

Tuberculosis and Correctional Facilities in Oregon Employee and Inmate Screening

Centers for Disease Control and Prevention. Prevention and Control of Tuberculosis in Correctional and Detention Facilities: Recommendations from the CDC. *MMWR* 2006;55 (No. RR-9).

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5509a1.htm>

Summary of Key Points

Annually determine if facility is Minimal TB Risk or Nonminimal TB Risk

Minimal TB Risk Facility

- No cases or infectious TB have occurred in the last year
- The facility does not have substantial number of inmates with risk factors
- The facility does not house substantial numbers of immigrants from high risk areas

Inmate Screening for Minimal TB Risk facilities

- Inmates must have screening for TB symptoms and risk factors upon intake. Using a standardized questionnaire is recommended.
- Inmates at increased risk for disease (HIV/AIDS, immunocompromised, recent immigrants, IVDU, recent immigrants, etc.) must have TB skin test (TST), Quantiferon (QFT-G) or chest xray within 7 days.
- In addition to TST or QFT, inmates with HIV/AIDS or severe immunosuppression should have a CXR as part of initial screening.

Employee Screening

- Two step on hire
- Consider annual

Nonminimal TB Risk Facility

Any facility that doesn't meet Minimal TB Risk criteria is Nonminimal

Inmate Screening for Nonminimal TB Risk facilities

- Inmates must have screening for TB symptoms and risk factors upon intake
- Inmates with no symptoms must have must have TB skin test (TST), Quantiferon (QFT-G) or chest xray within 7 days.
- In addition to TST or QFT, inmates with HIV/AIDS or severe immunosuppression should have a CXR as part of initial screening.
- Long term inmates should be screened annually

Employee Screening

- Two step on hire
- Annual testing