Date: October 1, 2020  Administrative Circular: 2020:22

Attn: Medical Health Officers and Branch Offices
     Public Health Nursing Administrators and Assistant Administrators
     Holders of Communicable Disease Control Manuals

Re: Revisions to the Communicable Disease Control Manual –
    Chapter 4: Tuberculosis (TB) & TB Screening DST

Please note that updates have been made to the following sections of the
Communicable Disease Control (CDC) Manual - Chapter 4 Tuberculosis:

- Section 2: Definitions – Discard and replace page 2
- Section 3: Tuberculosis – Discard and replace pages 7-9
- Section 4(a): TB Screening and Testing – Discard and replace pages 8 and 14
- Section 4(b): TB DST – Discard and replace pages 1, 3-5, 8, 10, 14, 24 and 26
- Section 5: Treatment of Active TB Disease – Discard and replace page 22
- Section 6: Treatment of Latent TB Infection – Discard and replace page 14
- Appendix A – Discard and replace pages 2-3 and 8-9
- Appendix B – Discard and replace page 7

Overview of Changes – Chapter 4: Tuberculosis (TB) Manual:

The manual has been updated to ensure recommendations reflect current practice and are
provided in a clear, consistent and concise manner.

The following high-level changes were made within each respective section:

Section 2: Definitions
- Included new definition: homelessness/underhoused.

Section 3: Tuberculosis
- Updated TB case definition based on PHAC case definition revisions (effective Jan 1,
  2020) which include a broader definition for laboratory confirmed cases of TB with the
  inclusion of nucleic acid amplification testing (NAAT). Additionally, the new PHAC
  definition does not specify Mycobacterium tuberculosis complex sub-species leaving
  this detail to the discretion of the provinces and territories.
Section 4a: TB Screening & Testing
- Updated links to definitions; included content on CXR indications and updated Section 4.6 TB Medical Surveillance Program process for initiating the 1st surveillance visit

Section 4b: TB Screening DST
- Updated professional body name to BC College of Nurses and Midwives (BCCNM)
- Updated hyperlinks to definitions; ensured non-stigmatizing language used when investigating a person for TB; improved clarity of screening for HCW’s and travellers.
- Included live donor clients for those requiring TB screening
- Included clarification that the timing of live oral rotavirus vaccine and quadrivalent live attenuated influenza vaccine (LAIV-Q) does not impact the timing of a TST.

Section 5:
- Updated content in Section 5.12 to reflect that in BC, HCP’s should report adverse reactions to medications via the BCPSLS and links to appropriate information on Vanessa’s Law.

Section 6: Treatment of Latent TB Infection
- Updated content in Section 6.10 to reflect that in BC, HCP’s should report adverse reactions to medications via the BCPSLS and links to appropriate information on Vanessa’s Law.

Appendices:
A – Tuberculin Skin Testing Procedures
- Updated content to clarify only live, injectable viral vaccines impact timing of a TST.
- Updated content to reflect that in BC, HCP’s should report adverse reactions to health products via the BCPSLS and links to appropriate information on Vanessa’s Law.

B – Infection Prevention and Control
- Updated typo in Table B-1: Recommendations on discontinuation of airborne precautions/home isolation
If you have questions regarding these changes, please contact Maria MacDougall, Nurse Educator, Clinical Prevention Services or Shaila Jiwa, Senior Practice Leader, Clinical Prevention Services via their contact information below:

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Sincerely,

Dr. Mark Gilbert, MD, FRCPC
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BC Centre for Disease Control

Pc: Dr. Bonnie Henry
    Provincial Health Officer
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Dr. Réka Gustafson, Vice President, Public Health
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