

School Exposure: Best Practices and Management



Our Mission: To protect and improve the health and environment of all Kansans.

Large High School Investigation

- 18 year old male adopted from endemic country at age 11
- 4+ smear positive x 3 (March 2015)
- Symptomatic x 4 months (December 2014)
- Suburban school of over 2,000 students

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Large High School Investigation

•Actions taken

- Met with principle and leadership staff
- Developed a unified plan for the investigation
- Prepared media releases and responses
- Scheduled a mass testing clinic at the school to include all students and staff who were in classrooms with the index case

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- **Actions taken**

- Presented an educational session with Q/A for all students who were to be tested the same day email notifications were sent to parents
- Presented and educational session for parents and media prior to the day of testing

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- **Resources Required For Screenings**
 - 40 to 60 staff required to facilitate each of the three school screening clinics
 - 2 local health departments – staff from multiple departments
 - State TB, HIV/STD, Epidemiology and lab
 - School personnel
 - County fire/EMT
 - Qiagen staff on site

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Large High School Investigation

- **Resources Required To Manage Investigation**
 - 2 fulltime TB Nurse Case Managers to follow up contacts for treatment
 - Local epidemiologist devoted majority of time to this investigation
 - Local and state communications staff to handle multiple media events and interviews
 - Local PHEP program developed and managed logistics and planning

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Cost of Investigation and Follow Up

from all sources

Approximately \$75,000.00

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■ Contact Investigation Summary

- 457 contacts named/identified
- 98% fully evaluated
- 11% transmission/infection rate (50)
- 100% of people diagnosed with TB infection started treatment, most with 3HP or 4R
- VDOT successfully used to improve outcomes of completed treatment
- 98% completed TB infection treatment

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Large High School Investigation

■ Reasons for Successes

- Planned, Educated then Implemented
- Excellent collaborative partnerships
- Full commitment from local and state health departments assume responsibility for outcomes – no excuses accepted
- Person with TB willing to be a part of the solutions
- Maximized use of newer technologies, diagnostics and treatments

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It Took A Village - Acknowledgements

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