

Chapter 14: Transfer Notifications

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Introduction

Purpose

Use this section to do the following:

- Transfer all active tuberculosis (TB) cases, suspect TB cases, latent tuberculosis infection (LTBI) cases, and contact information to other jurisdictions
- Follow up on notifications
- Make CURE-TB referrals for TB patients and contacts who move between the United States, Mexico, and other participating countries

Making sure that TB patients complete their evaluation and treatment is a critical element of TB control.¹ Some patients receiving treatment for TB disease in the United States move from one jurisdiction to another before completing treatment. Notifying the receiving local and/or state jurisdiction of a patient's impending arrival will prevent care from being interrupted and improve treatment outcomes.

The term *transfer notification* refers to a referral or follow-up report. Before the patient moves, or as soon as it becomes apparent that a patient has moved, the referring jurisdiction provides a referral to the receiving jurisdiction. After the patient has moved, the receiving jurisdiction then provides the referring jurisdiction with a follow-up report.

Policy

The Wisconsin Tuberculosis Program is responsible for coordination of transfer notifications between states and other local jurisdictions within the state. The local public health jurisdiction should notify the state public health department when a patient plans or requests to transfer to another jurisdiction. The receiving and referring jurisdictions should stay in communication until final dispensation of the patient is known. The state TB program is ultimately responsible for notifying and return Interjurisdictional Notifications (IJNs) but will need to be alerted that a transfer is needed. Please contact the state TB program if there is indication that any person undergoing work up for TB, LTBI, or exposure or is on TB or LTBI therapy is moving outside of Wisconsin or the U.S.



For roles and responsibilities, refer to the "Roles, Responsibilities, and Contact Information" topic in the Introduction.

When to initiate a notification



For a definition of TB patient classifications, see the "Tuberculosis Classification System" topic in the Diagnosis of Tuberculosis Disease section.

Table 14.1: Transfer notifications and follow-ups²

Referral type	When to initiate	Notes
Verified and suspected cases of TB disease	When notified that client with verified or suspect TB disease is moving or has moved from the area for 30 days or more.	May also initiate to coordinate directly observed therapy (DOT) while patient is visiting another area.
Contacts	After identifying a contact of an active case patient that lives in another jurisdiction.	Send individual referrals for each contact.
Latent TB infection	When notified that a client with LTBI who has initiated treatment is moving or has moved from the area for 30 days or more, or when a client who has not yet initiated LTBI therapy has moved from the area for 30 days or more.	Send referral to the receiving jurisdiction.

Follow-up type	When to initiate	Notes
Final disposition	When final status or outcome is known.	Other jurisdiction may reach out to learn final status or outcome on cases that they have transferred to your jurisdiction.

Source: NTCA. Interjurisdictional Tuberculosis (TB) Notification—National Tuberculosis Controllers Association Recommendations. Smyrna, GA: March 2002:1–5.

How to issue a notification

Inside the United States (within the state or between states), see Table 14.2: **Referrals in the United States**.

Outside the United States, contact the Wisconsin TB Program at 608-261-6319. The Wisconsin TB Program will work with the country impacted to report the situation.

Transfers inside the United States

Transfers within Wisconsin: Refer to the middle column in Table 14.2: **Referrals in the United States.**

Transfers between states: An interjurisdictional TB notification system has been set up by the National Tuberculosis Controllers Association (NTCA) to facilitate and standardize communication between states. This system will enhance continuity and completeness of care and improve outcome evaluation of verified cases.³ Refer to the right column in Table 14.2: **Referrals in the United States.**

Wisconsin TB Program staff should take the following steps to send a referral to notify another jurisdiction to which a patient has moved or another jurisdiction in which a contact or associate is identified.

Table 14.2: Referrals in the United States⁴

Action	Transfers within Wisconsin	Transfers between states
Make a referral	The public health agency from which the patient is transferring should do the following as soon as possible: • Call Wisconsin TB Program staff at 608-261-6319. • Copy the updated, complete local public health file on the patient, and send the copy to the jurisdiction receiving the patient or transfer the patient's WEDSS record to the new jurisdiction. Call the patient's private provider and arrange for transfer of the patient's records to the receiving physician (or to the jurisdiction receiving the patient if no receiving physician is designated). • If the transfer is within Wisconsin, the transferring jurisdiction should reach out to the receiving jurisdiction to coordinate care, discuss case specifics, and allow for the receiving jurisdiction to ask questions.	The public health agency from which the patient is transferring should do the following as soon as possible: Call Wisconsin TB Program staff at 608-261-6319. Fill out the NTCA's "Interjurisdictional Tuberculosis Notification" form* Fax the form to Wisconsin TB Program staff, or upload the document to the WEDSS record and notify Wisconsin TB Program staff by email: Email: dhswitbprogram@dhs.wisconsin.gov Fax: 608-266-0049 If more information is needed, Wisconsin TB Program staff will request it from the public health agency from which the patient is transferring.
Provide records to the patient	The public health agency from which the patient is transferring should provide the patient a copy of the treatment records.	The public health agency from which the patient is transferring should provide the patient a copy of the referral and treatment records.

Action	Transfers within Wisconsin	Transfers between states
Follow up on referrals	Needed for contacts and active clients. Please follow up with receiving jurisdiction.	Complete the NTCA's "Interjurisdictional TB Follow-Up" form [†] . The Wisconsin Tuberculosis Program will assist with follow up for contacts and active cases transferred out of state.
* NTCA's "Interjurisdictional Tuberculosis Notification" form		

[†] NTCA's "Interjurisdictional TB Notification Follow-Up" form

Source: NTCA. Interjurisdictional Tuberculosis (TB) Notification–National Tuberculosis Controllers Association Recommendations. Smyrna, GA: March 2002:1–5.



For more information on completing the NTCA forms, see the NTCA's Interjurisdictional Tuberculosis (TB) Notification Form Companion Guide.

Transfers outside the United States

CURE-TB: Transfers to Mexico or International

In addition to the CDC notification, the Wisconsin TB Program staff will make referrals through CURE-TB, a referral program for TB patients and their contacts moving between the United States and Mexico. This program provides direct guidance to patients and facilitates the exchange of information between providers in both countries. Services are available to patients and providers all over the United States, Mexico, and some other participating countries.

Referrals accepted by the CURE-TB program include the following:

- **Patients** with suspected or confirmed TB disease who are moving or spending more than one month in Mexico or other international locations.
- **Contacts who move** between the United States and Mexico or other international locations.
- Contacts living in Mexico or other international locations who have been exposed to a confirmed case living in the United States.
- **Source case finding** for an index case in the United States when there is reasonable suspicion of TB disease in a person living in Mexico or other international locations.
- Requests for a patient's clinical history while living in Mexico or other international locations, if sufficient locating information regarding the provider is supplied.

Wisconsin Tuberculosis Program staff initiates a CURE-TB referral as soon as possible after receiving information about the patient's move or identifying a contact or associate.

To make a CURE-TB referral:

- 1. Complete the CURE-TB Referral Form.
- 2. Forward a copy of the referral form by secure email to the Wisconsin TB Program at dhswitbprogram@dhs.wisconsin.gov or fax to 608-266-0049.
 - **a.** CURE-TB can be reached by telephone at 619-542-4013.
- **3.** Provide the patient with the following:
 - **a.** The CURE-TB telephone numbers to call 619-542-4013 for questions about their care or about accessing care on either side of the border.⁵
 - **b.** A copy of the referral and treatment records.
 - **c.** When possible, provide the patient with sufficient medications to give them time to establish care in their new location. You should make sure the patient understands when and how to take the medications.

References

¹ CDC. International notification of tuberculosis cases [Division of Tuberculosis Elimination Web site]. Available at: International Notification of Tuberculosis Cases | Resources for TB Programs | Professional Resources & Tools | TB | CDC

NTCA. Interjurisdictional Resources [NTCA Web site]. Available at Interjurisdictional TB Notification (IJN) | National Tuberculosis Controllers Association (tbcontrollers.org)

³ NTCA. Interjurisdictional Resources [NTCA Web site]. Available at: Interjurisdictional TB Notification (IJN) | National Tuberculosis Controllers Association (tbcontrollers.org)

⁴ NTCA. Interjurisdictional Resources [NTCA Web site]. Available at: Interjurisdictional TB Notification (IJN) | National Tuberculosis Controllers Association (tbcontrollers.org)