CONTACT INVESTIGATIONS UPDATES

Virginia Department of Health Division of Tuberculosis (TB) Control ~ TB Contact Investigation Summary Form (TB 502)

Index Case ID #_____ District _____ Nurse Case Manager Name _____ Nurse Case Manager Phone # _____

Date Case/Suspect Reported to Local Health Department _____ Date Contact Investigation Initiated _____

Type of Investigation: ____ Contact ___ Source Case Type of Case/Suspect: ____Pulmonary Smear Pos. ____ Pulmonary Culture Pos. ____Pulmonary Smear Neg. ____ Extrapulmonary ____ Clinical ____ GeneXpert Pos.

Infectious Period	
Start Date:	End Date:
_____	_____

Contact Last Name: _____ **Contact First Name:** _____

DOB: _____ **Race/Ethnicity:** ___Asian ___Black ___White ___ Other ___Hispanic ___ Not Hispanic

Sex: _____

Address: _____

Contact Relationship to Case:
_____Household _____School _____Workplace _____Place of Worship _____Hospital
_____Medical Office _____Social Setting _____Correctional Facility _____Long Term Care Facility
_____Shelter _____Other (if other please specify): _____

Date of last exposure to the case: _____

Priority
___High
___Medium
___Low

Symptoms
___ Yes
___ No

If yes, list:
_____
_____
_____

Hx of **Prior** (+) TST or TB disease
____ LTBI _____TB Disease

Hx of **Prior** treatment for LTBI
___ Completed treatment
___ Partially treated
___ Never treated
___Unknown

LTBI Test Used:
____ TST ___ IGRA

Round 1:
Date tested: _____
Result:
_____ mm if TST
_____ Pos. _____ Neg.
___ Indeterminate/Borderline

Round 2:
Date tested: _____
Result:
_____ mm if TST
_____ Pos. _____Neg.
___ Indeterminate/Borderline

CXR Date:
_____

CXR **Result:**
____ Normal
____Abnormal
____ Cavitary
____Non. Cavitary

TB Case? _____ Yes _____ No

LTBI Tx Recommended? _____ Yes _____ No

If yes: **Tx Type:** _____ Comments:

Date Tx Started: _____

Date Tx Stopped: _____

Treatment Stop Reason:
___Completed Therapy ___ Death ___Moved (follow-up unknown)
___Active TB developed ___Adverse effects of medication
___Chose to stop ___Lost to follow-up ___Provider decision

Contact Last Name: _____ **Contact First Name:** _____

DOB: _____ **Race/Ethnicity:** ___Asian ___Black ___White ___ Other ___Hispanic ___ Not Hispanic

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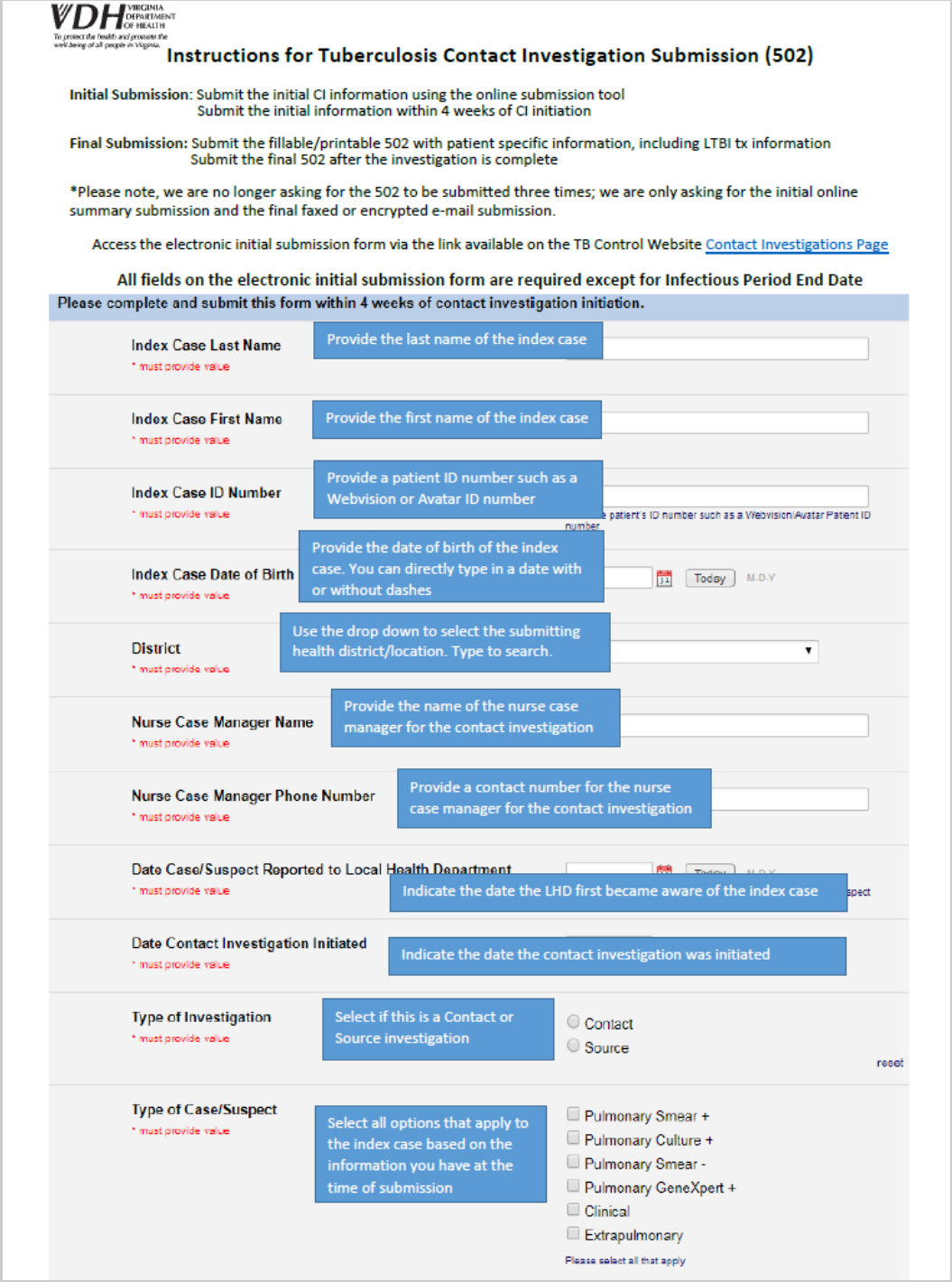
502 Initial Submission:

- Submit the initial CI information using the online submission tool
- Submit the initial information within 4 weeks of CI initiation

502 Final Submission:

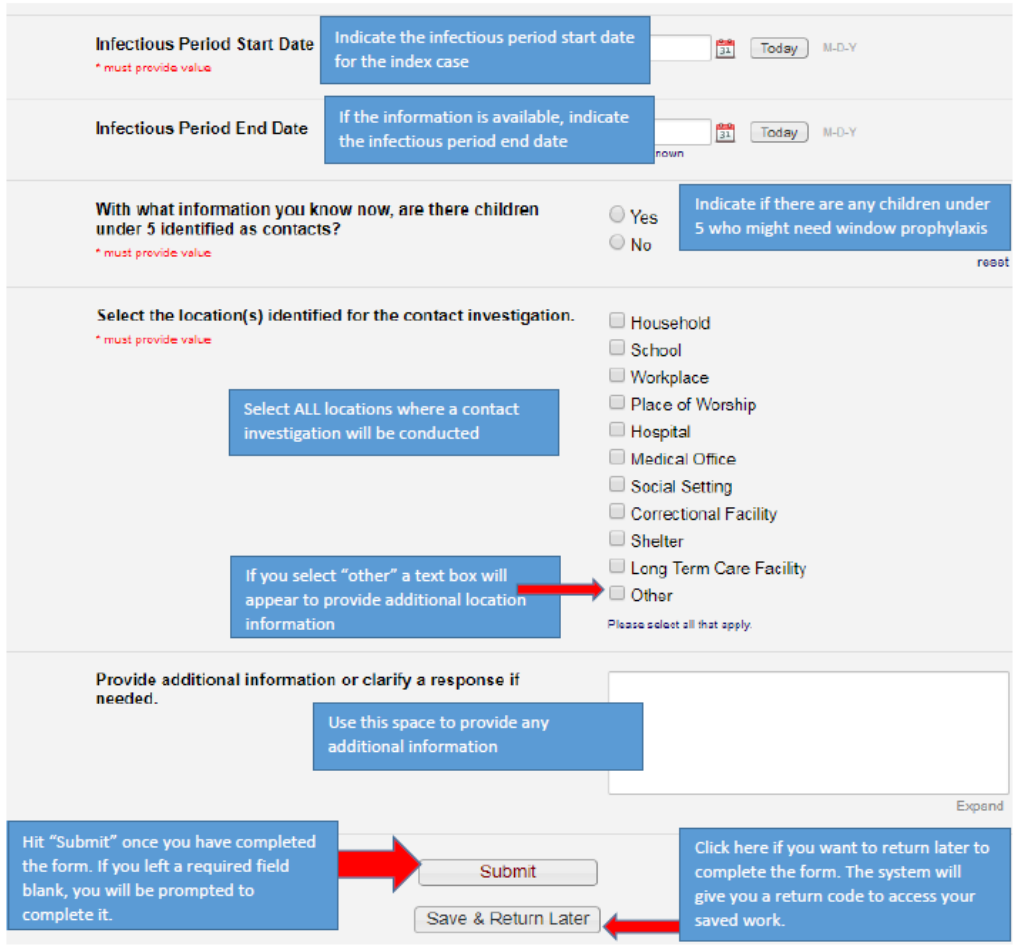
- Submit the fillable/printable 502 with patient specific information, including LTBI tx information
- Submit the final 502 after the investigation is complete

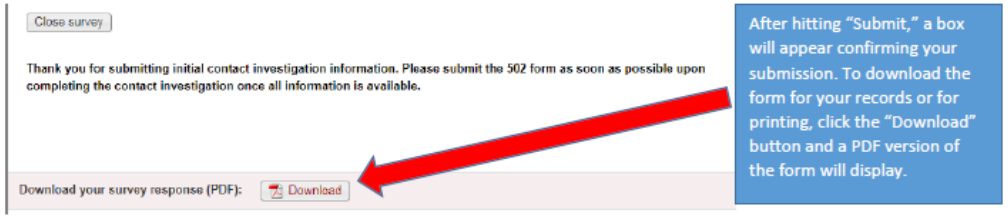
We are no longer asking for the 502 to be submitted three times; we are only asking for the initial online summary submission and the final faxed or encrypted e-mail submission



VDH VIRGINIA DEPARTMENT OF HEALTH
To protect the health and promote the well-being of all people in Virginia

Instructions for Tuberculosis Contact Investigation Initial Submission (502)





PLEASE SUBMIT YOUR FINAL 502 WITH PATIENT SPECIFIC INFORMATION AS SOON AS POSSIBLE UPON COMPLETION OF THE CONTACT INVESTIGATION

Recommendations for Assigning Priority to Contacts based on Cumulative Environmental Exposure during the Infectious Period				
Space size	**Exposure Site**	**High Priority**	**Medium Priority**	**Low Priority**
Very small	Car, small office, 150 sq. ft. 12 x 12=144 sq. ft.	8 or more hours	4 to less than 8 hours	Less than 4 hours
Small/medium	Classroom, meeting room 25 x 25=600 sq. ft.	24 or more hours	8 to less than 24 hours	Less than 8 hours
Medium/large	Cafeteria, small church 36 x 36=1296 sq. ft.	50 or more hours	24 to less than 50 hours	Less than 24 hours
Large	Gymnasium, auditorium 50 x 50-2400 sq. ft.	100 or more hours	50 to less than 100 hours	Less than 50 hours
Fewer hours exposed → lower potential for transmission → lower priority for evaluation				

DTBNH0318

Factors Determining Transmission

- Infectiousness of Case
- Duration of Exposure
- Environmental Conditions
- Susceptibility of Contact

Infectiousness of Case

- Smear Results (Fluorochrome stain)
- Negative No AFB Seen
- +/- 1–2 AFB/30 Fields
- 1+ 1-9 AFB/10 Fields
- 2+ 1-9 AFB/Field
- 3+ 10-90 AFB/Field
- 4+ >90 AFB/Field

Environmental conditions

- Size of Environment
- Amount of ventilation
- Location of vents
- Directional flow around index

Duration of Exposure

- Exposure Limits -High Priority
- 8 hrs very small space
- 24 hrs small-medium space
- 50 hrs medium-large space
- 100 hrs large space

Susceptibility of Contact

- Current Immune Status
  - Immune Supressive Medication
  - HIV Status
  - Other medical co-morbidities
- Substance Abuse
- Malnutrition
- Age

Kandor Nursing Home and Dialysis Center

The index is 88 y/o Lana. She has resided at the Kandor NS for approximately 3 years. She has a single suite with no roommate. She is ambulatory, and readily participates in daily activities.

Sputum Smear **1+**

Chest X-Ray **Cavitary**

No symptoms noted by staff

What else do we need to know?

LEXCORP & STAR LABS

Today's date is Sept 27th

The case is 28 y/o male scientist Ray

Sputum Smear **4+**

Chest x-ray: Bilateral Cavitary

Symptoms began **May 15th**

Index worked at Lexcorp for three years, leaving on **July 1st**. Began employment at Star Labs on **July 8th.**

No household or social contacts identified

At LexCorp Ray worked in cubicle # 2233 on the 2nd floor. There are 10 floors with 900 cubicles on each, and 100 offices with doors. Cubicle #2233 is located on the East side of the building, 4th row from the wall, 1/3rd distance from the front of the room.

At Star Labs, Ray managed a team of 100 employees. He did have an office with a door, and met daily with his 10 team leaders for approximately **1 hour**.

METROPOLIS MIDDLE SCHOOL

Today's date is **Oct. 17th**

Last day at school **Oct. 16th**

The school year began on Tuesday **Sept. 3rd**

Index is a 14-year-old US born male. His summer was spent with extended family outside of the United States.

Sputum smear **2+**

CXR RUL patchy infiltrate, Hilar lymph

HOUSEHOLD Contacts:

Father George 40 y/o TST negative

Mother Martha 39 y/o TST negative

Cousin Kara 16 y/o TST negative

Brother 12 y/o TST positive

Brother 4 y/o TST positive

SCHOOL Contacts:

Best Friends: Bruce 14 Y/o TST Positive, Jimmy 14 y/o TST Positive

Girlfriend: Lois 14 y/o TST negative

CHEMISTRY CLASS: 45' X 42' MWF 1 hour each **30 students**

HISTORY CLASS: 25' X 30' TTH 1.5 hours each **25 students**

ENGLISH CLASS: 33' X 28' MWF 1hour each **28 students**

TRIGONOMITY CLASS: 20' X 24' MWF 1hour each **19 students**

SOCIAL MEDIA CLASS: 35' X 20' TTH 1.5 hours each **35 students**

GYM: locker room, gymnasium, outdoors M-F 1 hour each **28 students**