



North Carolina Department of Health and Human Services
Division of Public Health

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Laura Gerald, M.D., M.P.H.
State Health Director

TO: Local Health Department TB Nurses and Physicians

FROM: Jason Stout, M.D., MHS
Medical Director, North Carolina Tuberculosis Control Program

Date: February 20, 2013

RE: NC TB Control Program Policy Manual Changes

There have been several changes made to the NC TB Control Program policy manual. The changes are listed below. Please download the revised chapters from <http://epi.publichealth.nc.gov/cd/lhds/manuals/tb/toc.html>.

Chapter II:

1. Updated the section about when state supplied PPD can be used to reflect the revised Tuberculosis Control Measures Law that went into effect July 1, 2012.

Chapter III:

1. Took out the requirement that the 12 week INH/Rifapentine regimen had to be approved by the TB program medical consultants. It may now be ordered without prior approval. Added instructions to enter all patients on the INH/Rifapentine regimen into NCEDSS.
2. INH is no longer listed as the preferred regimen for the treatment of LTBI.
3. Rifampin given for six months for children and four months for adults is listed as the preferred regimen for the following persons:
 - Intolerant to INH;
 - Individual is a close contact to INH-resistant, RIF-susceptible TB;
 - Individual is high-risk for progression to active TB but is unlikely to adhere to a full nine-month course of INH; and
 - Individual is at relatively high risk for hepatotoxicity from INH (e.g. excess alcohol use, concurrent hepatotoxic medication).
4. Clarified time periods in which each regimen must be completed.
5. Updated example standing orders. The example is for using rifampin to treat LTBI. It says in the standing order "if the patient is on a medication that will interact with rifampin, is allergic or intolerant of rifampin, or is a contact to a rifampin resistant case of tuberculosis, initiate INH using the "Evaluation and Treatment of Latent TB Infection Using INH standing orders. There is also an example of INH standing orders when rifampin cannot be used. Health departments can modify the standing orders to the medical provider's preferences but they should make sure that all the components required by the NC Board of Nursing are included in the standing orders.

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Tel 919-707-5000 • Fax 919-870-4829

Location: 5605 Six Forks Road • Raleigh, NC 27609

Mailing Address: 1931 Mail Service Center • Raleigh, NC 27699-1931

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Chapter IV:

1. Changed treatment length for bone and joint tuberculosis from 9-12 months to 6-9 months.
2. Updated information regarding the use of PZA in pregnancy.
3. Updated information about the use of corticosteroids when a patient has meningeal or pericardial TB.
4. Updated information about medication regimen for INH resistant patients.
5. Clarified some of the monitoring recommendations for second line drugs.

Chapter VI:

1. There is no longer a special ordering procedure listed for rifapentine, and it does not require prior approval.