

**Omaha DP&C workgroup  
Meeting Summary  
June 24, 2013**

Participants: Clyde Swenson (Stearns), Geri Greeley (Dakota), Sharon Traen (Dakota), Jen Harman (Nicollet), Desiree Holmquist (Anoka), Noreen Kleinfehn Wald (Scott), Diane Thorson (Ottertail), Linda Westby (Ottertail), Jessica Metzger (Ottertail), Linda Haeussinger (Olmsted), Catherine Main (Wright), Nadya Sabuwala (MDH), Mo Alms (MDH), Julia Ashley (MDH), Linda Bauck (MDH),

Recorder: Linda

Agenda Item	Discussion	Follow-up
<p>Discussion of the draft active TB pathway: based on identified revisions from the April 26 meeting and evidence gathered</p>	<ol style="list-style-type: none"> <li>1. Mo lead discussion about the draft active TB pathway sent to participants prior to today's meeting. Discussion with ideas for revisions was completed through the row named, "Surveillance, Signs/Symptoms – Mental/Emotional.</li> <li>2. There was discussion about whether pathways should be developed for both pulmonary and extrapulmonary TB. It was decided that:               <ul style="list-style-type: none"> <li>• The Workgroup will finish the active TB pathway focusing on pulmonary TB.</li> <li>• After this work is complete, the pathway will be reviewed considering extrapulmonary TB and where it would fit in to the pathway.</li> </ul> </li> </ol>	<ol style="list-style-type: none"> <li>1. Mo, Nadya and Linda will meet to incorporate the changes discussed in to the draft pathway.</li> <li>2. An updated draft will be sent to workgroup participants prior to the next meeting (to be scheduled via meeting wizard).</li> <li>3. The participants on today's call decided that Medication Regimen should be an identified problem in addition to "Communicable/Infectious Condition and the problem will begin where the discussion of the draft pathway left off. This will make the active TB pathway format consistent with the completed LTBI pathway.</li> <li>4. Once the active TB pathway for pulmonary TB is completed, there will be a review of it thinking about extra pulmonary TB and whether there needed to be unique features added to the pathway reflecting extra pulmonary TB.</li> </ol>

	<ul style="list-style-type: none"> <li>• Evidence and additional bullet items may be added.</li> <li>• “Other labs tests” for additional extrapulmonary TB testing may need to be added.</li> <li>• Other organs affected by TB and any needed interventions would also be added as needed.</li> </ul>	
The LTBI Pathway Communication	The LTBI pathway is being brought for discussion to the Omaha Systems Guidelines workday on July 9, 2013 for possible certification. Please see Diane Thorson’s forwarded e-mail for a description of the goals for the July 9 meeting.	Any further communication of the LTBI pathway is “on hold” until after the July 9 meeting. Any decisions for additional communication about the LTBI pathway will be made after discussion at the September 2013 DP&C Workgroup meeting.
Next Meeting	<p><b>September 11, 2013 from 2:00 – 3:30 p.m.</b></p> <p><u>Conference Call #:</u></p> <p>Toll-free dial-in number: (888) 742-5095</p> <p>Conference code: 4271584560</p>	<p>Agenda items for the next meeting are:</p> <ol style="list-style-type: none"> <li>1. Continued discussion of the revisions and evidence for the active TB pathway.</li> <li>2. Report from those attending the July 9 Omaha Systems Guidelines workday.</li> <li>3. Any final details about communication of the LTBI pathway including the CHS mailbag and communication with Karen Martin (these two items are “left over” from the pathway communication plan developed at the January 30, 2013 meeting).</li> <li>4. Discussion of KBS rating system/inter rater reliability related to TB. The group will review Scott County’s work in this area.</li> </ol>