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January 5, 2016

Martha W. King  
Executive Director  
NYC Board of Correction  
51 Chambers Street, Room 923  
New York, NY 10007

Dear Ms. King:

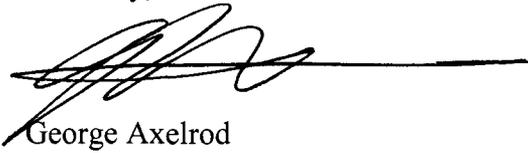
In accordance with the Board of Correction's New York City Correctional Health Care Minimum Standards, Section 3-13, "Variances," the Correctional Health Services (CHS) division of the NYC Health + Hospitals requests renewal, for a 6-month period, of a continuing variance from Section 3-04(b)(2)(v)(a) of the Minimum Standards, which requires that a tuberculin skin test (TST) be administered during the intake screening process for inmates who do not have a prior history of a positive reaction to the test. The variance, first granted by the Board in July 2013, and applicable to inmates throughout the NYC correctional system, authorizes CHS to use either interferon gamma release assays (IGRA) or TST for tuberculosis screening, and to exempt from repeat screening those prisoners who have a documented negative test in the six months prior to their admission.

The new tuberculosis screening program began at the RMSC in 2011 and then at facilities housing male inmates in 2012. Since implementation of the program, we have observed that the use of IGRAs at intake is feasible and adds negligible additional time to the intake process, while saving significant time subsequently by obviating the need for post-intake follow-up of TST results and associated documentation. CHS has now had many years of experience with IGRA, which has proven to be a valuable and effective tool in controlling tuberculosis in the jail system.

Accompanying this letter is our report on the IGRA initiative as required by the terms of the variance.

The consideration of the Board members and staff is greatly appreciated in this matter.

Sincerely,

A handwritten signature in black ink, appearing to be 'G. Axelrod', is written over a solid horizontal line.

George Axelrod  
Correctional Health Services

c: Patsy Yang, DrPH  
Homer Venters, MD

QuantIFERON (QFT) Progress Report  
 June 1, 2015 - November 30, 2015

	Male NYSIDs (06/01/15 - 11/30/15)		Female NYSIDs (06/01/15 - 11/30/15)		Total NYSIDs (06/01/15 - 11/30/15)	
	N	%	N	%	N	%
<b>Total NYSIDs with Intakes or "Stateln" w/ QFT Orders</b>	<b>21,803</b>		<b>2,451</b>		<b>24,254</b>	
<b><u>Ineligibles: (% of NYSIDs)</u></b>						
State Transfers	193	0.9%	4	0.2%	197	0.8%
Positive History	1,640	7.5%	217	8.9%	1,857	7.7%
Patients had negative results in previous 6 months	1,058	4.9%	83	3.4%	1,141	4.7%
<b>Total Ineligible Patients</b>	<b>2,891</b>	<b>13.3%</b>	<b>304</b>	<b>12.4%</b>	<b>3,195</b>	<b>13.2%</b>
<b><u>Not Tested (% of NYSIDs)</u></b>						
Lab Result = "Test Not Performed"	22	0.1%	1	0.04%	23	0.1%
Lab Result = "Refused"	108	0.5%	20	0.8%	128	0.5%
Lab Result = "Not available/Discharged"	599	2.7%	121	4.9%	720	3.0%
<b>Total Not Tested Patients</b>	<b>729</b>	<b>3.3%</b>	<b>142</b>	<b>5.8%</b>	<b>871</b>	<b>3.6%</b>
<b>Total Eligible Intakes or "Stateln" w/ QFT Orders who were tested</b>	<b>18,183</b>	<b>83.4%</b>	<b>2,005</b>	<b>81.8%</b>	<b>20,188</b>	<b>83.2%</b>
<b><u>Lab Result Breakdown for Eligibles (% of Eligibles)</u></b>						
Normal/Negative/Non-Reactive	17,421	95.8%	1,926	96.1%	19,347	95.8%
Abnormal/Positive/Reactive	639	3.5%	42	2.1%	681	3.4%
Indeterminate	123	0.7%	37	1.8%	160	0.8%