



HEADQUARTERS, UNITED STATES FORCES, KOREA
UNIT #15237
APO AP 96205-0010

REPLY TO
ATTENTION OF:

FKSG

8 AUG 2011

MEMORANDUM FOR DODEA SCHOOLS IN REPUBLIC OF KOREA

SUBJECT: USFK policy for Latent Tuberculosis (TB) Risk Assessment and Testing

1. Tuberculosis (TB) screening is performed to detect those with who have been exposed to TB, developed infection, and do not have signs or symptoms of disease (latent TB). The latent TB screening program is a targeted program, limited to individuals with histories at high-risk for active TB exposure or those with clinical indications for testing.
2. Based on World Health Organization (WHO) data, the potential risk of exposure to active TB is greater in the Republic of Korea (50/100,000) than in the United States (2.5/100,000) (WHO, 2008). However, the actual case reporting of new TB infections among the USFK population is significantly less than the Korean population due to reduced exposure to high-risk populations (migrant workers, institutionalized patients, rural and impoverished communities, communities known to harbor high rates of infection, etc.).
3. All students attending DODEA schools in the Republic of Korea must be routinely evaluated for their risk of exposure to active TB.
 - a. DODEA school nurses will evaluate each student's active TB exposure risk using a risk assessment questionnaire (enclosure 1) at initial enrollment and during each annual enrollment thereafter.
 - b. If the risk assessment questionnaire indicates a high-risk for active TB exposure, the student will be referred to the local medical treatment facility (MTF). A Public Health Nurse, Independent Duty Corpsman, or credentialed provider will determine the appropriate screening test for latent TB screening based on a more in depth review for those with concerning questionnaires [Quantiferon blood sample (QNFT), Purified Protein Derivative skin test (PPD/TST), or chest radiograph (CXR)] based on the student's medical history.
 - c. Prior to entry to DODEA school system in Korea, students will be required to provide evidence of having been administered a screening test for latent TB within a 3 month period prior to registration.

d. Students demonstrating symptoms considered suspicious for active TB (refer to enclosure 1, risk assessment questionnaire) will be referred to the local MTF by the school nurse.

e. It is strongly recommended that students obtain a latent TB screening test at between 3 to 6 months after permanently departing Korea to return to the U.S. or to an overseas location with low prevalence of active TB (refer to enclosure 1).

4. This policy is consistent with U.S. Center for Disease Control (CDC) recommendations, and 7th Air Force Policy, which differs from the practice in the Republic of Korea. The Republic of Korea TB control program does not center upon TB screening, but instead utilizes a vaccination program designed for countries with a higher prevalence of tuberculosis.

5. My POC for this memorandum is LCDR Troy Henderson, USFK/UNC Force Health Protection Officer, DSN 315-724-6326/Commercial (010-5244-0199), or e-mail: troy.dean.henderson@korea.army.mil.

Encl

RONALD E. SMITH
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Enclosure 1. Tuberculosis Risk Assessment Questionnaire

Children may have been exposed to active TB if:

CDC/TB/Basic Risk Factors <http://www.cdc.gov/tb/topic/basics/risk.htm>

Yes	No	Risk of Active TB Exposure Usually Occurs with Close Contact to Infected Persons that are Showing Symptoms (Cough, Weight Loss)
		Exposure to a person diagnosed with active (infectious) TB disease
		Travel to a country that has a high rate of TB, World Health Organization country data http://www.who.int/tb/country/data/download/en/index.html tables http://en.wikipedia.org/wiki/File:Tuberculosis-prevalence-WHO-2009.svg map
		Exposed to persons who work or reside with homeless persons, injection drug users, or persons with HIV infection (high rate of TB transmission)
		Exposed to persons who work in hospitals, homeless shelters, correctional facilities, nursing homes, and residential homes for HIV patients (high risk of active TB)
		Exposed to person that has weakened immune system from illnesses such as HIV infection, Silicosis, Diabetes Mellitus, Severe kidney disease, Head and neck cancers
		Exposed to persons that have weakened immune systems from Low body weight, Organ transplants, Medical treatments such as corticosteroids, Specialized treatments for rheumatoid arthritis or Crohn's disease

Children may be showing early signs of active TB if:

World Health Organization Communicable Diseases, Tuberculosis, Factsheets

http://www.searo.who.int/en/Section10/Section2097/Section2106_10681.htm

Yes	No	Suspect Active TB Disease in a Child with Symptoms
		Student is ill, with a history of contact with a suspect or confirmed case of pulmonary TB
		Student who does not return to normal health after measles or whooping cough
		Student demonstrates a loss of weight, cough, and/or fever and does not respond to antibiotic therapy for acute respiratory disease
		Student with abdominal swelling, hard painless mass and free fluid
		Student with a painless firm or soft swelling in a group of superficial lymph

		nodes
		Student with signs suggesting meningitis or disease of the central nervous system