EXPOSURE TO TUBERCULOSIS

• **What is tuberculosis and how is it spread?**
  Tuberculosis is an infectious disease that usually attacks the lungs but can attack any part of the body. It is caused by *Mycobacterium tuberculosis*. Transmission of tuberculosis is by inhalation of droplet nuclei produced when a person with infectious pulmonary or laryngeal tuberculosis coughs, laughs, sneezes, sings, or talks. If another person breathes in these droplet nuclei, there is a chance that he/she may become infected with tuberculosis.

• **What is considered to be an exposure to tuberculosis?**
  A person is considered to be exposed if there is shared breathing space with someone with infectious pulmonary or laryngeal tuberculosis at a time when the infectious person is not wearing a mask and the other person is **not wearing an N95 respirator**. Usually a person has to be in close contact with someone with infectious tuberculosis for a long period of time to become infected; however, some people do become infected after short periods, especially if the contact is in a closed or poorly ventilated space.

• **What should I do if I am exposed?**
  If you are exposed to someone with infectious tuberculosis and have never had a positive reaction to the tuberculin (TB) skin test, you should have a baseline test within 3 months prior to the exposure date. If you have not had a test result documented within the past 3 months you should have one placed as soon as possible after the exposure, preferably within two weeks. This skin test should be read in 48-72 hours. If it is negative, you should repeat this process three months after the exposure.

  If you are exposed to someone with infectious tuberculosis and have had a positive reaction to the TB skin test in the past, you should not repeat it since it should still remain positive. Also, you do not need a chest X-ray if you are exposed. You only need to repeat the chest X-ray if you develop signs and symptoms of active tuberculosis (cough lasting for more than three weeks, bloody sputum, fever, night sweats, weight loss, loss of appetite, fatigue).

• **What is the incubation period of tuberculosis?**
  From infection to development of a positive TB skin test reaction (the incubation period) is approximately 2 to 12 weeks. The risk for developing active disease is the highest in the first two years after infection and development of a positive TB skin test reaction.

• **What if my tuberculin skin test is positive after I have been exposed?**
  After an exposure to infectious tuberculosis, a TB skin test reaction of 5 mm induration or greater is considered positive. You will then be evaluated for signs and symptoms of active tuberculosis (cough lasting for more than three weeks, bloody sputum, fever, night sweats, weight loss, loss of appetite, fatigue). If none of these are present, you will have a chest X-ray taken. If there is no indication that you have active infectious tuberculosis, you will be considered to have latent tuberculosis and evaluated to determine if taking prophylactic isoniazid (INH) is appropriate for you. If you have latent tuberculosis, you are not contagious and cannot pass the tuberculosis germ to other people.

  If signs or symptoms of active tuberculosis are present or if your chest X-ray is abnormal, you will be referred to a pulmonologist or infectious disease specialist for further evaluation.
• **What if my exposure occurs at work?**

In the event of an exposure within the Medical Center, Infection Control will notify the VOHC (Vanderbilt Occupational Health Clinic, Room 640 Medical Arts Building, phone 936-0955) of the faculty/staff members who have been exposed. The VOHC will determine the date of each exposed faculty/staff member’s last TB skin test. If the faculty/staff member has had a negative skin test within the past three months, he/she will be notified of the exposure and of the need to have a TB skin test in three months. If the faculty/staff member is TB skin test negative but has not had one within the past three months, he/she will be notified of the exposure and of the need to have a baseline skin test as soon as possible and to repeat it in three months if negative. If the faculty/staff member has had a positive TB skin test in the past, no action is necessary.

In the event that you develop a positive TB skin test (and latent TB infection) following an exposure at work, your manager will need to complete a Tennessee First Report of Work Injury and forward this to the Office of Risk Management (Room 610 Oxford House, phone 936-0660).