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|  | The Commonwealth of Massachusetts  Executive Office of Health and Human Services  Department of Public Health  William A. Hinton State Laboratory Institute  305 South Street, Jamaica Plain, MA 02130  Bureau of Infectious Disease and Laboratory Sciences | |  |
| CHARLES D. BAKER  Governor  KARYN E. POLITO  Lieutenant Governor | Division of Global Populations and Infectious Disease  Tuberculosis Prevention Program  617-983-6970  [www.mass.gov/dph](http://www.mass.gov/dph) | MARYLOU SUDDERS  Secretary  MONICA BHAREL, MD, MPH Commissioner | |

**Clinical Advisory**

A **Consensus statement on the use of Cepheid Xpert MTB/RIF® assay in making decision to discontinue airborne infection isolation in healthcare settings** was recently published [[http://www.tbcontrollers.org/resources/airborne-infection-isolation/](http://www.tbcontrollers.org/resources/airborne-infection-isolation/#.V0XzuDXR-M8)]. The statement was developed by the National Tuberculosis Controllers Association (NTCA) and the Association of Public Health Laboratories (APHL) to provide guidance for physicians, nurses, hospital epidemiologists and infection preventionists on the use of the U.S. Food and Drug Administration (FDA)-approved Cepheid Xpert MTB/RIF® (GeneXpert) Nucleic Acid Amplification (NAA) test when making decisions to discontinue airborne infection isolation (AII) for persons with suspected infectious pulmonary tuberculosis (TB). The NTCA-APHL statement was developed to provide clarity and specificity to current FDA-approved labeling that we believe to be essential to the proper performance of the test and to its interpretation in this context.

Several points must be emphasized:

1. This statement applies to the GeneXpert and its labeling change recently approved by the FDA.
2. The labeling change applies only to sputum.
3. Sputum quality is critical to the performance of this test. The statement includes protocols for collecting sputum from patients suspected of having infectious pulmonary TB.
4. The statement and attached algorithm apply only to making decisions about the discontinuation of AII in institutionalized persons suspected of having infectious pulmonary tuberculosis. It is not to be used in discharge planning decisions or to monitor sputum of known TB patients.

This statement can be used to guide patient isolation policies and procedures, but the stipulations spelled out in the guidance should be followed carefully.

Instructions on reporting TB in Massachusetts for health care providers is available at <http://www.mass.gov/eohhs/gov/departments/dph/programs/id/tb/instructions-for-reporting-tuberculosis-tb-in-mass.html>.

We hope you find this information useful.