

Texas' **standard of care for TB treatment** is community-based directly observed therapy (DOT). TCID patients are persons with the most complicated tuberculosis cases identified through its referral sources. TCID treats 4-6% of patients with TB in Texas who need hospitalization and cases referred from other locales.

TCID is a resource to **accept patients from other states** and welcomes transfers. MOA is required. TCID is Texas' designated hospital for **court ordered (quarantined) TB treatment** where a patient's non-adherence with TB medication regimens has proven to be a threat to public health or safety. All patients currently being treated at TCID for **Hansen's disease** are seen in the outpatient clinic, one of four clinics statewide that are contracted through DSHS for these patients. The complications of Hansen's disease require continued, regular outpatient visits for the remainder of the patient's life.

While **TCID is a free-standing hospital, twenty-five (25)** administrative, support and clinical functions are **shared** among the 15 occupants on this large state-owned campus.

Electronic Health Record: Twelve (12) software systems are integrated into the clinical patient record.

Pharmacy: Single campus license in Central Pharmacy, Pyxis distribution system, and MEDIMAR and WORx software.

Radiology: On-site digital imaging and PACS linked to UTHSC-SA, Department of Radiology

Acute hospitalization, surgery, interventional testing, and many outpatient services are contracted:

- UTHSC-Tyler Clinical Center and Hospital
- University Health System-San Antonio
- UT Medicine-San Antonio, UTHSC-SA
- Cancer Treatment and Research Center-San Antonio
- Baptist Health System-San Antonio
- San Antonio State Hospital: Inpatient Psychiatry, Dental
- Methodist Healthcare System-San Antonio.

CONSTRUCTION

Construction is complete for the **replacement 75-bed hospital, the largest new construction in the US in the last fifty years for the purpose of inpatient care and treatment for TB patients and the largest concentration of air-isolation, private patient rooms in one civilian US location.** Renovations will continue on existing buildings and the campus until August 2013.

Fences, electronic keying, and gate control access to the campus, allowing privacy but not necessarily restricting patients in an area. Each new patient room is private, large, air-isolated to 12 air changes per hour, and has private toilet/shower. Energy conservation measures are installed in utility systems. Four day rooms, large TV's, walking trail, and outside patios are fenced for patient use. Recreation, radiology, physical fitness, laboratory, cardiopulmonary care and dining are in one of three other buildings contiguous on the campus.

Total cost of new construction, fees, equipment, and renovations to existing buildings was **\$34M**. Cost to build the **new 60,000 square foot patient care facility** was **\$26.7M**. All new patient care furnishings and equipment were purchased for the new facility.

DSHS Hospital Construction Manager: David McCormick

Contract Manager: Texas Facilities Commission

Financing: Texas Public Financing Authority

Architects/Engineers: O'Connell-Robertson and Associates, Inc., Austin and San Antonio

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**TEXAS CENTER
FOR
INFECTIOUS
DISEASE**



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TEXAS CENTER FOR INFECTIOUS DISEASE-DEDICATED TO THE TREATMENT AND ELIMINATION OF TB

The **State Tuberculosis Hospital** opened in 1953 to care for patients from Central and South Texas. By 1959, the 958 bed State TB Hospital was the largest among the 21 TB sanatoria in Texas and one of the largest TB sanatoria in the US. But the needs for tuberculosis hospital care in the US diminished with the introduction of more effective antibiotic therapy that could be managed on an outpatient basis. So, most of the TB sanatoria in Texas closed during the 1960's and 1970's. The hospital was re-designated as the **San Antonio State Chest Hospital**, and in February 1972, its mission was changed to include inpatient and outpatient treatment for chronic respiratory disease. In 1978, treatment of other medical and surgical disorders referred from **Texas Department of Health** affiliates was undertaken. At the same time, many of the original buildings were transferred to be used for the San Antonio State School (now organized in the **Department of Adult and Disability Services** and renamed the **San Antonio State Supported Living Center**).

Medicare-certification (LTAH) and Joint Commission accreditation (Hospital) have been required since the mid-1980's. TCID is currently fully Joint Commission accredited and Medicare certified.

In 1994, the Legislature approved a name change designating the facility the **Texas Center for Infectious Disease** and included TCID in the Texas Department of Health (now organized in the **Department of State Health Services**).

Decisions were required about TCID's future. In 1998, the State Legislature authorized the Health Department to plan and construct or renovate patient care facilities, to contract with the **University of Texas System** for medical management and acute hospitalization by the **University of Texas Health Science Center at Tyler**, and to transfer of a re-

search laboratory to **UTHSC-San Antonio**. The **Heartland National TB Center** also developed from this legislation. It was first funded by CDC to DSHS and UTHSC-Tyler in 2005. As a partner in the grant, TCID provides in-kind facility and support services for the Heartland Center.



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TCID's **\$9.7M** annual operating budget is appropriated from state revenues; collections for patient services and other revenues beyond approved expenses flow to the Agency. The **all-inclusive daily rate** for TCID services is currently **\$849** (10-01-12/09-30-13).

KEY LEADERSHIP

DSHS Commissioner: David Lakey, MD, MPH
Assistant Commissioner: Mike Maples
Section Director: Peggy Perry
Hospital Superintendent: Jim Elkins, FACHE
Director of Nursing: Rebecca O. Sanchez, RN, MPH

The University of Texas Health Science Center at Tyler (UTHSC-Tyler):
Medical Director: Dr. David Griffith
Attending Physicians: Drs. Lynn Horvath and Adriana Vasquez

Heartland National TB Center (HNTC): TCID provides in-kind support, clinical facilities, information and communication services, and space.

Director and Lead Consultant: Dr. Barbara Seaworth
Consultant: Dr. Lisa Armitige
Executive Director: Stephanie Ott

The University of Texas Health Science Center at San Antonio (UTHSCSA):
Medical Director, Radiology: Dr. Kenneth Kist, UTHSCSA
UT Medicine, UTHSCSA: Specialty consultations

Clinical Pathology Associates, Austin and San Antonio
Medical Director, Laboratory: Dr. Donald Warden
Technical Lead: Judy Larsen, Austin State Hospital Regional Laboratory

KEY POINTS ABOUT TREATMENT AT TCID

From Fiscal 2000-2010, just over 1100 patients were treated at TCID. 6% of those patients were admitted with MDRTB (64) or XDRTB (2). 80% of TCID inpatients are voluntary admissions. The TCID staff is experienced in treating patients referred from other states, from many cultural and ethnic origins, and with complicating conditions.

Patient Care is interdisciplinary, directed through licensed Attending and Consulting Physicians, Nurses, Psychologist, Social Workers, Substance Abuse Counselor, Chaplains, Cardiopulmonary and Clinical Dietetics professionals and support staff.

All new patients are isolated until laboratory studies prove each person is not contagious. Extensive outside spaces and recreation opportunities are provided for patients to use and for planned activities.

Success is measured as "treatment to cure", "treatment until safe to return to community-based therapy", and "treatment so a person never needs to return". Almost all patients' treatment at TCID is successful by these criteria unless the patient concludes treatment without medical advice. **Inpatient** stays are from **3 months to 2+ years**.