

94-068

THE UNIVERSITY OF TEXAS
MD ANDERSON
CANCER CENTER

Division of Laboratory Medicine
Section of Clinical Microbiology/Box 73

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NIOSH Docket Office
Robert A. Taft Laboratories
Mail Stop C34
4676 Columbia Parkway
Cincinnati, Ohio 45226

Thank you for proposing respiratory protective device standards that realistically fit the health care setting (42 CFR, Part 84 Fed R Vol. 59, No. 99, pp. 26850-26893).

In most health care settings, the 95% filtration efficiency should provide adequate protection from tuberculosis. In a study of adolescents who lived with tuberculous parents (prolonged exposure), the conversion rate was 19%. In contrast, most health care contacts are brief. Nosocomial transmission has been associated only with situations where existing control measures were not followed. We believe that 99.5% filtration as achieved by some of the nylon membrane DMR should be adequate for TB respiratory protection.

I was highly critical of the original respiratory protection requirements contained in the CDC 1993 Guidelines for tuberculosis control. Now, I am impelled to congratulate you for your rapid development of modern methods and appropriate standards.

Sincerely,


Jeffrey J. Tarrand, M.D.
Laboratory - Infection Control Officer
The University of Texas
M.D. Anderson Cancer Center

JJT/mlh

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