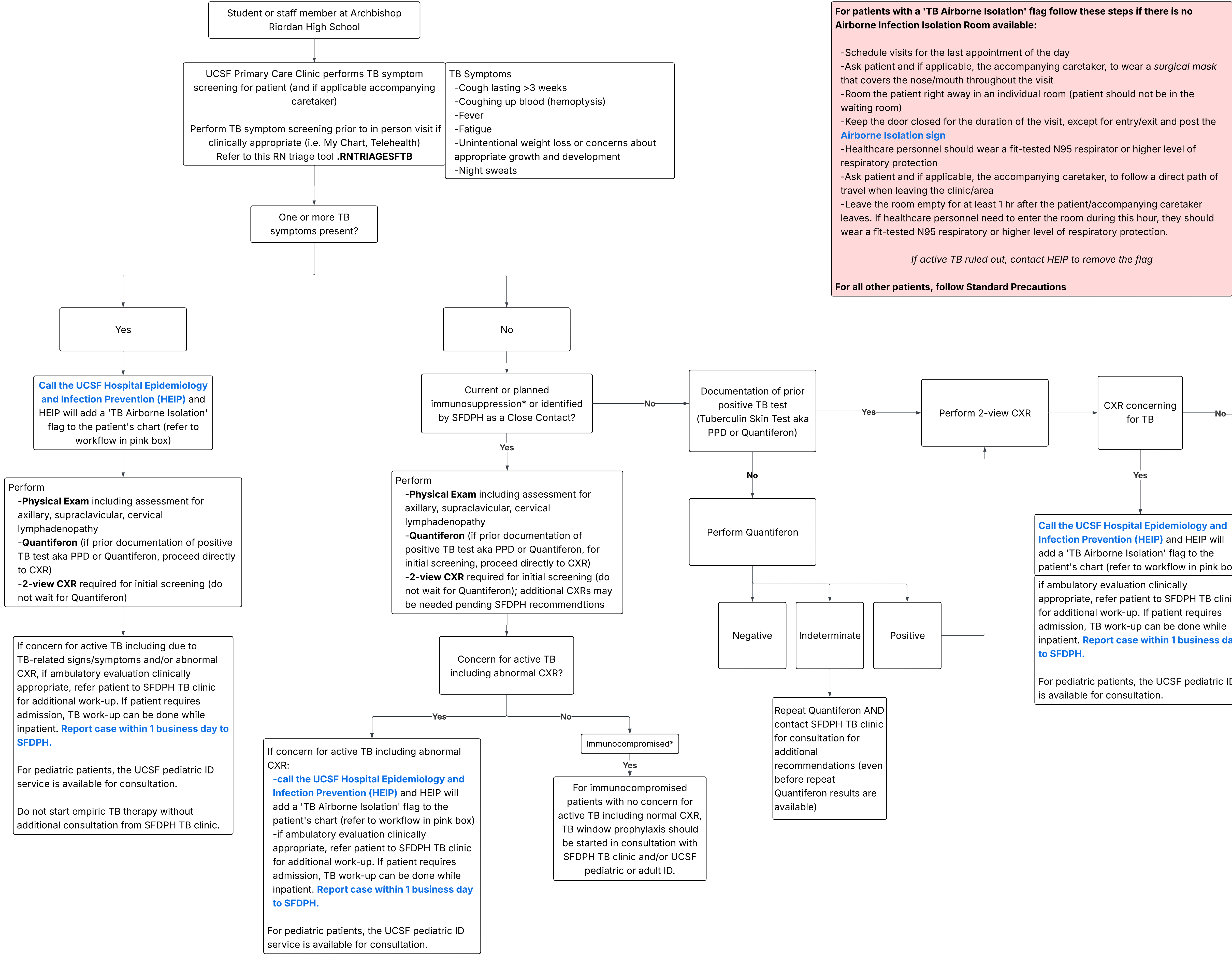


Repeat TB screening every 8-10 weeks until the outbreak resolves

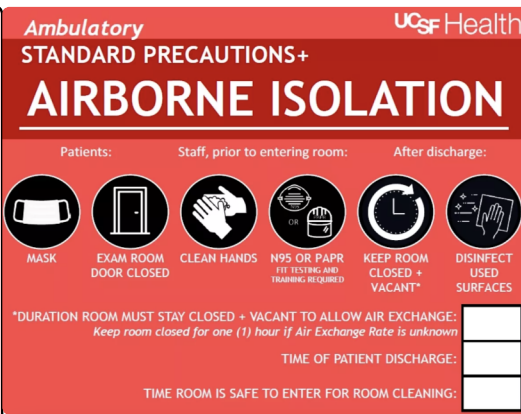


For patients with a 'TB Airborne Isolation' flag follow these steps if there is no Airborne Infection Isolation Room available:

- Schedule visits for the last appointment of the day
- Ask patient and if applicable, the accompanying caretaker, to wear a *surgical mask* that covers the nose/mouth throughout the visit
- Room the patient right away in an individual room (patient should not be in the waiting room)
- Keep the door closed for the duration of the visit, except for entry/exit and post the **Airborne Isolation sign**
- Healthcare personnel should wear a fit-tested N95 respirator or higher level of respiratory protection
- Ask patient and if applicable, the accompanying caretaker, to follow a direct path of travel when leaving the clinic/area
- Leave the room empty for at least 1 hr after the patient/accompanying caretaker leaves. If healthcare personnel need to enter the room during this hour, they should wear a fit-tested N95 respirator or higher level of respiratory protection.

If active TB ruled out, contact HEIP to remove the flag

For all other patients, follow Standard Precautions



Patient requires additional assessment.

Latent TB therapy to be only started by:

- Primary care provider OR
- For pediatric patients, refer to UCSF pediatric ID clinic OR
- For adult patients, refer to UCSF adult ID clinic

If the patient has a documented history of prior positive TB test, negative CXR, and completed a course of latent TB therapy in the past, consult SFDPH TB clinic, UCSF pediatric or adult ID for additional input.

Fill out and send the TB assessment form as instructed in the SFDPH [here](#).

*Immunocompromising conditions include HIV infection, congenital or acquired immunodeficiency, organ transplant, biologics including TNF-alpha antagonists (infliximab, adalimumab, etanercept, others), systemic steroids (equivalent of prednisone >=2 mg/kg/day, or >=15 mg/kg/day for >=2 weeks, or other immunosuppressive medications or conditions

For clinical infectious disease questions including test interpretation, prophylaxis, and TB therapy

Both pediatric and adult: contact SFDPH TB Clinic 628-206-3398 or by secure email to DCIteamactivities@sfdph.org

Pediatrics: for urgent questions UCSF provider contacts pediatric infectious diseases via Voalte or for non-urgent questions including referral for latent TB treatment, place ambulatory referral to pediatric infectious diseases

Adults: Submit a referral to Infectious Diseases clinic

For Infection Prevention related questions, [contact the Hospital Epidemiology and Infection Prevention team](#).

For additional details and references, refer to the 1/29/26 SFDPH Health Advisory available [here](#).