

	Manual: TB Manual	
	Number: New	
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Reviewed By: Paige Batson, DC&P Manager; Diane Corey, SPHN	Effective Date: 8/19/09	
Authorized By: Peter Hasler, M.D., Interim Health Officer	Last Revision Date:	
Annual Review By: DC&P Manager; SPHN	Date Reviewed:	
TITLE: Cough Alert Referral (CAR)		

POLICY

It is the policy of the Santa Barbara County Public Health Department to provide, through the Enhanced Homeless TB Control Program, a coordinated and collaborative effort with local homeless shelters to prevent and control the spread of tuberculosis (TB).

PURPOSE

To protect the health of shelter/recovery clients, staff, and the community from tuberculosis by reducing and eliminating TB transmission.

PROCEDURE

- I. Upon receipt of [Cough Alert Referral \(CAR\) Form](#) from homeless shelter, DC Office staff will email CAR form to Enhanced Homeless TB Control Program staff.
- II. Patient Intake/Assessment
 1. HSA/MA will contact person referred per CAR within 1-working day and proceed with the following:
 - a. Conduct an initial assessment that will include symptom review, QFT draw and referral for chest x-ray.
 - b. Provide SPHN results of diagnostic testing who will review and determine clearance status.
 - c. Per SPHN approval, grant shelter clearance to client within 2-working days of receiving screening/diagnostic data via PHN Shelter Clearance TB Database.
 - d. If SPHN determines client is suspect for active TB, CMR will be completed and submitted to DC Office and processed per established TB referral assignment protocol.
 - e. Track all referrals received via the Cough Alert process on the [Cough Alert Referral Log](#).
 2. HSA/MA will apprise SPHN and notify referring shelter administration of residents who are non-adherent to screening/testing to rule out active TB.
 3. HSA/MA will apprise SPHN and alert other shelters if client is not located in 7 days to secure a TB clearance.
 4. Standardized TB Control policies and procedures will be followed for evaluating persons determined to meet TB suspect criteria.

5. Per SPHN approval, residents determined to have non-infectious status and shelter clearance will be referred to primary care for further evaluation of symptoms. Client will be instructed to seek medical care sooner as needed.

DEFINITIONS

TB Suspect (TB5/ClassV): A person with signs or symptoms of TB that are sufficient for the physician to suspect that the individual has TB prior to the completion of diagnostic studies such as:

- A person with or without a positive Mantoux tuberculin skin test or QFT who meets any of the following criteria:
 - has a specimen that is positive for acid-fast bacilli (AFB) on smear
or
 - has a radiologic finding consistent with active TB *or*
 - has clinical symptoms or findings consistent with active TB.