TTUHSC Health Surveillance Program

Employees

I. Tuberculosis Surveillance

Tuberculosis surveillance for Covered Individuals is based on current U. S. Department of Health and Human Services, Centers for Disease Control and Prevention (CDC) Recommendations and Reports (December 30, 2005, 54 (#RR-17):1-147), Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings.

(a) New Employee Orientation

(1) Any employee of TTUHSC with direct patient care should have documentation of a TB skin test (TST) or a TB blood test having been performed within the last year, regardless of a history of BCG vaccine.

(2) Any employee with direct patient care who has never received a TB skin test (TST) should undergo (2-step) testing.

(3) Any employee with direct patient care with documentation of a positive TB skin test (TST) shall provide a report from a physician indicating that a chest x-ray taken within the last year was negative for TB, should have chest x-ray or a TB blood test performed and before starting any patient related activities. An annual TB questionnaire must also be completed.

(b) Annual Requirements

(1) All employees with direct patient care should have an updated TB skin test (TST) annually, coordinated through the Health Surveillance Unit at each campus.

(2) Any employee that converts to a positive TB skin test (TST) or has a positive Tb blood test at the time of annual evaluation will be required to obtain a chest x-ray and complete a TB screening questionnaire with follow up.

   a) Results of a new positive TB skin test or a positive blood test must be reported to the Texas Department of State Health Services. Any follow-up or treatment will be coordinated and documented by the local health departments or treating physician.

(c) Cost Responsibilities

(1) Costs for baseline and annual TB skin tests will be borne by the clinical department in which the employee is assigned.

(2) Costs for Chest x-rays or TB blood testing will be paid for by the clinical department in which the employee is assigned.

(3) Cost for baseline and annual TB skin tests (or screening x-rays) for Residents/Fellows will be paid for through GME.

(d) Record Maintenance

Baseline and annual records shall be received, validated, and maintained by the Health Surveillance Unit at each campus as noted in Attachment F.
II. Immunizations

Immunization recommendations are based on regulations, guidelines and recommendations available as of November, 2013 from the Texas Administrative Code (TAC), Texas Department of State Health Services (DSHS), the U.S. Centers for Disease Control and Prevention (CDC), and the U.S. Advisory Committee for Immunization Practices (ACIP). See Attachment E - Healthcare Personnel Vaccination Recommendations (2015).

(a) New Employee Orientation

All employees with direct patient care should have received all required immunizations and/or titers or have signed declinations with documentation submitted prior to starting patient related activities as coordinated through the Health Surveillance Unit.

(b) Annual Requirements

(1) Annual Flu vaccine will be offered to all TTUHSC employees with direct patient care. If an employee with direct patient care declines to receive the FLU vaccine or has received it from another provider, a signed declination should be on file for that employee.

(2) New immunizations, as recommended, by the CDC will be offered to employees with direct patient care.

(c) Cost Responsibilities

(1) All costs of immunizations and/or titers will be borne by the clinical department in which the employees are assigned.

(2) Cost of Flu vaccine will be paid through the Office of Institutional Health for all employees with direct patient care.

(d) Record Maintenance

Records shall be received, validated, and maintained by the Health Surveillance Unit at each campus as noted in Attachment F.

III. Exposure Management

Institutional management of exposure to: (1) blood-borne pathogens, (2) body fluids and, (3) other miscellaneous exposures is based on regulations, guidelines and recommendations from the Texas Administrative Code (TAC), Texas Department of State Health Services (DSHS), the U.S. Centers for Disease Control and Prevention (CDC).

(a) Pre-Exposure Requirements

(1) All employees should have either received their Hepatitis B series, have a documented BSAB that is positive, have a signed declination on file, or be in the process of completing the Hepatitis B series prior to any patient related activities.

(2) All employees should have documentation of having received a one-time adult dose of Tdap and a current TD.

(b) Post-Exposure Requirements

(1) Reporting

Employees who have a known or suspected exposure to an infectious disease during the performance of a clinical responsibility shall report that incident promptly to their immediate
supervisor, fill out an exposure packet, and seek immediate care from the Health Surveillance Unit on each campus.

(2) **Exposure Investigation and Management:**

Exposure investigation and appropriate management (if indicated) including, medication administration, vaccination, blood work, and counseling shall be provided to employees based on standing physician orders and recommendations from the designated Health Surveillance Unit.

(c) **Cost Responsibility**

(1) Costs for exposure investigation and management will be borne by the clinical department in which the employees are assigned.

(2) Cost for exposure investigation and management for Residents/Fellows will be borne by Graduate Medical Education (GME) or their assigned clinical departments.

(d) **Record Maintenance**

All records concerning employee exposure will be maintained in the Health Surveillance Units on each campus as noted in Attachment F.