

Tuberculosis Services in New York City

a quick guide for health care providers



- Reporting Requirements
- Physician Support

NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE



Call the TB Provider Hotline (212) 788-4162

- To report cases and obtain forms
- To access patient information from the TB registry
- To obtain expert medical consultation
- To get more information about TB services
- To refer patients for testing or treatment

Call 311

- For free public education materials, including pamphlets, brochures, and fact sheets
- To find local Chest Centers and to learn about available services and hours of operation

Visit nyc.gov/health/tb

- To get current clinical guidelines on TB screening, diagnosis, and treatment
- For TB-related reporting forms
- To access online TB reporting

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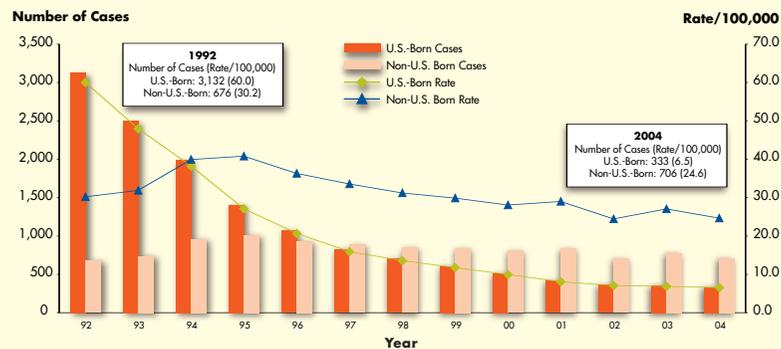
How the Health Department Can Help You Care for TB Patients

The principle strategy for controlling tuberculosis (TB) is to promptly identify individuals with infectious TB, and then quickly provide effective treatment. Through local Chest Centers and other patient-oriented services, the New York City Department of Health and Mental Hygiene works closely with health care providers to deliver coordinated TB evaluation, testing, and treatment.

The Changing Profile of TB in New York City

Since the peak of the most recent tuberculosis epidemic in 1992, the number of TB cases in New York City has declined by more than 72%, from 3,311 in 1992 to 1,039 in 2004. The dramatic decrease in cases is attributable to both improved case finding and patient management practices, especially directly observed therapy. It's also directly related to the ongoing cooperative effort between health care providers and the Health Department.

U.S.¹ and Non-U.S. Born Cases and Case Rates²
New York City, 1992–2004



¹ Puerto Rico and U.S. Virgin Islands are included as U.S.-born.
² Rates are based on official census data and intercensal estimates prior to 2000. Rates since 2000 are based on 2000 census data.

The epidemiologic profile of TB disease in New York City is changing. While overall rates have dropped considerably, New York City has experienced a slight increase in TB among non-U.S.-born persons since 1992, and a large increase in the proportion of non-U.S.-born persons among TB cases, from 17.7% (676) in 1992 to 67.9% (706) in 2004. For additional data about TB in NYC, see the latest TB annual summaries online at www.nyc.gov/health/tb.

The changing profile of TB presents new challenges that demand more cultural sensitivity and better communication between health care providers, their patients, and the Health Department.

This guide is a ready-reference for the Health Department's TB-related services. It's designed to help health care professionals provide coordinated and effective TB testing and treatment for all patients.

We Encourage Referrals to Chest Centers

Our state-of-art Chest Centers offer essential TB services and drugs free of charge. For more information, see page 8 or call the TB Provider Hotline.

TB Reporting Requirements

By law, medical providers, infection control practitioners, and laboratories **must report all suspected or confirmed cases of tuberculosis within 24 hours of diagnosis**. Routine follow-up visits must also be reported.

What to Report

Suspected and Confirmed TB Cases

Clinicians and laboratories must report:

- A smear from any site that is positive for acid-fast bacilli (AFB)
- A nucleic acid-based assay positive for *M. tuberculosis* complex [e.g., *M. tb* Direct Test (MTD) or Amplicor]
- A positive culture for *M. tb* complex
- Biopsy, pathology, or autopsy findings consistent with active TB
- A patient being treated with 2 or more anti-TB medications for suspected or confirmed TB
- Clinical suspicion of TB
- Any child < 5 years of age with a positive tuberculin skin test

In addition, laboratories must report:

- *M. tb* drug-susceptibility test results
- Any culture result associated with AFB-positive smear (even if negative for *M. tb* complex)

See page 6 for more information on laboratory reporting.

TB PROVIDER HOTLINE 212.788.4162

Outpatient Follow-up

Clinicians are also required to report continuation, discontinuation, completion, and other outcomes of patient treatment. In addition, they should report contacts of active TB cases who are receiving treatment for TB infection.

When to Report

Within 24 hours of diagnosis, all suspected and confirmed cases of TB must be reported by express or overnight mail, fax, telephone, or electronically.

Within 48 hours, a hard copy or electronic "Universal Reporting Form" (**Form PD-16**) must follow telephone and fax reports.

How to Report

Clinics, individual health care providers, and laboratories should contact the Health Department **within 24 hours of diagnosis** to report suspected or confirmed TB cases.

The Universal Reporting Form and other TB forms are available online at nyc.gov/health/tb. Click "Information for Health Care Providers." Forms are also available by mail. Call the TB Hotline to request hard copies.

How Clinicians Should Report Suspected and Confirmed TB Cases

Use one of the following methods to report:

TB Provider Hotline

1. Call the hotline to make an initial report within 24 hours of diagnosis.

A representative will take your call Monday–Friday, 8:30 a.m.–5 p.m. At other times, a recorded message will provide reporting information.

2. Mail a hard copy of the completed Universal Reporting Form to the Health Department within 48 hours:

NYC Department of Health and Mental Hygiene
125 Worth St., Room 315/ CN-6
New York, NY 10013
Fax: (212) 788-4179

Fax

1. Fax the completed Universal Reporting Form to (212) 788-4179 within 24 hours of diagnosis.
2. Mail a hard copy of the form to the Health Department within 48 hours (see page 4).

Mail

Mail the completed Universal Reporting Form to the Health Department within 24 hours of diagnosis. To meet the 24-hour deadline, use an overnight courier.

Electronically through NYC MED (health care providers only)

1. Create an account at nyc.gov/health/nycmed.
2. Submit required information online within 24 hours of diagnosis.

For help with NYC MED submissions, call (888) 692-6339

Outpatient Follow-up

To report continuation, discontinuation, completion, and other outcomes of patient treatment, mail or fax the following form to the Health Department (see page 4):

- "Report of Patient Services" (**Form TB-65**): monthly visits of patients with active TB.

How Laboratories Should Report

Laboratories Must Report Electronically Starting July 1, 2006

Until June 30, 2006, laboratories can report positive TB results by fax, mail, or electronically. Starting July 1, electronic reporting will be mandatory. Before using the system, all laboratories must call the Electronic Clinical Laboratory Reporting System at (212) 442-3380 to complete a certification process.

Fax/Mail

Until June 30, 2006, laboratories can use Health Department TB reporting forms or their own microbiological and/or pathology forms. Laboratory forms must include patient, provider, laboratory, specimen, test, and result information; dates of specimen collection; and dates results were read and reported.

TB PROVIDER HOTLINE 212.788.4162

All positive TB laboratory results must be reported within 24 hours, with a hard copy report following within 48 hours.

Fax and/or mail forms to:

NYC Department of Health and Mental Hygiene
125 Worth St., Room 315/ CN-6
New York, NY 10013
Fax: (212) 788-4179

Electronically

Using the Electronic Clinical Laboratory Reporting System, certified laboratories should report all positive TB laboratory results within 24 hours.



**Physician Support
Services for All TB Patients**

The Health Department offers health care providers extensive support for the care and management of TB patients. All reported patients with suspected or confirmed TB are case-managed by the Health Department. The following services are available for all TB patients:

- Comprehensive TB patient evaluation, testing, and treatment
- Case management, from diagnosis to cure
- Contact identification and monitoring, along with TB testing (skin or blood) when necessary
- Rapid entry into directly observed therapy programs
- Patient education
- Management of non-adherent patients
- Referrals to social services, including housing for homeless patients

TB Registry Patient Information

The Health Department maintains a confidential registry of patients with active TB, their treatment histories, and the results of their drug susceptibility tests. Physicians may access information on their patients by calling the TB Hotline.

Expert TB Consultation

Treatment for TB can be as complex as cancer chemotherapy and often requires expert consultation. Consultation is essential in special medical situations, including pregnancy, drug resistant TB, tuberculosis meningitis, HIV infection, and hepatic or renal failure. Providers can call the TB Hotline to obtain consultation or refer patients to our Chest Centers.

Laboratory Services

The Health Department's Mycobacteriology Laboratory provides **free** laboratory services for TB-related specimens submitted by physicians and medical institutions. These services include:

- AFB smears. *Results available within 24 hours of specimen receipt.*
- MTD-Rapid identification of *M. tuberculosis* complex from smear-positive and selected smear-negative specimens. *Results available within 24-48 hours of specimen receipt.*

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- Culture and susceptibility testing of sputum/tissue and referral cultures.
- Identification of mycobacteria by high performance liquid chromatography from clinical specimens and referral cultures when substantial growth is obtained.
- Susceptibility to 11 anti-TB drugs (first- and second-line conventional method) for isolates demonstrating resistance to one or more first-line drugs from broth-based rapid method.

Treating providers are encouraged to refer patients to Chest Centers for sputum collection. The Department of Health’s microbacteriology laboratory provides results directly to the provider.

Directly Observed Therapy

Directly observed therapy (DOT) is a proven way to deliver individualized, consistent TB treatment and care. Patients can quickly be enrolled in a culturally-sensitive program that will help them stay on schedule with their TB medications.

In a directly observed therapy program, a trained health worker observes the patient taking anti-TB medication throughout the course of treatment. *Ideally, all patients with active TB should receive directly observed therapy.* DOT programs take into account individual medical conditions and cultural needs. DOT can be provided anywhere – at Chest Centers, community sites, home, or work.

Physicians who have active TB patients have 2 treatment options:

1. Refer the patient to a Chest Center.

The Health Department will act as the patient’s TB care provider; the referring physician remains the primary care provider and receives TB care updates.

2. Act as the patient’s TB care provider.

Physician manages the patient’s TB care and treatment.

In both cases, all patients can be enrolled in DOT and receive free TB medications (if you are the TB care provider, patients will receive medications through the health department’s Gratis Meds program). To learn more, or to refer a patient, call the TB Provider Hotline.

Rare Circumstances: Managing Non-Adherent Patients

By the authority provided in Section 11.47 of NYC Health Code, commissioner's orders can be issued to a patient with suspected or confirmed active pulmonary TB who is repeatedly non-adherent to TB evaluation or treatment. These orders mandate progressively restrictive measures ranging from examination, to placement on DOT, to (very rarely) long-term detention. Commissioner’s Orders include:

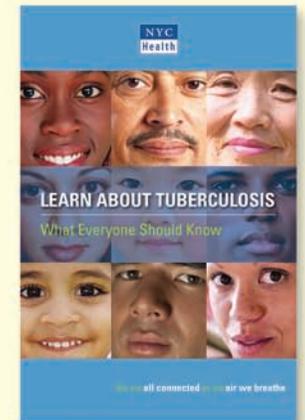
- D-1: Order for Examination
- D-2: Order to Begin or Complete Treatment
- D-3: Order for Directly Observed Therapy
- D-4: Order for Isolation While Infectious
- D-5: Order for Long-Term Detention Until Treatment Completion

For more information call the TB hotline or visit nyc.gov/html/doh/downloads/pdf/tb/tb-law.pdf.

Patient Education

The Health Department offers free TB education and outreach for all New Yorkers. Call 311 to request patient education materials for your office.

- Comprehensive TB patient brochure — *Learn About Tuberculosis: What Everyone Should Know* — available in English, Spanish, Chinese, and other languages
- Educational sessions (TB101) at worksites and community groups (scheduled upon request)
- Videos about TB and HIV, latent TB infection, and other related topics



TB PROVIDER HOTLINE 212.788.4162

Chest Centers

Chest Centers are ideal treatment facilities. Patients receive excellent TB care, free of charge. Referring physicians remain involved in their patients' care, and also enjoy peace of mind — potentially infectious TB patients are treated in facilities designed to limit exposure to others.

Our state-of-the-art Chest Centers feature courteous, well-trained medical professionals who specialize in TB care. The Centers deliver comprehensive TB services using advanced environmental controls: high efficiency ventilation, high rates of air exchange, negative pressure rooms, and strategically placed ultraviolet light fixtures.

We encourage providers to refer patients to a local Chest Center (see page 11) for the following services:

- Tuberculin skin testing
- HIV counseling and testing
- Patient education
- Medical evaluation and consultation
- Radiographic studies
- Sputum induction
- Treatment of active and latent TB
- Directly observed therapy (DOT)
- Outpatient medical and nursing services, including occasional home nursing visits
- Interpretation services in more than 170 languages
- Referral to social services, including housing for homeless patients

Chest Center Locations

Call 311 for more information, including hours of operation.

Bronx

Morrisania Chest Center
1309 Fulton Avenue, First Floor
Bronx, NY 10456

Brooklyn

Bedford Chest Center
485 Throop Avenue, Third Floor
Brooklyn, NY 11221

Brownsville Chest Center
259 Bristol Street, Third Floor
Brooklyn, NY 11212

Bushwick Chest Center
335 Central Avenue, Second Floor
Brooklyn, NY 11221

Fort Greene Chest Center
295 Flatbush Ave. Ext., Fourth Floor
Brooklyn, NY 11201

Manhattan

Chelsea Chest Center
303 9th Avenue, Third Floor
New York, NY 10001

Washington Heights
Chest Center
600 West 168th Street, Third Floor
New York, NY 10032

Queens

Corona Chest Center
34-33 Junction Blvd., Second Floor
Jackson Heights, NY 11372

Jamaica Chest Center
90-37 Parsons Blvd, Fourth Floor
Jamaica, NY 11432

Staten Island

Richmond Chest Center
51 Stuyvesant Place, Fourth Floor
Staten Island, NY 10301



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Provider Resources

The Health Department offers TB education opportunities and materials for physicians, nurses, and other health care providers. For up-to-date information, call the TB Hotline, or visit www.nyc.gov/health/tb and click "Information for Health Care Providers."

Educational Materials

The Health Department publishes clinical guidelines and educational materials for TB screening, diagnosis, and treatment. Annual summaries that include TB statistics for New York City are also available. For up-to-date information, visit www.nyc.gov/health/tb.

Training Opportunities

TB conferences, seminars, and workshops are provided throughout the year — CME/CE credits are usually available.

TB-Related Web Sites

- American Thoracic Society
www.thoracic.org
- Centers for Disease Control and Prevention
www.cdc.gov/nchstp/tb/faqs/qa.htm
- Regional Training and Medical Consultation Centers
www.cdc.gov/nchstp/tb/rtmcc.htm
- Charles P. Felton National TB Center
www.harlemtbcenter.org/tb101/tb101_index.htm
- Francis J. Curry National TB Center
www.nationaltbcenter.edu
- Infectious Disease Society of America
www.idsociety.org
- International Union Against Tuberculosis and Lung Disease
www.iuatld.org
- New Jersey Medical School National TB Center
www.umdnj.edu/ntbcweb/tb_frame.html
- TB Education & Training Resources Website
www.findtbresources.org
- Stop TB partnership
www.stoptb.org



Moving Towards a Tuberculosis-Free New York City



nyc.gov/health

NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE

Michael R. Bloomberg, Mayor

Thomas R. Frieden, MD, MPH, Commissioner