

Massachusetts Department of Public Health

Division of Global Populations MAVEN Updates

April 8th, 2025

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Agenda

- Overview of Division of Global Populations (DGP) Workflows
- Demonstration of Available Reports
- MAVEN Help Section Updates







Massachusetts Department of Public Health

Key Concepts

Key Concepts: Stages of Tuberculosis

Latent Tuberculosis

- Diagnosed by:
 - Positive IGRA/PPD
 - CXR negative for TB
 - No pulmonary symptoms
- MAVEN Classification
 - TB <u>Infection</u> Suspected/Confirmed
- Patient is NOT infectious
- Treatments available
 - Optional but highly recommended
- Patient will NOT appear in the TB Suspect/Case
 Notification Not Acknowledged workflow







New Case

Definition

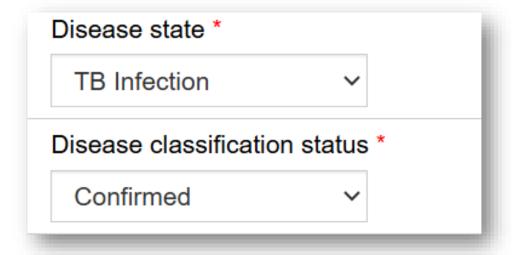
Active Tuberculosis

- Diagnosed by (dependent on site):
 - Positive NAAT and/or Culture for MTB
 - Abnormal Radiology (CXR, CT)
 - Symptoms (varied depending on site of disease)
- Most common: Pulmonary
 - Positive sputum NAAT/Cx, abnormal CXR and respiratory symptoms
- MAVEN Classification:
 - TB <u>Disease</u> Suspected/Confirmed
- Patient is POTENTIALLY infectious
 - Depending on site of disease and clinical presentation
- Treatments available
 - Mandatory if risk to public health
- Patient WILL appear in the **TB Suspect/Case**Notification Not Acknowledged workflow

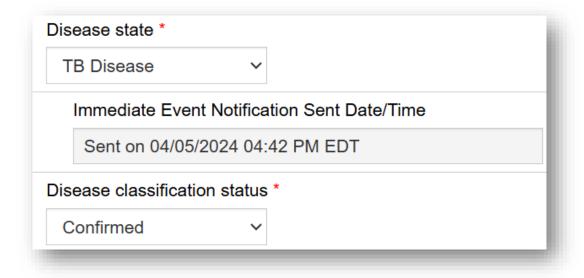
NAAT = Nucleic Acid Amplification Test Cx = Culture CXR = Chest X-Ray

Key Concepts: Stages of Tuberculosis

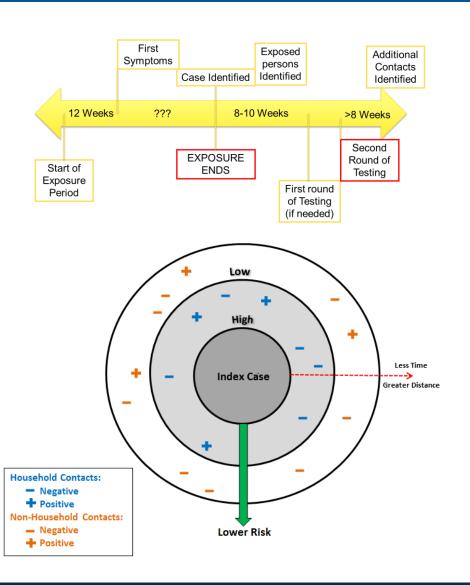
LTBI in MAVEN



Active TB in MAVEN



Key Concepts: Contacts of Active TB Cases



Identifying Exposure Period

- Start = 1^{st} positive finding <u>OR</u> 1^{st} day of symptoms (whichever came 1^{st}) and go back 8-12 weeks
- End = Last day patient was in contact with peers

Identifying Contacts

- Concentric Circles
 - Start with most exposed contacts = family, significant others,
 close friends
 - Expand as needed:
 - Depending on clinical indicators
 - Frequenting congregate settings (school, work, LTCF)
 - Immunosuppressed contacts

Testing occurs in 2 rounds

- Initial round when contacts are identified
 - Used mainly to identify previous positive contacts
- 2nd round 8-10 weeks after exposure ends
 - TB is a VERY slow growing bacteria, may take up to 10 weeks to show a positive test

Key Concept: Blood Tests for TB Infection - IGRA

- IGRAs: Interferon Gamma Release Assays or "TB blood tests"
 - Like TB skin tests, IGRAs are screening tests for TB infection, not disease
 - Unlike TB skin tests, not affected by prior BCG vaccination
 - A negative IGRA does not rule out TB disease
 - Like TB skin tests, IGRAs usually remain positive for life
- Two commercially available IGRA tests:
 - QuantiFERON-TB Gold Plus (QFT)
 - T-Spot. TB Test



Key Concept: Class B Reference Guide

- TB Class B0 Recently treated TB disease
 - This person would have been diagnosed with, treated for, and cured of TB disease during an earlier panel physician exam
- TB Class B1 Significant exam findings, no evidence of infectiousness
 - Abnormal CXR, but negative sputum cultures
 - IGRA can be positive or negative
- TB Class B2 Latent TB Infection
 - Positive IGRA, but normal CXR
- TB Class B3 TB Contact
 - Identified as a recent contact to another individual with TB Disease
 - Negative first-round IGRA, normal chest X-Ray





Massachusetts Department of Public Health

MAVEN Workflows

Workflows

Immediate Notifications

TB Suspect/Case Notification Not Acknowledged

Online LBOH TB Notifications

- LBOH TB Labs For Review
- LBOH LTBI Priority Follow-Up
- LBOH TB Class A/B Worksheet Complete
- LBOH TB Needs Final Review
- LBOH TB Outreach Requested and Not Assigned

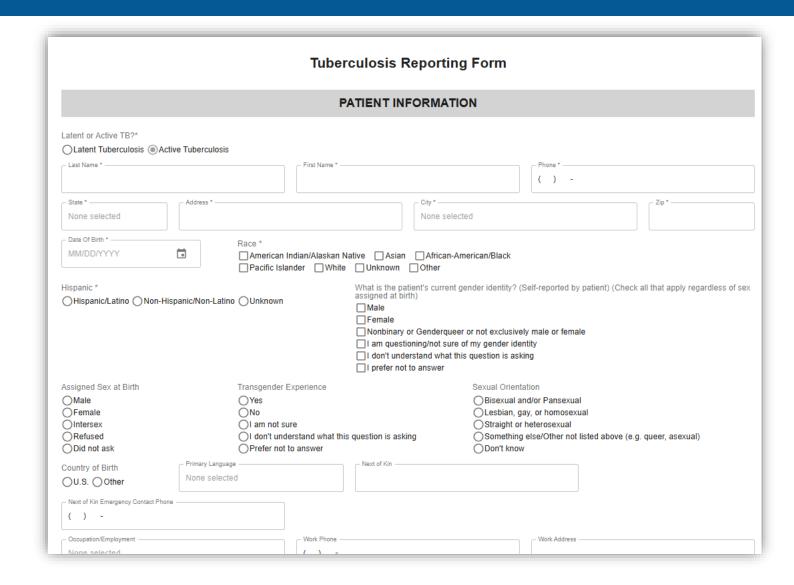


TB Suspect/Case Notification Not Acknowledged

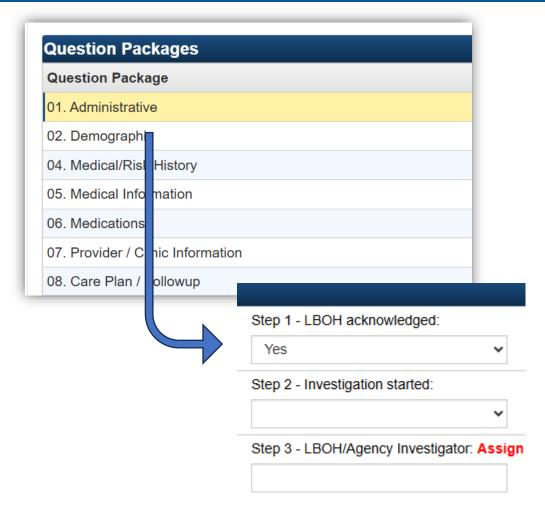
Workflows: TB Suspect/Case Notification Not Acknowledged

- Notification of new patient with suspected TB Disease
- Patients enter this workflow when an "Active Tuberculosis" CRF is submitted to MDPH

CRF = Case Reporting Form
MDPH = Massachusetts Department of Public Health



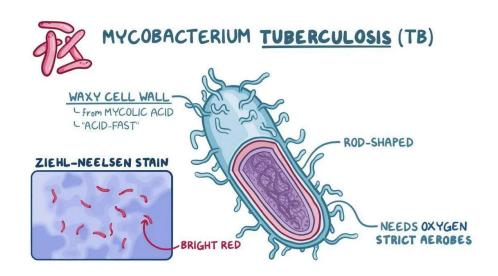
Workflows: TB Suspect/Case Notification Not Acknowledged



- For patients to leave this workflow, 3 variables need to be acknowledged:
 - TB Received Notification
 - → State TB Nurse
 - MDPH Team Received Notification
 - Step 1 LBOH Acknowledged

Workflows: TB Suspect/Case Notification Not Acknowledged

If cases in this workflow are not acknowledged within 24 hours, LBOH will be contacted by DSAI



Active TB case follow up questions? → visit the MAVEN Help section for TB or call the **TB Program** at **617-983-6970**

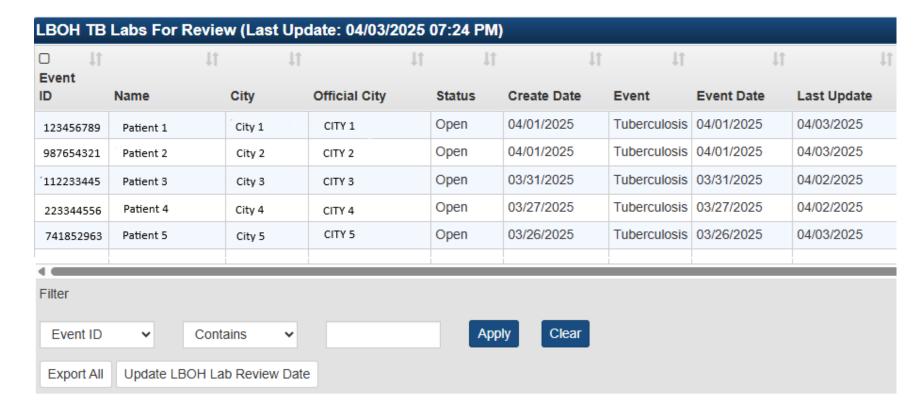


LBOH TB Labs For Review

Cases enter this workflow when a TB lab is added OR updated



Gase may return into the workflow even after reviewed if an update is received from the laboratory



Purpose of this workflow:

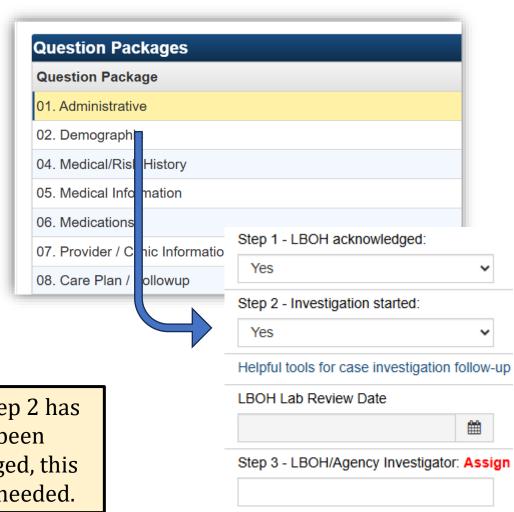
- Smear positive results to notify of infectiousness
- Culture results to confirm or revoke a case
- Susceptibility results to identify potential drug resistance

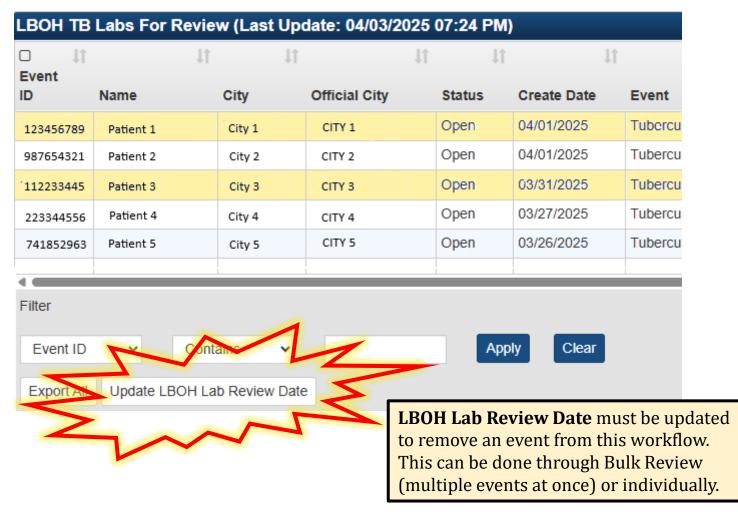


To remove the case from the workflow:

- 1. Enter the MAVEN event
- 2. Open the Administrative Question Package
- 3. Set "Step 2 Investigation Started" to Yes
- 4. Return to Workflow

NOTE: If Step 2 has previously been acknowledged, this will not be needed.





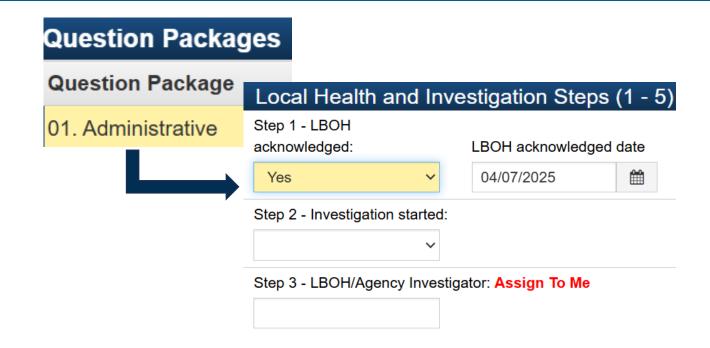
- 1. Select patient whose lab was reviewed by clicking once on their row
 - Row will highlight in yellow
 - Multiple rows can be selected at once
- 2. Click on "Update LBOH Lab Review Date"
- Patient will be removed from TB Labs workflow
 - Rinse and repeat when an update to a lab or a new lab comes in for the patient



LBOH LTBI Priority Follow-Up

Workflows: LBOH LTBI Priority Follow-Up

- This workflow is used to alert towns of Tuberculosis Infection patients that DPH would consider a higher priority when compared to the average.
- Not all patients in this workflow will require follow-up.



To Remove an event from the workflow:

- 1. Enter the MAVEN event
- 2. Open the Administrative Question Package
- 3. Set "Step 1 LBOH acknowledged:" to "Yes"

Workflows: LBOH LTBI Priority Follow-Up

Persons who are deemed close contacts to someone with TB Disease

Testing (1-2 rounds) & referrals may be needed, in collaboration with DPH

Persons arriving with a Class A/B designation

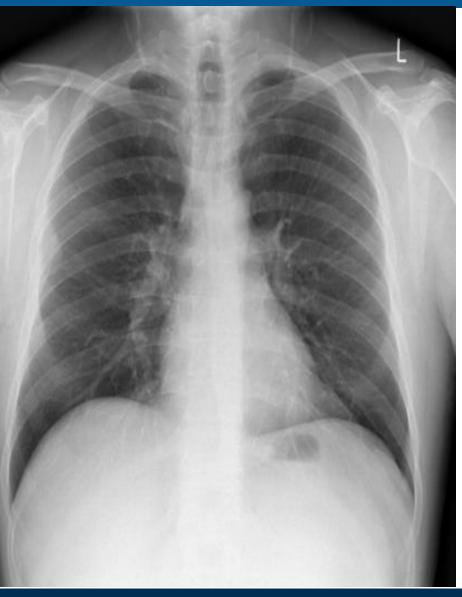
- LBOH provides case management including establishing a communal connection, testing (if needed), referral to a State TB clinic & treatment adherence support
- B2 >18 update in technical instructions Fall 2024

Children

- Prioritize < age 5: Call provider to ensure there is a TB clinic referral, DOT support may be needed
- Age 5-17: Time and funds permitting, call the provider to confirm there is a TB clinic referral



Workflows: LBOH LTBI Priority Follow-Up



- Where did my patient go? They are gone from the workflow.
 - Yes, once acknowledged, the case will be removed from this workflow. If further follow-up is required, they will appear in another workflow as well
- How do I tell why they are in this workflow?
 - All Class B0, B1, B<19, & B3 arrivals all will have notes and attachments from DPH Staff
 - In the Administrative Question Package, you can also check the variable "Class A/B TB Condition"
 - Contacts will have notes and be linked to an Index patient (see "Linked Events/Contacts" on the patient's main MAVEN screen)
 - If not linked to an Index event, and "Class A/B TB Condition" is blank, then they are a TB Infection patient under the age of 18
- The event is empty? Why?
 - We rely on many passive reporting methods for TB Infection
 - Always check the "Labs" tab and the ECR Question Package



LBOH TB Class A/B Worksheet Complete

LBOH TB Class A/B Worksheet Complete Workflow



★ LBOH TB Class A/B Worksheet Complete

- Who is in the Workflow: Residents of your town whose Class A/B evaluation or treatment documentation is not yet completed – Class B0, B1, B<19, & B3 arrivals
- To Remove an Event from the Workflow: Fax the completed TB Worksheet to 617-887-8791 (including ATS classification and treatment completion date, if applicable) or task the State-TB Class AB group

How To Task- MAVEN 101

Workflows: LBOH TB Class A/B Worksheet Complete



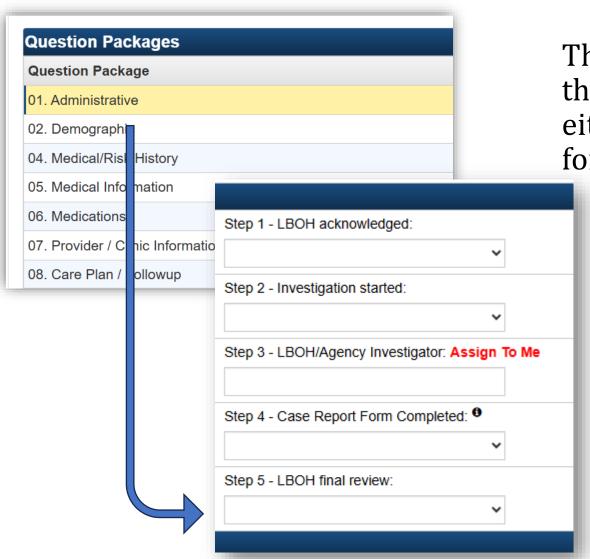
- CDC's Goal: Completion of TB evaluation < 90 days from arrival
 - These targets are ambitious in a good year
 - Recognize limitations of clinic capacity, and increased number of arrivals after early pandemic back-logs
 - Not all TB Class B arrivals have the same level of urgency to their evaluation
- Arrival remains in the workflow until a final "outcome" is obtained & reported back to the CDC
 - Never Located
 - Refused Evaluation
 - Tested, but not evaluated
 - Moved (In or out of state)

- Lost to follow-up
- Completed therapy
- Started therapy & did not complete
- Evaluated, therapy not recommended



LBOH TB Needs Final Review

Workflows: LBOH TB Needs Final Review



This workflow lists patients that are still on therapy and need to be monitored until they either complete treatment or are ruled out for TB and follow up if no longer needed

To remove patient from this workflow:

- Enter the MAVEN event
- 2. Open the Administrative Question Package
- 3. Set "Step 5 LBOH final review" to Yes

NOTE: If patient moves to another town, patient will remain in the previous town's workflow until the new town checks off Step 5

Workflows: LBOH TB Needs Final Review

If patient moves to another Massachusetts town:

- Patient remains in this workflow for the ORIGINAL town since this workflow is based off Official City
 - City where patient lived during their diagnosis
- Official City staff should share the event with the Current City
 (town where patient moved) so they will have access to the MAVEN
 event
- Current city staff will take over patient care and fill out Step 5 – LBOH Final Review
 Complete which will then remove patient from the Official City's workflow

Current City LBOH can access event through **SHARED WITH ME Workflow** or by **STARRING** to bookmark event for easy access.



LBOH TB Outreach Requested and Not Assigned

Workflows: LBOH TB Outreach Requested and Not Assigned

- In this workflow appears TB patients where outreach was requested but has not yet been assigned. It is used more as an FYI for local boards of health users.
- Patients are removed from the workflow once a DGP Direct Services Coordinator assigns a community health worker to the patient.



Roles of a CHW

- Increase patient's access and linkage to health care
- Provide health system navigation, health orientation
- Serve as cultural broker between patient and health care provider
- Promote engagement and retention in care for TB treatment
- Language & transportation support
 - Collectively, the DS Team speaks 21 languages

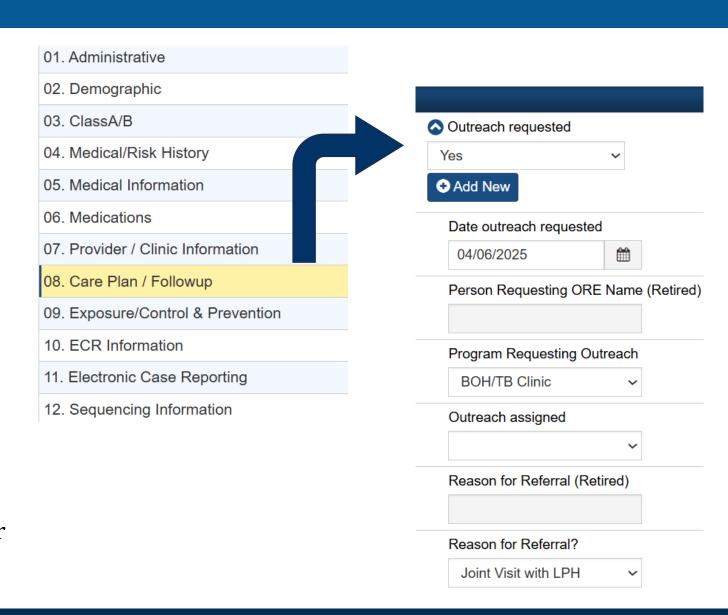
Language Line Solutions
Dial: 866-874-3972
Code: 684959

Workflows: LBOH TB Outreach Requested and Not Assigned

Outreach is automatically assigned to any TB Disease patient and any Class A, B0, B1, B2<19, & B3 arrival

To request outreach:

- 1. Enter the MAVEN event
- Open the Care Plan / Followup question package
- 3. Set "Outreach requested" to "Yes"
 - Set "Program Requesting Outreach" to "BOH/TB Clinic"
 - Set "Reason for Referral?" to your set need





Massachusetts Department of Public Health

MAVEN Reports

Reports

DGP – LBOH Active Caseload

• This will pull all TB Disease cases. No TB Infection (LTBI) cases will be included

DGP – Event Information Extract by Disease

- This can pull TB Disease and TB Infection cases, depending on your selection
- You can choose the question packages you would like included in the report. If you include the Administrative QP, you can filter on Disease State

LBOH – Count Events per Disease and Classification in Jurisdiction

- Provides counts stratified by classification for selected date range
- Does not separate by TB Disease/TB Infection



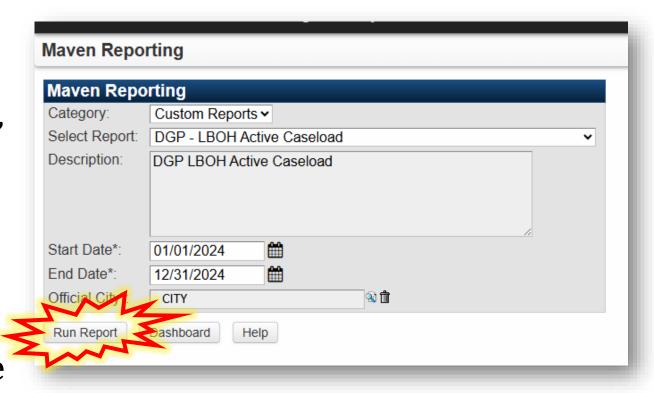
LBOH Active Caseload

Report: LBOH Active Caseload

Once in Reports landing page:

- In "Category" select "Custom Reports"
- Choose the report in "Select Report"
- Enter the start and end date of the range you want to see
- Select your city in "Official City"
- Click "Run Report"

MAVEN will think for a little while but then a new tab will open with the information



Report: LBOH Active Caseload

Report runs a list of active disease cases without "Step 5 – LBOH Final Review Date" filled out in Admin QP

DGP - LBOH Active Caseload

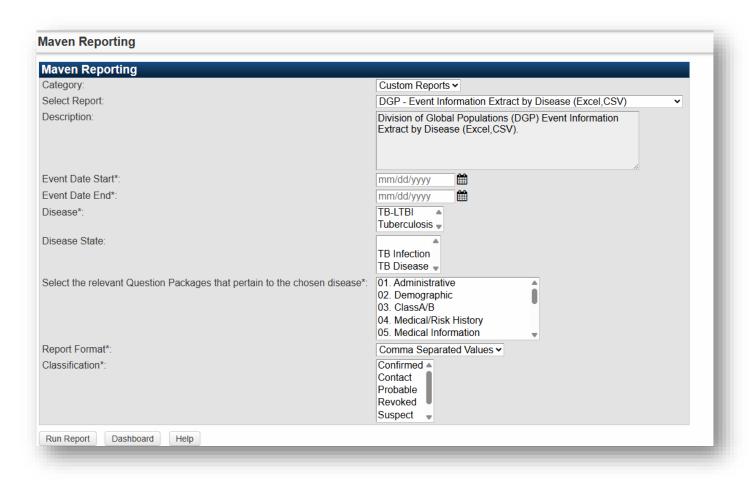
Report Time: 04/04/2025 03:36 PM

EVENTID	NAME	DOB	EVENTDATE	DISEASE	DISEASESTATUS	SUSPECTDATE	CONFIRMEDDATE	MACOUNTEDCASE	LBOHFINALREVIEWDATE	TSAFINALREVIEWDATE	OFFICIALCITY	CURRENTCITY	CONTACTS	TSA	UNID
100000054	Jimmy Page	06/15/1950	07/15/2020	TB_ACTIVE	SUSPECT	07/15/2020					BOSTON	BOSTON	0	N/A	3816302
100000101	Cirrostratus Cloud	01/01/1960	05/25/2022	TB_ACTIVE	CONFIRMED						BOSTON	BOSTON	0	N/A	21985703
100000245	Anne TB	08/16/1947	02/05/2021	TB_ACTIVE	SUSPECT	02/05/2021					BOSTON	BOSTON	0	N/A	5962691
100000263	Ashley TB	07/17/2007	06/04/2021	TB_ACTIVE	SUSPECT	06/04/2021					BOSTON	BOSTON	0	N/A	6005800
100000276	James Jones	01/01/2001	07/15/2020	TB_ACTIVE	SUSPECT	07/15/2020					BOSTON	BOSTON	0	N/A	6186281
100000304	Stephanie Sunshine	02/02/1971	07/15/2020	TB_ACTIVE	SUSPECT	07/15/2020					BOSTON	BOSTON	0	N/A	6269342
100000309	Tina Brown	12/23/1999	07/15/2020	TB_ACTIVE	SUSPECT	07/15/2020					BOSTON	BOSTON	0	N/A	6276293
100000319	Sandra McLaren		06/04/2021	TB_ACTIVE	SUSPECT	06/04/2021					BOSTON	BOSTON	0	N/A	6455001
100000339	Mary Jones	08/16/1947	02/05/2021	TB_ACTIVE	SUSPECT	02/05/2021					BOSTON	BOSTON	0	N/A	6561861
100000354	Regina George	09/07/1989	07/15/2020	TB_ACTIVE	SUSPECT	07/15/2020					BOSTON	BOSTON	0	N/A	6680567
100000389	Maryann Wilson	06/16/1991	07/15/2020	TB_ACTIVE	SUSPECT	07/15/2020					BOSTON	BOSTON	0	N/A	7528485
100000955	Kitty Forman	07/20/1980	07/15/2020	TB_ACTIVE	SUSPECT	07/15/2020					BOSTON	BOSTON	0	N/A	11637132
100001043	Tuberculosis TB	06/15/1985	12/06/2021	TB_ACTIVE	SUSPECT						BOSTON	BOSTON	0	N/A	12172984
100001111	Patient Eight	12/07/1995	07/15/2020	TB_ACTIVE	SUSPECT	07/15/2020					BOSTON	BOSTON	0	N/A	12645898
100002975	Terry April2022_13631	06/22/1928	04/28/2022	TB_ACTIVE	CONFIRMED						BOSTON	BOSTON	0	N/A	20032482
100005719	n,mbn Kmbvn	01/01/1989	01/09/2024	TB_ACTIVE	SUSPECT	01/09/2024					BOSTON	FOXBOROUGH	0	N/A	190744259

Query returned 16 row(s) in 70 ms



DGP – Event Information Extract by Disease

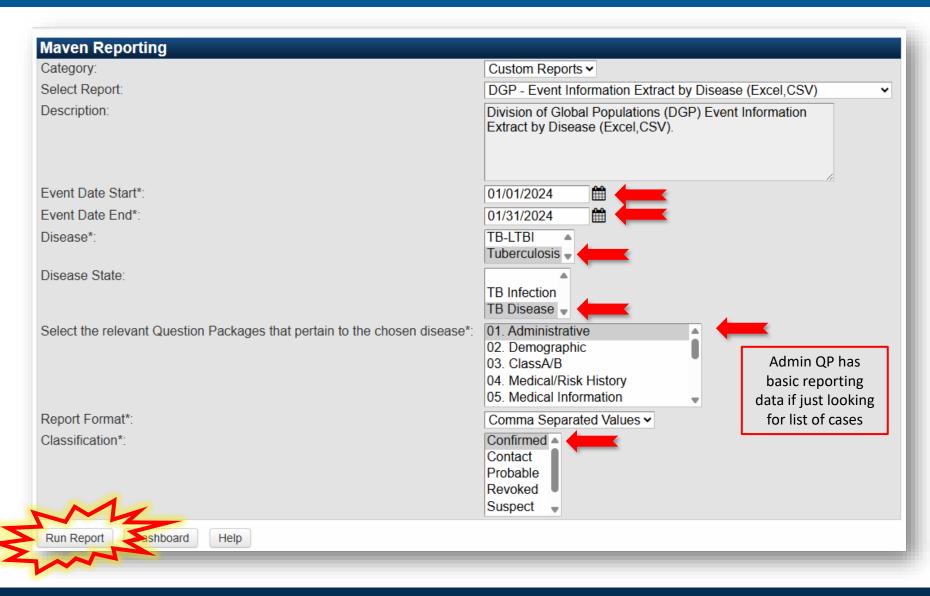


Once in Reports landing page:

- In "Category" select "Custom Reports"
- Choose the report in "Select Report"
- Enter the start and end date of the range you want to see
- Disease = Tuberculosis
- Disease State = depends on which cases you are looking for
- Select the question packages you would like to run (limit to only ones with info desired)
- Classification = depends on which cases you are looking for
- Click "Run Report"

Example 1:

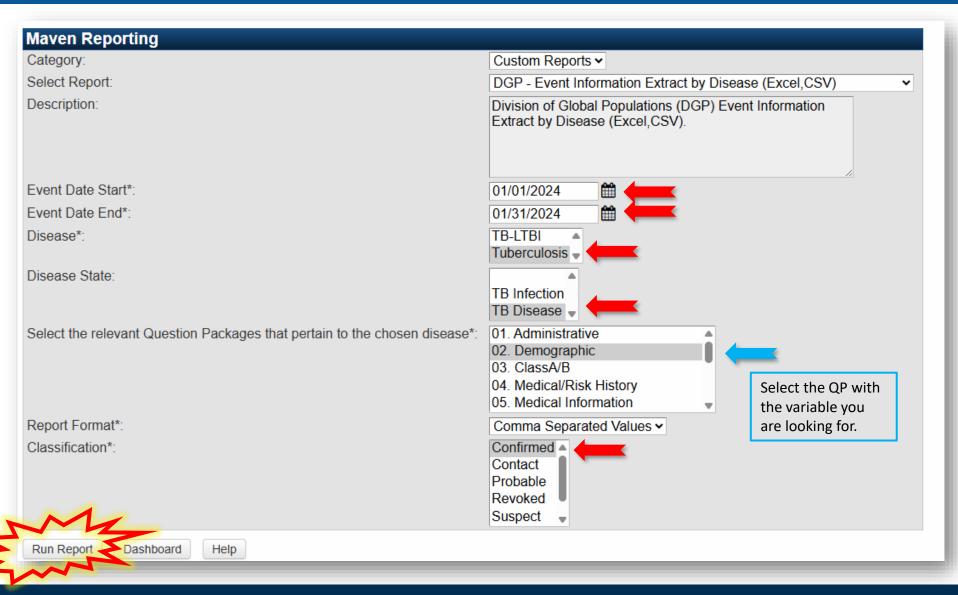
I would like to know my active cases from January 2024!



Example 2:

I would like to know THE

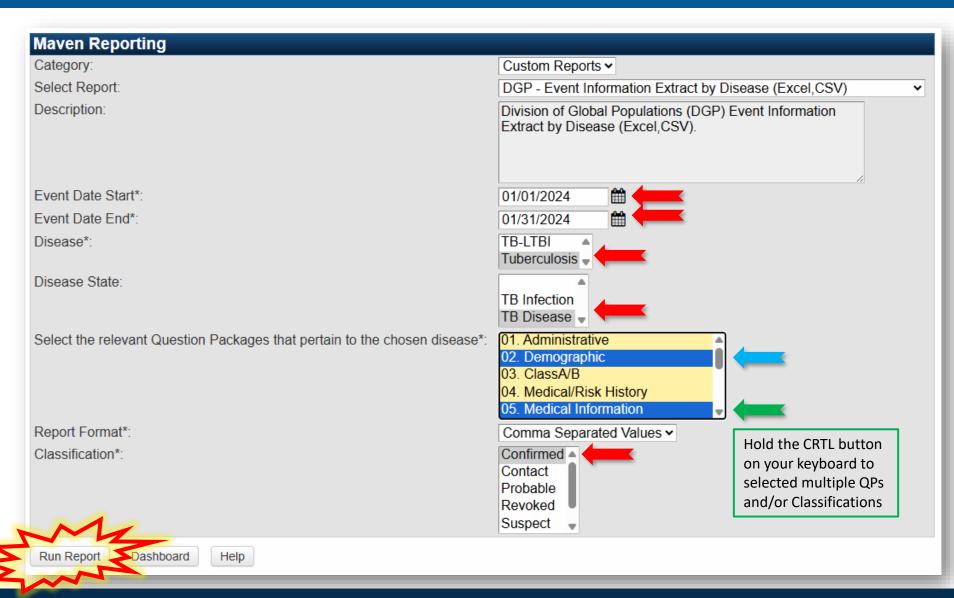
AGES of all my active cases from January
2024!



Multiple QPs and Classifications can be selected!

Example 3:

I would like to know THE AGES and CXR RESULTS of all my active cases from January 2024!



This report downloads as a .CSV file which can then be opened using Microsoft Excel

\mathbf{A}	Α	В	С	D	Е	F	G	Н	1	J	K	L	М
1	CaseID	Disease State	Disease Classification Status	Event Date	Create Date	First Name	Middle Name	Last Name	County	DISEASE	DISEASE_STATUS	ATS_CLASSIFICATION	CHEST_X_RAY_AT_DIAGNO
2	100000001	TB_DISEASE	CONFIRMED	1/1/2024	8/28/2023	Name1	MName1	LName1	Your County	TB_ACTIVE	CONFIRMED		Diagnostic
3	100000002	TB_DISEASE	CONFIRMED	1/4/2024	12/15/2023	Name2	MName2	LName2	Your County	TB_ACTIVE	CONFIRMED		Diagnostic
4	100000003	TB_DISEASE	CONFIRMED	1/5/2024	1/5/2024	Name3		LName3	Your County	TB_ACTIVE	CONFIRMED	ACTIVE_TB_CURRENT	
5	100000004	TB_DISEASE	CONFIRMED	1/11/2024	12/26/2023	Name4	MName4	LName4	Your County	TB_ACTIVE	CONFIRMED		Diagnostic
6	100000005	TB_DISEASE	CONFIRMED	1/11/2024	12/28/2023	Name5	MName5	LName5	Your County	TB_ACTIVE	CONFIRMED		Diagnostic
7	100000006	TB_DISEASE	CONFIRMED	1/13/2024	1/3/2024	Name6		LName6	Your County	TB_ACTIVE	CONFIRMED	ACTIVE_TB_CURRENT	Diagnostic
8	100000007	TB_DISEASE	CONFIRMED	1/13/2024	12/29/2023	Name7	MName7	LName7	Your County	TB_ACTIVE	CONFIRMED		Diagnostic
9	100000008	TB_DISEASE	CONFIRMED	1/16/2024	1/5/2024	Name8		LName8	Your County	TB_ACTIVE	CONFIRMED		Diagnostic
10	100000009	TB_DISEASE	CONFIRMED	1/17/2024	1/3/2024	Name9	MName9	LName9	Your County	TB_ACTIVE	CONFIRMED		Diagnostic
11	100000010	TB_DISEASE	CONFIRMED	1/19/2024	12/10/2023	Name10		LName10	Your County	TB_ACTIVE	CONFIRMED		Diagnostic
12	100000011	TB_DISEASE	CONFIRMED	1/22/2024	12/27/2023	Name11	MName11	LName11	Your County	TB_ACTIVE	CONFIRMED	ACTIVE_TB_CURRENT	Diagnostic
13	100000012	TB_DISEASE	CONFIRMED	1/22/2024	12/5/2023	Name12		LName12	Your County	TB_ACTIVE	CONFIRMED		Diagnostic
14	100000013	TB_DISEASE	CONFIRMED	1/22/2024	11/28/2023	Name13	MName13	LName13	Your County	TB_ACTIVE	CONFIRMED		Diagnostic
15	100000014	TB_DISEASE	CONFIRMED	1/23/2024	12/9/2023	Name14	MName14	LName14	Your County	TB_ACTIVE	CONFIRMED		Diagnostic
16	100000015	TB_DISEASE	CONFIRMED	1/26/2024	1/26/2024	Name15	MName15	LName15	Your County	TB_ACTIVE	CONFIRMED		Diagnostic
17	100000016	TB_DISEASE	CONFIRMED	1/31/2024	12/29/2023	Name16		LName16	Your County	TB_ACTIVE	CONFIRMED		Diagnostic
18		=											
19													
20													

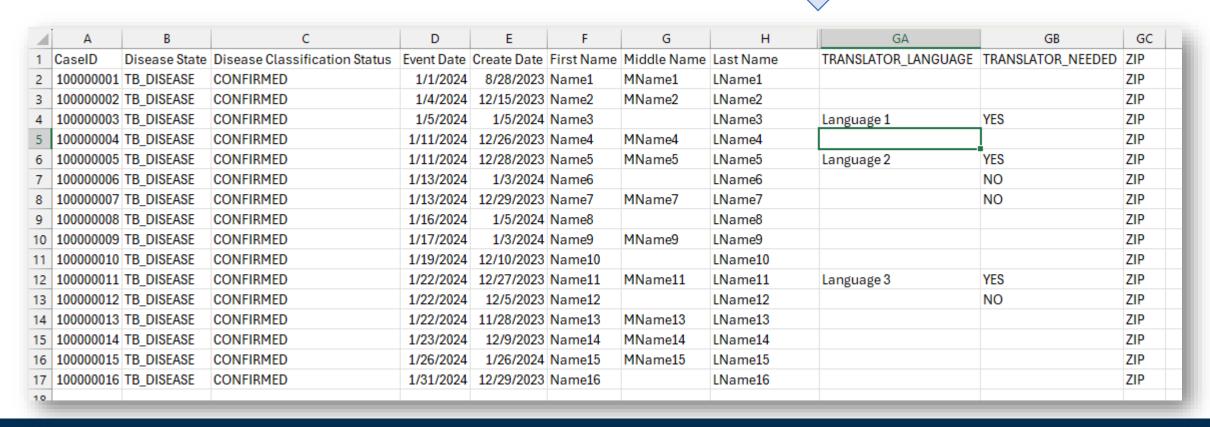
TIP: Know what information you are looking for and select the QPs accordingly since the report gives every variable in each selected QP meaning the .CSV file can

So many hidden

columns!!!

get very large

Example 3: 2 QPs = 185 Columns



TIP: Each column corresponds to a variable in the selected QP with the header row showing the variable name. The variables are listed in <u>alphabetical order</u> instead of the order they appear in the QP.

Example 3: I needed columns A, AL-AP and EF to get what I was looking for

4	Α	AL	AM	AN	AO	AP	EF	GE
1	CaseID	CHEST_X_RAY_RESULT_0	CHEST_X_RAY_RESULT_1	CHEST_X_RAY_RESULT_2	CHEST_X_RAY_RESULT_3	CHEST_X_RAY_RESULT_4	AGE	
2	100000001	ABNORMAL_NONCAVITARY	ABNORMAL_NONCAVITARY				8	
3	100000002	ABNORMAL_NONCAVITARY	ABNORMAL_NONCAVITARY	ABNORMAL_NONCAVITARY	ABNORMAL_NONCAVITARY		46	
4	100000003	NORMAL	NORMAL				25	
5	100000004	NORMAL					59	
6	100000005	NORMAL					29	
7	100000006	ABNORMAL_NONCAVITARY	ABNORMAL_CAVITARY	ABNORMAL_NONCAVITARY	ABNORMAL_NONCAVITARY	ABNORMAL_NONCAVITARY	22	
8	100000007	NORMAL					71	
9	100000008	ABNORMAL_CAVITARY					30	
10	100000009	ABNORMAL_CAVITARY	ABNORMAL_NONCAVITARY	ABNORMAL_NONCAVITARY			29	
11	100000010	NORMAL					24	
12	100000011	ABNORMAL_NONCAVITARY	ABNORMAL_NONCAVITARY	ABNORMAL_NONCAVITARY			33	
13	100000012	ABNORMAL_CAVITARY					15	
14	100000013	ABNORMAL_NONCAVITARY					65	
15	100000014	ABNORMAL_NONCAVITARY	ABNORMAL_NONCAVITARY				19	
16	100000015	ABNORMAL_NONCAVITARY					86	
17	100000016	ABNORMAL_NONCAVITARY	ABNORMAL_NONCAVITARY	ABNORMAL_NONCAVITARY			36	
18								_



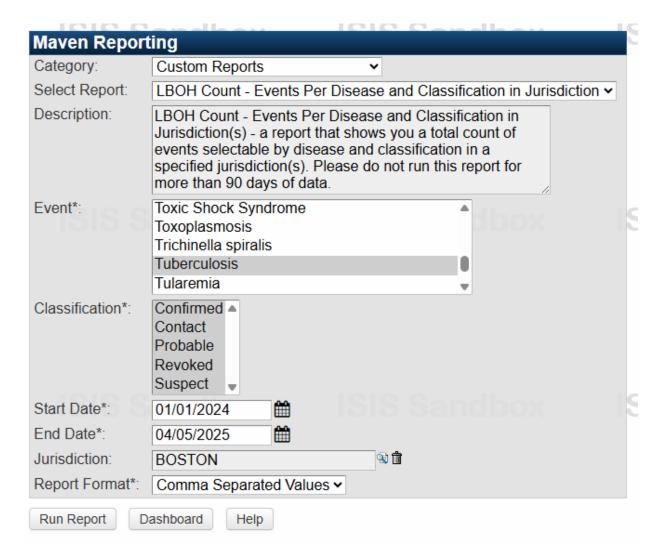
Provides aggregate case total by classification and jurisdiction

Not TB specific, all diseases included but for TB it

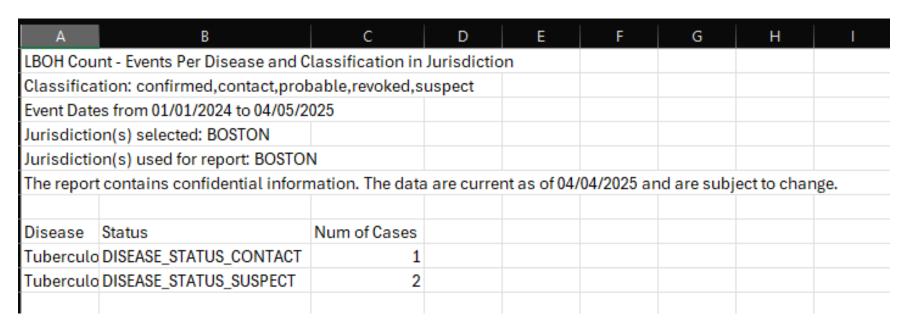
does NOT separate between TB Disease and TB Infection

Once in Reports landing page:

- In "Category" select "Custom Reports"
- Select this report in "Select Report"
- Choose "Tuberculosis" in "Event"
- Choose which classification you want to see (multiple can be selected"
- Enter the Date Range
- Enter your jurisdiction
- Click "Run Report"



Report will download as a .CSV file which can be opened using Microsoft Excel



Shows aggregate number of cases for each classification but does not separate Infection Vs. Disease

This example report shows 2 suspect cases but does not say whether they are TB Disease Suspect or TB Infection Suspect

The report	contains confidential inforn	nation. The data	are current a
Disease	Status	Num of Cases	
Tuberculo	DISEASE_STATUS_CONTACT	1	
Tuberculo	DISEASE_STATUS_SUSPECT	(2	

Important to remember because it may give a result of with multiple CONFIRMED cases which does not mean the town has that many active TB cases

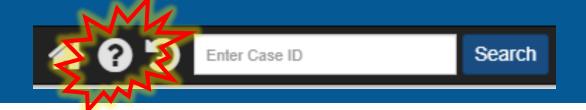
For list of cases with disease state (Disease vs. Infection), run either of the two previous reports shown.



Massachusetts Department of Public Health

MAVEN Help

MAVEN Help



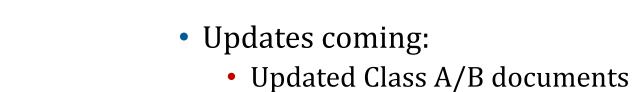
Tuberculosis and New Arrivals

Health (DGPIDP)

Global Populations and Refugee Resources (Includes Tuberculosis(TB))



- Current useful TB/DGP resources:
 - Presentations on Class A/B
 - B guidance documents
 - Tuberculosis Presentation
 - DOT presentation
- Outdated resources:
 - Ukraine/U4U information
 - Program no longer running
 - Potentially outdated MAVEN presentations



- VOLAG List
- Updated DOT documents
- Tip Sheets:
 - Sputum collection diagram
 - List of TB Clinics
 - Risk Assessment Form
 - Pink Card/TB Testing Record
 - THIS PRESENTATION ☺



MDPH Division of Global Populations: Tuberculosis

- Questions related to Tuberculosis casework and Class A/B arrivals can go directly to the TB Program:
 - TB Email: <u>BIDLS-TBGeneral@mass.gov</u>
 - TB Program Phone: (617) 983-6970
 - TB Program Fax: (617) 887-8791
 - Check Your Town's Communication Event in MAVEN. Listed under MDPH Support Staff for LBOH TB Case Management
- Questions related to Tuberculosis reports and MAVEN in general can go directly to DSAI:
 - MAVEN Help Desk: <u>mavenhelp@mass.gov</u>
 - DSAI Phone: (617) 983-6801
 - DSAI Fax: (617) 887-8789

Additional resources

- TB information for your Patients in English and other languages
 - https://www.mass.gov/lists/tb-information-for-your-patients-in-english-and-other-languages
- TB Centers of Excellence for Training, Education, and Medical Consultation
 - Rutgers Global TB Center: https://globaltb.njms.rutgers.edu/
- CDC Division of Tuberculosis Elimination
 - https://www.cdc.gov/tb/default.htm
 - Continuing education modules, including case management
- CDC's Health education materials for patients
 - https://www.cdc.gov/tb/education/patient_edmaterials.htm
- Updated Technical Instructions for Panel Physicians
 - https://www.cdc.gov/immigrant-refugee-health/hcp/panel-physicians/tuberculosis.html

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Thank you!

Questions?

