

**Texas Department of State Health Services**  
**<<Health Service Region\_\_or Local Health Department>>**  
**Standing Delegation Orders and Standing Medical Orders**  
**Tuberculosis Prevention and Control Services**  
**Provided by Registered Nurses and Licensed Vocational Nurses**

I. Definitions

- A. Standing delegation orders (SDO) are defined as written instructions, orders, rules, regulations or procedures prepared by a physician and designed for a patient population with specific diseases, disorders, health problems or sets of symptoms. These instructions, orders, rules, regulations, or procedures are to provide authority for and a plan **for use with patients presenting themselves prior to being examined or evaluated by a physician to ensure that such acts are carried out correctly** and are distinct from specific orders written for a particular patient, and shall be limited in scope of authority delegated.
- B. Standing medical orders (SMO) are defined as orders, rules, regulations or procedures prepared by a physician or approved by a physician or the medical staff of an institution **for patients which have been examined or evaluated by a physician and which are used as a guide in preparation for and carrying out medical and/or surgical procedures.** These orders, rules, regulations or procedures are authority and direction for the performance for certain prescribed acts for patients by authorized persons, as distinguished from specific orders written for a particular patient.

II. Purpose

These standing delegation orders/standing medical orders are provided for <<Department of State Health Services or local health department name>> registered nurses and licensed vocational nurses providing services in <<Health Service Region\_\_\_\_or local health department service area>>, under the medical supervision of the <<regional director or local medical director>>. All staff authorized to use these orders will review the SDO/SMO and sign a cover sheet annually. The SDO/SMO and the signature sheets will be retained by the agency for 25 years. It is the intent of all parties involved that the procedures done through them are in conformity with the Texas Medical Practice Act, the Texas Nurse Practice Act, and rules promulgated under those acts.

III. Policy

Under these standing orders, eligible nurses working within their scope of practice may evaluate and treat patients who are suspected of having TB infection or disease

- IV. Process for development of these standing delegation orders/standing medical orders
- A. Initially written and reviewed annually by staff at the Department of Health Services (DSHS) Tuberculosis Services Branch
  - B. Reviewed by TB expert physician(s) who are recognized by the DSHS Tuberculosis Services Branch
  - C. Reviewed and approved by the DSHS Infectious Diseases Medical Officer
  - D. Sent electronically to DSHS regional TB program managers and local health department TB programs as a template for regional or local health department use, once approved by the Regional Medical Director or local health department physician
- V. Requirements for eligible registered nurses and licensed vocational nurses performing these orders
- A. Be an employee (or contractor) of the health department responsible for the care of the patient
  - B. Have a current, valid nursing license (RN or LVN) from the Texas Board of Nursing
  - C. Receive training in accordance with appropriate clinical procedures and standards
  - D. Receive initial and annual performance evaluations by the nurse's supervisor that document the nurse's ability to carry out these orders in the customary manner. Contractors shall receive initial and periodic monitoring by a designated health department nurse responsible for TB services to document the nurse's ability to carry of these orders in the customary manner.
  - E. Maintain detailed medical records on each patient, including, but not limited to
    - Nursing care delivered on each patient visit
    - Actions carried out under the SDO/SMO
    - Drugs or medications administered, provided or observed to be taken by the patient
    - Review of the patient plan of care with the treating physician at a minimum of every 3 months while the patient is under care
- VI. Place of service and method of contacting the treating physician
- A. Authorized personnel can provide services under the SDO/SMO in the patient's home, in the clinic setting, or other field settings when a process for contacting the treating physician has been established by the health department
  - B. Nurses that provide services using these orders should contact the treating physician through the established process when medical direction or consultation is needed, when patient assessment data indicates deviations from normal limits, or as specified in any individual standing order. In an emergency situation, the authorized nurse is to call 911, provide first aid services, and contact their supervisor and/or the treating physician.

VII. The nurse must be familiar with and able to readily access the following documents

A. CDC documents can be found at: <http://www.cdc.gov/tb/publications/guidelines/Testing.htm>

- National Shortage of Purified-Protein Derivative Tuberculin Products MMWR 2013; 62 (No. 16)
- Recommendations for Use of an Isoniazid–Rifapentine Regimen with Direct Observation to Treat Latent Mycobacterium tuberculosis Infection MMWR 2011;60:1650–1653
- Updated Guidelines for Using Interferon Gamma Release Assays to Detect Mycobacterium tuberculosis Infection — United States, 2010 MMWR 2010; 59 (RR-5); 1-25
- Plan to Combat Extensively Drug-Resistant Tuberculosis MMWR 2009; 58 (RR-03)
- Updated Guidelines for the Use of Nucleic Acid Amplification Tests in the Diagnosis of Tuberculosis MMWR 2009; 58 (01); 7-10
- Guidelines for the Prevention and Treatment of Opportunistic Infections Among HIV-Exposed and HIV-Infected Children MMWR 2009; 58: 1-166
- Guidelines for Prevention and Treatment of Opportunistic Infections in HIV-Infected Adults and Adolescents MMWR 2009; 58: 1-198
- Notice to Readers: Updated Guidelines on Managing Drug Interactions in the Treatment of HIV-Related Tuberculosis MMWR 2008; 57 (No. 04, 98)
- Prevention and Control of Tuberculosis in Correctional and Detention Facilities: Recommendations from CDC MMWR 2006; 55 (No. RR–09, 1–44)
- Guidelines for Using the QuantiFERON-TB Gold Test for Detecting Mycobacterium tuberculosis Infection, United States MMWR 2005; 54 (No. RR-15, 49-55)
- Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005 MMWR 2005; 54 (No. RR-17)
- Guidelines for the Investigation of Contacts of Persons with Infectious Tuberculosis: Recommendations from the National Tuberculosis Controllers Association and CDC MMWR 2005; 54 (No. RR-15, 1-37)
- Controlling Tuberculosis in the United States Recommendations from the American Thoracic Society, CDC, and the Infectious Diseases Society of America MMWR 2005; 54 (No. RR-12)
- Guide to the Application of Genotyping to Tuberculosis Prevention and Control (June 2004)
- Notice to Readers: Updated Guidelines for the Use of Rifamycins for the Treatment of Tuberculosis Among HIV-Infected Patients Taking Protease Inhibitors or Nonnucleoside Reverse Transcriptase Inhibitors MMWR 2004; 53 (No. 2)
- Tuberculosis Associated with Blocking Agents Against Tumor Necrosis Factor - Alpha California, 2002–2003 - MMWR 2004; 53 (No. 30)
- Treatment of Tuberculosis MMWR 2003; 52 (No. RR-11)
  - MMWR: Errata: Treatment of Tuberculosis (Vol. 52, No. RR-11)
- Guidelines for Environmental Infection Control in Health-Care Facilities MMWR 2003; 52 (No. RR-10)
- Progressing Toward Tuberculosis Elimination in Low-Incidence Areas of the United States MMWR 2002; 51 (No. RR-5)
- Preventing and Controlling Tuberculosis Along the U.S.-Mexico Border Work Group Report MMWR 2001; 50 (No. RR-1)
- Targeted Tuberculin Testing and Treatment of Latent Tuberculosis Infection MMWR 2000; 49 (No. RR-6) and Update
  - Update: Adverse Event Data and Revised American Thoracic Society/CDC Recommendations Against the Use of Rifampin and Pyrazinamide for Treatment of Latent Tuberculosis Infection MMWR 2003; 52 (No. 31)
- Diagnostic Standards / Classification of TB in Adults and Children Am J Respir Crit Care Med 2000; 161

- Recommendations for Prevention and Control of Tuberculosis among Foreign-Born Persons MMWR 1998; 47 (No. RR-16)
- Essential Components of a Tuberculosis Prevention and Control Program (ACET) MMWR 1995; 44 (No. RR-11)
- Screening for Tuberculosis and Tuberculosis Infection in High-Risk Populations (ACET) MMWR 1995; 44 (No. RR-11)
- Tuberculosis Control Laws - United States, 1993. MMWR 1993; 42 (No. RR-15)
- Recommendations of the Advisory Committee on Immunization Practices (ACIP): Use of Vaccines and Immune Globulins in Persons with Altered Immunocompetence MMWR 1993; 42 (No. RR-4)
- Prevention and Control of Tuberculosis in Migrant Farm Workers (ACET) MMWR 1992; 41 (No. RR-10)
- Prevention and Control of Tuberculosis Among Homeless Persons (ACET) MMWR 1992; 41 (No. RR-5)
- Prevention and Control of Tuberculosis in Facilities Providing Long-Term Care to the Elderly MMWR 1990; 39 (No. RR-10)

#### B. Other References

- An Official ATS Statement: Hepatotoxicity of Antituberculosis Therapy, Am J Respir Crit Care Med, Vol 174. pp 935-952, 2006. Available at: <http://www.thoracic.org/statements/resources/mtpi/hepatotoxicity-of-antituberculosis-therapy.pdf>
- Core Curriculum on Tuberculosis: What the Clinician Should Know, 6<sup>th</sup> Edition, (CDC) 2013. Available at: [http://www.cdc.gov/tb/education/corecurr/pdf/corecurr\\_all.pdf](http://www.cdc.gov/tb/education/corecurr/pdf/corecurr_all.pdf)
- Drug Information on Antituberculosis Drugs, PDR. Available at: [http://www.pdrhealth.com/drug\\_info/index.html](http://www.pdrhealth.com/drug_info/index.html)
- Targeted Tuberculin Skin Testing and Treatment of Latent Tuberculosis Infection in Children and Adolescents, Pediatrics, Vol. 114, No. 4, October 2004. Available at: [http://pediatrics.aappublications.org/content/114/Supplement\\_4/1175.full](http://pediatrics.aappublications.org/content/114/Supplement_4/1175.full)
- Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health Care Settings, MMWR 2006;55 (No.RR-14). Available at: <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm>
- Recommendations for Human Immunodeficiency Virus (HIV) Screening in Tuberculosis (TB) Clinics Fact Sheet. Available at: <http://www.cdc.gov/tb/publications/factsheets/testing/HIVscreening.htm>

#### VIII. Consultations/Notifications

##### A. Consult a DSHS-recognized expert TB physician any time a 2<sup>nd</sup> line medication is indicated or if the treating physician has concerns

##### B. Notification of the treating physician of concerns should include, but not be limited to

- Signs or symptoms suggestive of active tuberculosis
- Indeterminate, borderline, or otherwise un-interpretable tuberculosis screening test results
- Female patient that is or has become pregnant

- Abnormal screening or other laboratory/radiographic test results

## IX. Listing of Services

- A. Service #1: Patient Assessment, Education, and Screening Procedures
- B. Service #2: Nursing Management of Persons Infected with Mycobacterium tuberculosis (LTBI) or Contacts Requiring Window Prophylaxis
- C. Service #3: Nursing Management of Persons On Treatment For LTBI With INH-RPT By DOT, Once Weekly For 12 Weeks
- D. Service #4: Nursing Management of Persons with or Suspected to have Mycobacterium tuberculosis Disease (Pulmonary and/or Extrapulmonary Disease)
- E. Service #5: Targeted Testing for TB (Tuberculin Skin Test and Interferon-Gamma Release Assays)