



State of Connecticut

Department of Public Health

TUBERCULOSIS CONTROL PROGRAM

TO: Directors of Health
Public Health Nurses
Visiting Nurses

FROM: State of Connecticut
Tuberculosis Control Program

SUBJECT: Tuberculosis (TB) Case Contact Investigation Request Per Attached Form (TB-5)

The TB Control Program at the Connecticut Department of Public Health recommends that a contact investigation be done for all confirmed or suspected* TB cases. The case investigation includes educating the index case about his or her disease, identifying and screening contacts by risk, and ensuring appropriate TB related follow-up care.

Identification of contacts to active TB cases is one of the most important methods for finding persons with disease or infection. Contacts to newly diagnosed cases are at high risk for developing TB disease. The risk of acquiring infection is related to various factors: infectiousness of the index case, health status of the contact, and specifics of the shared environment. The contact investigation is not completed until the results of susceptibility testing are reported, as this information can affect treatment for the case and contacts.

When the index case's history, bacteriology, and/or chest radiographs are suggestive of TB, the contact investigation should commence. **Do not wait for final culture results to start the investigation.**

Special Considerations:

Drug Resistant TB

Please be advised that any strain of *Mycobacterium tuberculosis* that is resistant to Isoniazid and/or Rifampin will require that contacts, who have a positive tuberculin skin test (TST) or interferon gamma release assay (IGRA) be offered the appropriate therapy for latent TB infection (LTBI) given the particular resistance profile. A physician familiar with treatment for multi-drug resistant TB (MDR-TB) should coordinate the treatment for LTBI in conjunction with the TB Control Program.

TB and HIV coinfection

HIV counseling and testing is recommended for all TB patients as part of their routine management. HIV testing should also be done for contacts identified with LTBI. Given the complexity of concurrent administration of TB and antiretroviral therapy, immediate consultation with a physician who is an expert in the treatment of TB and HIV coinfection is recommended.

Thank you for your cooperation. Further questions should be directed to the TB Control Program at (860) 509-7722.

*A TB suspect is any person who has laboratory or clinical findings suggestive of TB (e.g., positive AFB smear) or any person who has been prescribed two or more anti-tuberculosis drugs.

Revised 2/25/09 Active Case

**410 Capitol Avenue, MS#11TUB
P.O. Box 340308
Hartford, CT 06134-0308
Phone: (860) 509-7722 FAX: (860) 509-7743**