

State	Objective	PH Intervention	Legal Authorities
RI		<b>Definitions</b>	Active tuberculosis: (1) a sputum smear or culture taken from a pulmonary, laryngeal, or other source has tested positive for tuberculosis and the person has not completed an appropriate prescribed course of medication for tuberculosis, or (2) a smear or culture from an extra-pulmonary source has tested positive for tuberculosis and there is clinical evidence or clinical suspicion of pulmonary tuberculosis disease and the person has not completed an appropriate prescribed course of medication for tuberculosis. A person also has active tuberculosis when, in those cases where sputum smears or cultures are unobtainable, the radiographic evidence, in addition to current clinical evidence and/or laboratory tests, is sufficient to establish a medical diagnosis of tuberculosis for which treatment is indicated. (R.I. Gen. Laws §23-10-6(a)).
	<b>Prevention of TB Cases</b>	<b>TB Control Programs</b>	
	<b>Identification of TB Cases</b>	<b>Screening</b>	Every person upon entering any public or private school including any college or university in this state as a pupil shall furnish to the administrative head of the school evidence that the person has been immunized against any disease that may from time to time be prescribed by regulation of the director of health and tested for tuberculosis. (R.I. Gen. Laws §16-38-2)
		<b>Examination &amp; Testing</b>	The state department of health is empowered to make examinations of persons reasonably suspected of having a communicable disease; provided, however, that any person examined shall have the right to have a physician of his or her own choice present at that examination at his or her own expense. The state department of health shall inform him or her of this right and afford him, or her, a reasonable opportunity to exercise that right. (R.I. Gen. Laws §23-08-4.1).The department is hereby authorized and directed to use every available means to ascertain the existence of any dangerous, infectious, or contagious disease, among inmates, prisoners, patients, and pupils of those institutions and report the same to the department of health. (R.I. Gen. Laws §40.1-2-18; R.I. Gen. Laws §40-2-14).
<b>Reporting</b>		Any institution receiving public funds shall report any individual suffering from tuberculosis within 48 hours after recognition of that disease to state department of health. (R.I. Gen. Laws §23-10-1). Physicians must report any person he knows affected with tuberculosis to the state department of health (R.I. Gen. Laws §23-10-2).	

RI	<b>Management of TB Cases</b>	<b>Investigation</b>		
		<b>Treatment</b>	<b>Treatment</b>	
			<b>DOT</b>	
		<b>Specific Measures</b>	<b>Emergency Detention</b>	Where the director determines that the public health or the health of any other person is endangered by a case of tuberculosis, or a suspected case of tuberculosis, the director may issue any appropriate orders necessary to protect the public health and may apply to a court for enforcement of any those orders, which include: (1) removal and/or detention in a hospital or other treatment facility, (2) requirement to complete a course of medication, (3) directly observed therapy. (R.I. Gen. Laws §23-10-6(b)(1)-(5)). (See <u>Due Process</u> )
			<b>Quarantine</b>	If the state director of health determines that a threat to the public health exists because any person is suffering, or appears to be suffering, from a communicable disease, the director may require that person to be confined, in some proper place, for the purpose of isolation or quarantine, or another less restrictive intervention treatment until the threat to the public health has abated. Nothing in this section shall be construed to prevent a person who is unable or unwilling for reasons of health, religion, or conscience to undergo treatment from choosing to submit to quarantine or isolation as an alternative to treatment. A person subject to quarantine under this section shall be entitled to file a petition for relief from such order at any time. (R.I. Gen. Laws §23-08-4).
			<b>Isolation</b>	

		Activities Restricted	
		Enforcement	Any person who is confined by the director under (R.I. Gen. Laws §23-08-4) and who violates that confinement shall be punished by a fine or imprisonment or both. (R.I. Gen. Laws §23-08-7).

RI	Safeguarding Rights	Due Process	<p>After 2 licensed physicians (including at least one board certified pulmonary or infectious disease specialist) have certified the diagnosis of tuberculosis, the director may <b>detain</b> in a hospital or other place for examination or treatment <b>without prior court order</b> provided that when a person detained has requested release the director shall make application for a court order authorizing detention within 72 hours which shall include a request for an expedited hearing. Such a hearing shall be treated with priority on the court calendar. If, at the hearing, the court determines there is no <i>probable cause</i> to support detention, the director's petition shall be dismissed, his order vacated and the person dismissed unless he or she applies for voluntary admission to care and treatment. However, if the court finds <i>probable cause</i> to support the director's order, then it shall remain in full force and hearing procedures shall be effectuated. In any event, detention shall not continue for more than 5 business days in the absence of a court-order authorizing detention. The director shall seek further court review of the detention within 45 days following the initial court order, and subsequently within 45 days of each subsequent court review. Director shall prove the particularized circumstances constituting the necessity for detention by <i>clear and convincing evidence</i>. Any person who is subject to a detention order shall have the right to counsel and upon request by the person, counsel shall be provided by the court. The person subject to detention shall be entitled to file a petition for release at any time. A person detained under this section shall have the right to an appeal from a court order to the supreme court of the state within 30 days of the entry of an order of detention. R.I. Gen. Laws §23-10-6(c)).</p> <p><b>Detention</b> shall not be authorized until all less-restrictive alternatives have been tried and no less-restrictive alternative is available. (R.I. Gen. Laws §23-10-6(b)). An order for <b>removal or detention</b> in a hospital or other treatment facility includes (but is not limited to): (i) persons who have active tuberculosis that is infectious or who presents a <i>substantial likelihood</i> of having active tuberculosis that is infectious based upon epidemiologic evidence, clinical evidence, x-ray readings, or laboratory test results; and where the department finds, based on recognized infection control principles, that there is a substantial likelihood the person may transmit to others tuberculosis because of his or her inadequate separation from others; or ii) who has active tuberculosis, or who has been reported to the department as having active tuberculosis with no subsequent report to the</p>
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	<b>Burden of Proof</b>	During court hearings, the burden of proof is on the petitioner to provide by clear and convincing evidence that a court order for detainment is necessary. (R.I. Gen. Laws §23-10-6(h)) In emergency hearings arising under a detainment without prior court order, the burden is on the director to provide probable cause for the detainment to continue. (R.I. Gen. Laws §23-10-6(c))
	<b>Payment</b>	
	<b>Confidentiality and Privacy</b>	The state department of health shall have sole, exclusive custody of the register of all persons known in this state to be affected with tuberculosis, and shall not permit its inspection nor disclose any of its particulars except to officials authorized under the laws of this state to receive that information. (R.I. Gen. Laws §23-10-4).
	<b>Anti-Discrimination</b>	Where necessary, language interpreters and persons skilled in communicating with vision and hearing impaired individuals shall be provided. (R.I. Gen. Laws 1956, §23-10-6(i)).The director of health shall ensure that appropriate treatment, monitoring, and care for tuberculosis are made available for every individual who is isolated and confined and these services shall be provided with no restrictions as to the quarantined individual's ability to pay for those services. (R.I. Gen. Laws §23-10-6(l)).
	<b>Religious Exemptions</b>	No person, for religious reasons, may be compelled by the department of health to undergo treatment for tuberculosis as long as the individual is willing to place himself in an environment that excludes others from risk of acquiring tuberculosis. (R.I. Gen. Laws §23-10-6(k)).
<b>Special Populations</b>	<b>Considerations for Certain Populations</b>	In exercising the power and authority to provide the care and physical welfare of the inmates, prisoners, patients, and pupils in the several institutions under its control and for the protection of public health, the department of mental health, retardation, and hospitals shall furnish all necessary medical aid and attention, and shall take necessary steps to promote the health of the inmates, prisoners, patients, and pupils, and especially to guard them and the general public against all dangerous, infectious, and contagious diseases at those institutions. ( R.I. Gen. Laws §40.1-2-16) Every inmate, prisoner, patient or pupil in any of the institutions under the department's control, who has any dangerous, infectious or contagious disease shall be forthwith placed under medical treatment, and if in the opinion of the attending physician it is necessary, shall be isolated under danger of contagion has passed or until the attending physician determines further isolation is unnecessary; and if danger of contagion shall not have passed or if further isolation is still necessary at the expiration of sentence or at the time for discharge or release from the institution, the afflicted inmate, prisoner, patient or pupil shall be detained in the institution and continued under medical treatment until the attending physician determines his or her release will not endanger the public health. ( R.I. Gen. Laws §40.1-2-19; R.I. Gen. Laws §40-2-15.)
<b>Additional TB Provisions</b>		