

How to Report Active Tuberculosis Disease and Latent TB Infection

All patients, alive or deceased, with presumptive or confirmed active tuberculosis (TB) disease must be reported to the New York City Department of Health and Mental Hygiene (NYC Health Department) within 24 hours of diagnosis or clinical suspicion, as required by the NYC Health Code §§11.03 and 11.05. Medical, dental, osteopathic and other health care providers (provider) as well as administrators of hospitals or other institutions providing care and treatment, or their designees, including infection control practitioners, must report these patients. Microbiologists and pathologists are also required to report findings consistent with TB.

Criteria for Reporting (need to meet at least one):

- ✓ Positive nucleic acid amplification (NAA) test result for *M. tuberculosis* complex (for example, Gen-Probe Amplified *Mycobacterium Tuberculosis* [MTD] test, Cepheid GeneXpert MTB/RIF, Hain Lifescience GenoType MTBDRplus, Hain Lifescience GenoType MTBDRsl)
- ✓ Positive culture for *M. tuberculosis* complex, including: *M. tuberculosis*, *M. africanum*, *M. bovis*, *M. bovis-BCG*, *M. caprae*, *M. canetti*, *M. microti*, *M. pinnipedii*, *M. dassie*, *M. mungi*, *M. orygis*
- ✓ Biopsy, pathology or autopsy findings consistent with active TB disease, including caseating granuloma or caseating necrosis in biopsy of lung, lymph nodes or other specimens
- ✓ Positive smear (from any anatomical site) for acid-fast bacilli (AFB)
- ✓ Clinical suspicion of pulmonary or extrapulmonary TB such that the provider has initiated or intends to initiate isolation or treatment for active TB disease with two or more anti-TB medications
- ✓ Quantitative and qualitative results from blood-based interferon gamma release assay (IGRA) tests regardless of test result or patient's age (applicable to labs only)

*Civil surgeons are physicians certified by the U.S. Bureau of Citizenship and Immigration Services to perform medical examinations on immigrants seeking immigration visas to, or permanent resident status in, the U.S.

Reporting latent TB infection (LTBI) in children age 5 years or younger

- Report any child age 5 years or younger with a positive tuberculin skin test (TST) or IGRA result, regardless of whether the child has received a Bacille Calmette-Guérin (BCG) vaccination.
- Report quantitative and qualitative results from blood-based IGRA tests or induration (millimeters) for TSTs, as well as related chest imaging results and any preventive medication initiated for LTBI.

Civil surgeons* are required by the Centers for Disease Control and Prevention to report patients diagnosed with LTBI to health departments.

- Use IGRA instead of TST in all patients age 2 years and older to test for LTBI.
- Report all patients diagnosed with LTBI to the local health department of jurisdiction, based on patient's residence.
- Include documentation of positive IGRA or TST, chest radiography, and other diagnostic results to rule out active TB disease.
 - All IGRAs and chest X-rays ordered by civil surgeons must be performed independently from a health department.

Submitting the Report

Reports must be submitted either electronically or via fax using the Universal Reporting Form (URF). To download a URF, visit nyc.gov/health and search for **URF**. Submitting reports electronically is preferred.

- Electronic submission: NYC providers are encouraged to submit electronically through their NYCMED account. To create a NYCMED account, visit nyc.gov/nycmed.
- Fax submission: Fax URFs to the NYC Health Department's Bureau of TB Control at 844-713-0557.

The following must be included when submitting the report if available:

- ✓ Patient contact information (name, telephone, address, date of birth)
- ✓ Provider information (for example, provider's name, reporting facility, phone number, email)
- ✓ Results of AFB smear, including specimen source, date specimen was obtained and accession number
- ✓ Results of radiologic exams (for example, chest X-ray or other imaging)
- ✓ Any treatment information
- ✓ Quantitative and qualitative results from TST or blood-based IGRA test for children age 5 years or younger who have a positive test for TB Infection

Reporting active TB Disease

Do not delay reporting pending identification of *M. tuberculosis* with an NAA test or culture. Report active TB whenever suspected, even if bacteriologic evidence of disease is lacking or treatment has not been initiated. If TB treatment is initiated after submitting the initial disease report, the provider is required to submit an updated report.

Submitting TB Follow-up Reports

Providers are required to assist the NYC Health Department with evaluation and follow-up for people suspected of having active TB disease.

Per Health Code §11.03(e), all providers must provide access to necessary paper and electronic medical records to authorized NYC Health Department staff as requested.

Per Health Code §11.21(b), when requested by the NYC Health Department, all providers are required to report all information on the evaluation, testing and treatment of individuals who have been in contact with a person with active TB disease.

Per Health Code §11.21(a)(1), the treating provider or person in charge of the treatment facility is required to submit monthly clinical status reports for patients with active TB disease. To assist with monthly reports, the NYC Health Department created the "Report of Patient Services" form (TB 65). This form or a report containing the following information must be submitted to the patient's case manager. To download this form, visit nyc.gov/health and search for **Report of Patient Services (TB 65)** (under the Treatment drop-down on the **Tuberculosis: Provider Resources** page).

- ✓ Patient name, address and telephone number(s)
- ✓ Clinical status and treatment being provided
- ✓ If treatment is still ongoing
- ✓ Dates and results of sputum and chest X-ray exams
- ✓ Any other diagnostic, clinical, or epidemiologic information required by the NYC Health Department

Per Health Code §11.21(a)(3), the treating provider must report whether the patient completed treatment and the outcome of the treatment (such as cured, failed, relapsed, loss to follow-up, patient moved, refused, discontinued, etc.).

For more information, call the TB Hotline at 844-713-0559, available Monday to Friday, 9 a.m. to 5 p.m.