





Tuberculosis Case Management for Removable Alien Inmates/Detainees in Federal Custody

Federal Bureau of Prisons (Department of Justice)

United States Marshals Service (Department of Justice)

Immigration & Customs Enforcement (Department of Homeland Security)

Background

Federal Bureau of Prisons (BOP)

- BOP has custody of pretrial and sentenced inmates convicted of federal crimes.
- Approximately 82% of BOP inmates are confined in bureau-operated facilities; the balance are confined in secure, privately managed or community-based facilities and local jails.
- Each BOP inmate is assigned an 8-digit federal registration number which matches the USMS number (####-###).
- For tuberculosis-related case management issues, contact the BOP Health Services Division, Office of Quality Management, Infection Control Program.

United States Marshals Service (USMS)

- USMS initially assumes custody for all prisoners charged with a federal offense, no matter which agency made the arrest.
- USMS contracts with and holds inter-governmental agreements (IGA) with >1,800 state and local governments and private facilities for the care and housing of
- USMS prisoners.
- USMS prisoners are assigned an 8-digit unique USMS/federal registration number (####-###) that identifies them while in USMS and BOP custody.
- USMS should be notified of their prisoner's health status and plan of care to facilitate appropriate case management and continuity of care.
- Undocumented foreign-born prisoners may be released from USMS custody to the custody of ICE or Border Patrol, if on a detainer or for deportation, after serving a short-term sentence or charges are otherwise resolved.

Immigration & Customs Enforcement (ICE)

- ICE does not maintain custody of removable aliens serving criminal sentences. ICE detains aliens only for the purpose of removal (deportation to their country of origin or citizenship).
- Each detainee is assigned an 8 or 9 digit alien number (A#).
- ICE must be contacted by the local health department or medical staff at one of its
 facilities to be made aware of the detainee's health status and to facilitate appropriate
 case management and continuity of care planning prior to transfer, release or
 removal.
- ICE has Field Medical Coordinators (FMC) assigned to each field office; the FMCs coordinate medical issues within their respective area of responsibility.

TB Basics



Tuberculosis (TB) is caused by the bacteria *Mycobacterium tuberculosis* (*M. tb*) and is spread by airborne droplet nuclei. Millions die from TB every year and it is the leading killer of those with HIV infection. If left untreated, each person with active TB disease will infect 10-15 people.

The initial protocol for a person suspected of active TB disease includes:

- airborne infection isolation (AII),
- collection of sputum for AFB smears, cultures and drug susceptibilities
- Testing for TB infection with TB skin test (TST) or interferon gamma release assays (T-spot or QFT)
- HIV serology

Important points:

- Persons suspected of active TB disease can be started on treatment empirically based on chest x-ray results and/or clinical presentation
- Confirmatory culture results can take up to 8 to 10 weeks to grow M.tb and test for drug resistance
- Treatment for active TB disease usually ranges from 6 months to 2 years
- For additional information, refer to CDC's recommendations: Prevention and Control of Tuberculosis in Correctional and Detention Facilities at http://www.cdc.gov/mmwr/PDF/rr/rr5509.pdf

Frequently Asked Questions

How do I find out if an inmate/detainee is in the custody of a federal law enforcement agency?

- BOP inmate locator http://www.bop.gov/iloc2/LocateInmate.jsp
- ICE detainee locator https://locator.ice.gov/odls/homePage.do
- USMS has no online locator available. Contact your local USMS District. District contact information can be found at: http://www.usmarshals.gov/index.html, click on map labeled "Your Local U.S. Marshal Office

Who should we notify when we identify removable alien patients with confirmed or suspected active TB disease?

- Notify the state and local health departments
- Notify the health program contacts at the law enforcement agency with legal custody

What information should be reported to the federal agencies?

- All pertinent clinical information
- Information required for reporting to State and local health department
- Law enforcement agency identification numbers assigned to the person
- Point of contact name, email and telephone numbers

Are we legally permitted to release medical records to BOP, USMS and ICE?

Yes

Should we discharge the patient with a supply of TB medications? If so, how much?

 Yes, according to respective facility policies and agency agreements. It is recommended that TB patients be discharged with a 14 day supply of anti-TB meds when deported

Should we report a patient with latent TB infection (LTBI)?

- The local health department may require reporting
- Report to federal law enforcement agency if the patient is also immunocompromised

General Considerations for Individuals in Federal Custody

- Shorter length of stay (except for BOP)
- Frequent transfers
- May often require medical clearance for air transport
- Care and services based on contract agreements and national detention standards
- Most removable aliens in the U.S. originate from countries with a high burden of active TB disease
- A removable alien with a final order of removal cannot be detained solely for the purpose of completion of treatment or receipt of culture results

TB Continuity of Care

- BOP, USMS and ICE will make every attempt to arrange continuity of care for foreign nationals in their custody so that they are able to complete TB treatment in their respective country of nationality
- Continuity of care is accomplished by enrollment and referral coordination through either the Migrant Clinician's Network's TBNet program or the Cure TB program (Mexicans only)
- All removable alien suspected TB patients in law enforcement custody should be enrolled in an international TB referral program

Binational Referrals



CureTB

- Operated by the San Diego, California health department
- Provides referral services for Mexican nationals and individuals moving across the U.S. and Mexican border
- Telephone # (619) 542-4013
- Fax# (619) 692-8020
- Toll free patient line # (800) 789-1751 or Mexico 01-800-004-4800

How to refer a patient (Mexican only) to CureTB:

- Provide education to the patient on the continuity of care program and referral process
- No written consent is required for enrollment in CureTB
- Fax the Binational Notification Form and all pertinent clinical radiology, laboratory reports and treatment information to CureTB
- Call CureTB staff to arrange the patient interview by phone
- Call CureTB to confirm that the patient's addresses have been verified and a clinic has been identified
- Be sure to provide the patient with the CureTB toll free numbers upon discharge
- Notify CureTB when the patient is transferred, released or repatriated so that they can begin post custody case management

Transnational Referrals



Migrant Clinicians Network (MCN)

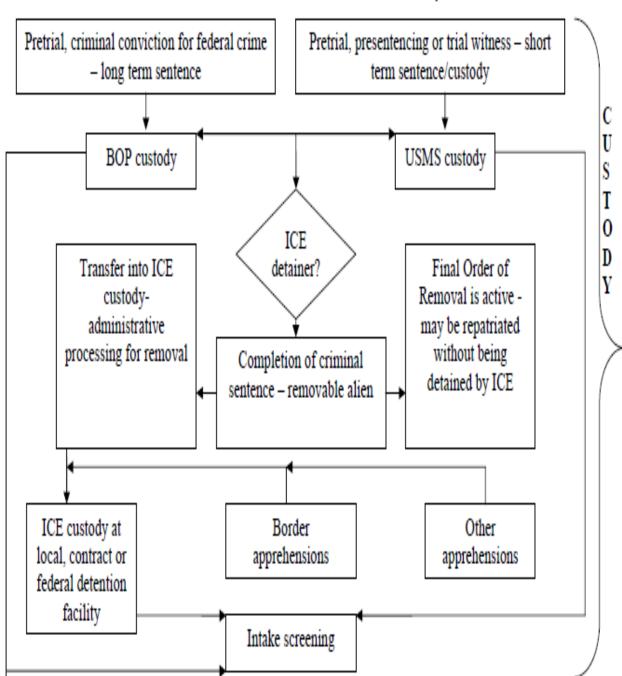
TBNet Program

- Provides referral services to all TB patients regardless of nationality
- Multinational TB patient tracking and referral project
- Telephone # (512) 327-2017
- Fax# (512) 327-6140 or (512) 327-0719
- Toll free patient line # (800) 825-8205

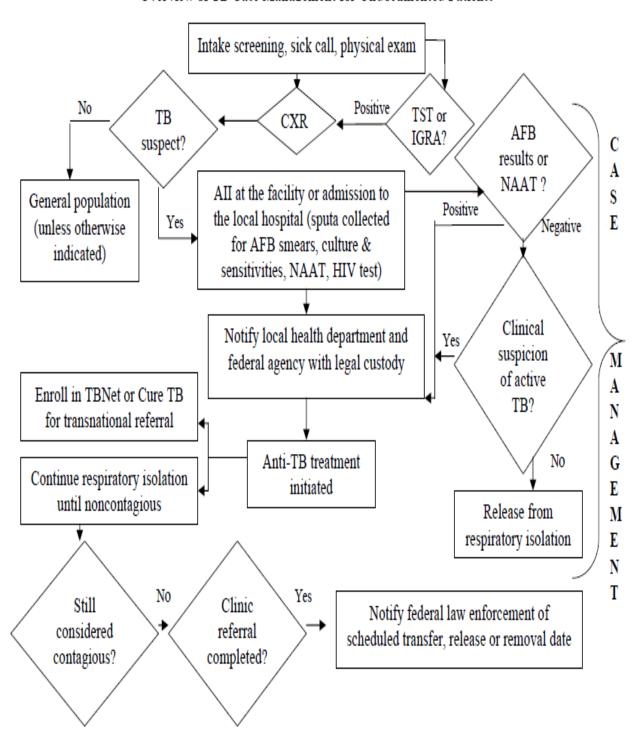
How to refer a patient to TBNet:

- Provide education to the patient on the continuity of care program and referral process
- Obtain informed consent; the patient must sign the MCN consent form to be enrolled in TBNet
- Fax consent form and all pertinent clinical radiology, laboratory reports and treatment information to TBNet
- TBNet staff will conduct a patient interview by phone and verify the patient's address in their county of nationality prior to establishing the clinic referral
- Once the clinic referral has been established, TBNet will fax or email the Clinic Referral Form to the facility that initiated the enrollment; the form will include the clinic name in the country of nationality, address and contact numbers
- A copy of the Clinic Referral Form should be provided to the patient; also file a copy in the patient's medical record
- Notify TBNet when the patient is transferred, released or repatriated so that they can begin post-detention case management

Overview of Federal Law Enforcement Custody



Overview of TB Case Management for Undocumented Patients



entify suspect or confirmed case of active TB disease
certain the federal law enforcement agency identification #
otify the appropriate federal law enforcement agency and request medical old, if indicated
otify local health department according to state and local reporting equirements
KR result and date
ST result and date
V result and date
B smears x3- results and dates
ulture and sensitivities ordered with initial AFB smears? NAAT result, available?
eatment initiated—Start date
spected treatment completion date
omplete CureTB (Mexican only) or TBNet (all countries) enrollment forms
Ibmit enrollment forms to the appropriate international referral program
ubmit copy of enrollment forms to the appropriate federal law enforcement gency for surveillance and tracking purposes
sure completion of patient interview with international referral program
form and/or coordinate with local health department regarding coordinated ease/removal arrangements, as indicated
nce cleared from respiratory isolation <u>and</u> international referral completed and bmitted, notify the appropriate federal law enforcement agency
oon transfer, removal or release, supply the patient with no more than two eks supply of TB medications and provide a copy of clinic referral information
Iture and drug sensitivity results and dates—Report results to the appropriate deral law enforcement agency, health department and international referral ogram
epeat CXR- if culture negative, report results to the appropriate federal law nforcement agency, health department and international referral program
otify federal law enforcement agency POC of scheduled transfer, release or

Health Department Checklist	
Investigate suspect or confirmed case of active TB disease in your local detention facility	
Determine custody status (BOP, USMS, ICE or local law enforcement?)	
Ascertain federal law enforcement agency identification # (BOP and USMS Federal ID or ICE Alien ID#)	
Notify the appropriate federal law enforcement agency and request medical hold, if indicated	
Ensure completion of the CureTB (Mexican only) or TBNet (all countries) enrollment and patient interviews	
Ensure submission of the enrollment forms to the appropriate international referral program	
Ensure submission of a copy of the enrollment forms to the appropriate federal law enforcement agency for surveillance and tracking purposes	
Once cleared from respiratory isolation <u>and</u> international referral completed, notify the appropriate federal law enforcement agency	
Culture and drug sensitivity results and dates—Report results to the appropriate federal law enforcement agency and international referral program	
Notify federal law enforcement agency POC of scheduled transfer, release or removal	

Federal Law Enforcement Agency Points of Contact for TB Case Management

BOP Call: (202) 305-7388 or (202) 305-4980

Email: BOP-HSD/InfectiousDiseases~@bop.gov

Fax: (202) 307-0156

USMS Call: (202) 307-9680 Nurse Case Manager Line

Email: tiffany.moore3@usdoj.gov

Fax: (202) 307-5029

ICE/IHSC Call (202) 732-4559 or (202) 732-3467 or

Email: IHSCepidemiology@dhs.gov

Fax: 1 (866) 573-8531

Additional Resources

CDC TB http://www.cdc.gov/tb/publications/guidelines/

National TB Controllers Association http://tbcontrollers.org

Regional Training and Medical Consultation Centers (RTMCCs) http:://www.cdc.gov/tb/education/rtmc/default.htm

Migrant Clinicians Network (MCN/TBNet) http://www.migrantclinician.org/services/tbnet.html

CureTB http://www.sdcounty.ca.gov/hhsa/programs/phs/cure_tb