

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Ron DeSantis
Governor

Scott A. Rivkees, MD
State Surgeon General

Vision: To be the Healthiest State in the Nation

August 15, 2019

Re: Recommendations for Testing for TB Infection in Florida During the Current National Shortage of Purified Protein Derivative Products

As you may be aware, there is an ongoing shortage of Aplisol® (PPD). Also, the other purified protein derivative product (Tubersol®) is on backorder. It is unclear when either shortage will resolve. Pending resolution of this shortage, the Florida Tuberculosis (TB) program recommends the following measures:

- Use interferon gamma release assays (IGRAs), including T-Spot.TB® or QuantiFERON Gold Plus® for testing the following persons:
 - Contacts to a person with pulmonary or laryngeal TB, **without a history of a negative Mantoux tuberculin skin test (TST) result**. If post-exposure testing is required in a person with a previous negative TST result and purified protein derivative is unavailable, timely testing with an IGRA is preferable to any delay in testing.
 - Recently arrived persons from countries with medium or high TB incidence (i.e. countries in Latin America, Asia, Eastern Europe, or Africa), **due to the potential cross-reaction with prior BCG vaccination**.
 - Persons suspected of having active TB.
 - In general, IGRA testing is preferred to TST for persons 2 years old and older.

Note: The above are the general recommendations for the use of IGRA tests, with or without a shortage of purified protein derivative.

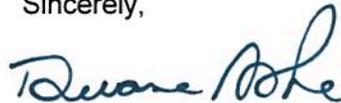
Until the shortage is resolved, limited supplies of purified protein derivative should be prioritized to test persons under two years of age and contacts with a history of a negative TST result.

- Defer routine annual tuberculin skin testing performed as part of an infection control program (i.e. employee screening). We do not recommend substituting an IGRA for annual testing if the employee has previously received a TST. Deferring testing until tuberculin is available is the preferred strategy in this case. Note that recent Centers for Disease Control and Prevention (CDC) guidance does not recommend annual tuberculin testing of health care workers in most settings, unless there is a known exposure or high-incidence of TB diagnosed in the facility leading to a high-risk of ongoing transmission.
- Per recent CDC guidance, defer required baseline tuberculin skin testing or use an IGRA in groups for whom this testing is required, until PPD is reliably available. In Florida, this would include:
 - Staff of licensed nursing care homes, upon employment.
 - New residents to licensed nursing homes, adult care homes, or other congregate living facilities, upon admission.
 - Staff in adult day care centers providing care to persons with HIV/AIDS, upon employment.

Note: In the absence of baseline testing for latent TB infection (LTBI), assessment for current TB-like symptoms becomes very significant to avoid employment or residence of persons with active, potentially infectious, TB disease. All employees and potential residents with TB-like symptoms, should be evaluated to rule-out active disease prior to beginning work or being granted residency.

- Agencies should have a plan to track persons for whom baseline or annual testing is deferred and to test such persons when tuberculin is reliably available.
- Per current CDC and FL TB Control guidelines, do not perform administrative testing for LTBI in low-risk persons (i.e. child care employees, teachers, food service employees), in the absence of TB-like symptoms.
- These recommendations do not waive compliance with Agency for Health Care Administration (AHCA) facility licensure/regulatory requirements for TB testing. AHCA Bureau of Health Facility Regulation: BHFR@ahca.myflorida.com 850/412-4402
- Further questions? Call 1-800-4TB-INFO

Sincerely,



Duane Ashe
TB Control Administrator
Bureau of Communicable Diseases



David Ashkin MD FCCP
Medical Director,
TB Control Section
Bureau of Communicable Diseases