M. canetti*, *M. microti*, *M. pinnipedii*, *M. bovis*
- Biopsy, pathology, or autopsy findings consistent with active TB, including but not limited to caseating and necrotizing granulomas in biopsy of lung, lymph nodes, or other specimens
- Treatment with two or more anti-TB medications for suspected or confirmed active TB
- Clinical suspicion of pulmonary or extrapulmonary TB such that the physician or other health care provider has initiated or intends to initiate isolation or treatment for TB
- Continuation, discontinuation, completion, or other outcomes of treatment for active TB
- Any child younger than five years old (up to the day of the fifth birthday) who has a positive tuberculin skin test (TST) or a positive U.S. Food and Drug Administration (FDA) approved blood-based test for TB infection [such as QuantiFERON<sup>®</sup>-TB Gold (QFT-G)]<sup>1,2</sup>
- In addition, Section 47.21 requires that Day Care staff report those with latent TB infection (LTBI) to the Bureau of Day Care

When an individual has an AFB-positive smear or has started treatment for TB, reporting should never be delayed pending identification of *M. tuberculosis* with a NAA test. Patients should be reported whenever TB is suspected, even if bacteriologic evidence of disease is lacking or treatment has not been initiated. Additionally, when requested by the DOHMH, a physician shall report the results of any examination of a contact.

## Microbiology and Pathology Laboratories

The New York City Health Code also requires laboratories to report as per Articles 11 and 13, Sections 11.03, 11.05, and 13.03, all of the following within 24 hours of identification to the Bureau of Tuberculosis Control:

- AFB-positive smears (regardless of anatomic site)
- Cultures positive for *M. tuberculosis* complex
- NAA test results that identify *M. tuberculosis* complex (e.g. AMPLICOR<sup>®</sup>, MTD<sup>™</sup>)
- Results of susceptibility tests performed on *M. tuberculosis* complex cultures
- Biopsy, pathology, or autopsy findings consistent with active TB, including but not limited to presence of AFB on smear or caseating and/or necrotizing granulomas that are consistent with TB in the lung, lymph nodes, or other specimens
- Any culture or NAA result associated with an AFB-positive smear (even if negative for *M. tuberculosis* complex)

## Reporting by telephone and on the URF

Suspected and confirmed TB patients may be reported by telephone to the TB Hotline, 347-396-7400, but a completed Universal Reporting Form (URF) must follow within 48 hours. The URF should be faxed to the Bureau of Tuberculosis Control at 347-396-7579 and the original mailed to the Bureau of Tuberculosis Control, DOHMH at 42-09 28th Street CN#22, Long Island City, NY 11101. The URF can also be completed online, by first creating an account on NYC-MED at <http://www.nyc.gov/health/nycmed>. Assistance is available by calling 1-888-NYC-MED9 (1-888-692-6339).

Information reported on the URF should be as complete as possible. The following essential information must be included when the report is submitted to the New York City DOHMH:

- Information needed to identify and locate the individual (i.e., name, telephone, address, and date of birth)
- Provider information (i.e., physician's name and telephone number, reporting facility)
- Results of smear for AFB (including date specimen obtained and accession number, if available)
- Results of chest radiographs
- Any treatment information

Laboratories are required to report via the Electronic Clinical Laboratory Reporting System (ECLRS) as of July 1, 2006. In addition, within 24 hours of observing growth of *M. tuberculosis* complex in a culture from any specimen, the New York City Health Code section 13.05 (a) requires that a portion of the initial culture be sent for DNA analysis to the NYC DOHMH Public Health Laboratory, Room 236, NY, NY 10016). Laboratories outside of New York City should submit isolates directly to the Wadsworth Center Mycobacteriology Laboratory in Albany, NY for genotyping.

## Patient follow-up

The treating physician should also report whether the patient completed treatment and the outcome of the patient (cured, failed, relapsed, lost, moved) or whether treatment was discontinued if the patient was found not to have TB. Physicians must assist the DOHMH in its efforts to evaluate persons suspected of having TB and in patient follow-up. Case managers will be in contact with the treating physicians to request updates and ensure that appropriate treatment and monitoring is being conducted. A Report of Patient Services Form (TB 65) may need to be completed.

## Reporting TB-related evaluation and treatment of contacts

Medical providers are required, under Section 11.21(b) of the New York City Health Code, to report to the DOHMH, when requested, all information on the evaluation, testing, and treatment of individuals who have been in contact with a person with active TB disease.

## Inquiries and forms

To inquire further about reporting procedures, please call the Surveillance Office at the Bureau of Tuberculosis Control at 347-396-7400. To order copies of the Report of Patients Services Form (TB 65) call 347-396-7402. The paper Universal Reporting Form can be obtained by calling toll free 1-866-NYC-DOH1 (1-866-692-3641) or at <http://www.nyc.gov/html/doh/html/hcp/hcp-reporting.shtml>.

## Notes:

1. Product names are provided for identification purposes only; their use does not imply endorsement by the NYC DOHMH.
2. To report a positive test for TB infection in a child less than 5 years old, use the Universal Reporting Form. For guidelines for interpreting skin test results, see City Health Information: Testing and Treating for Latent TB Infection, April 2006, [www.nyc.gov/html/doh/downloads/pdf/chi/chi25-4.pdf](http://www.nyc.gov/html/doh/downloads/pdf/chi/chi25-4.pdf)