



# Tuberculosis Health Advisory: Be Vigilant for TB during the COVID-19 Pandemic

November 6, 2020

## Situational Update

Among California and US jurisdictions, San Francisco has a high burden of TB with 12 cases per 100,000 in 2019, more than four times the national incidence rate. Delays in TB diagnosis have been seen in patients with suspected, confirmed, or resolved COVID19, and local referrals for TB evaluation [have decreased](#).

TB disease should be considered in patients with compatible clinical and radiological features, even if they also have suspected or confirmed COVID-19.

**It is essential that TB clinical care and control are continued during the COVID-19 pandemic**, including evaluation and treatment of suspected or confirmed active TB disease; evaluation after significant exposure to infectious TB disease; and treatment of latent TB infection (LTBI) for high risk individuals.

## Recommendations:

1. **Understand TB risk factors in California, refer to the [California TB Risk Assessment](#).** In San Francisco, TB rates are highest among:
  - People who have lived outside the United States in an area of high prevalence
  - People who are immunocompromised
  - People who have lived or worked in a shelter, correctional facility, long-term care facility or other congregate setting
2. **Test those at risk for TB, and treat LTBI to prevent active TB**
  - [San Francisco TB screening guidelines \(SF DPH\)](#)
  - [LTBI treatment guidelines \(CDC\)](#)



### 3. Be vigilant for signs and symptoms of active TB

TB can present in many ways, but the most common symptoms are **prolonged cough (>3 weeks), fever, weight loss and night sweats**. Given the current focus on diagnosing and managing patients with COVID-19, it is important to keep TB in mind as there is significant syndromic overlap between these two conditions, and co-infected patients have poor outcomes. A brief overview of similarities and differences between COVID-19 and TB is outlined in the linked [poster](#) on our website at [www.sfcdcp.org/tb-control](http://www.sfcdcp.org/tb-control). Keep in mind that a diagnosis of COVID-19 does not exclude the possibility of TB co-infection.

### 4. Report active TB

To ensure effective treatment and prompt contact evaluation, patients with high likelihood of active tuberculosis must be reported within 1 working day by California law (Title 17, California Code of Regulations (CCR) §2500). To report cases of likely active TB call the SF TBPCP reporting line (628) 206-3398. Full reporting instructions can be found on our website at URL: <https://www.sfcdcp.org/tbcontrol/tuberculosis-information-for-medical-providers/reporting-tb-to-the-health-department/>

### 5. Refer at-risk patients for evaluation and treatment by the San Francisco TB Clinic

Patients at higher risk of active TB disease, including those with abnormal chest imaging, those undergoing sputum studies or other workup for active TB should be promptly evaluated.

Referrals to TB Clinic are encouraged, criteria are listed are on the referral section of our [website](#). With the exception of shelter-clearance visits, the TB Clinic evaluations are now by appointment, same-day and next-day appointments are often available.

To refer to the San Francisco TB Clinic for evaluation and treatment, please complete and fax the interagency [TB47 referral form](#) OR provide complete information of your work up and reason for referral on clinic letterhead or via electronic referral from within the San Francisco Health Network. Faxed referral forms can be sent to (628) 206-4565.

#### **Program Contact Information:**

Tuberculosis Prevention and Control Unit  
Disease Prevention and Control Branch, Population Health Division  
Tel: (628) 206-3398  
Fax: (628) 206-4565  
<https://www.sfcdcp.org/>