

Infectious Disease

The New York City Department of Health and Mental Hygiene (DOHMH) is a leader in public health practice and policy. The fellow will be assigned to the Bureau of TB Control which is housed within the Division of Disease Control of the DOHMH. NYC has one of the highest rates of TB (11.4 per 100,000) in the US and the BTBC is the largest TB control program in the US with approximately 300 staff. The BTBC is composed of the following offices: Executive, Surveillance, Epidemiology, Outreach and Staff Development, Medical Affairs, Administration and Human Resources, Quality Assurance, and Program Management (includes the TB field offices, chest centers, and the Information and Informatics Office). The fellow will be assigned to the BTBC Surveillance Office and will function as a full member of that office. The BTBC is an interdisciplinary setting and the fellow will also work in close collaboration with the staff in other offices. Working at the BTBC will provide a fellow a unique opportunity to participate in many local public health agency functions in a diverse setting where there are high rates of infectious and chronic diseases along with social disparities.

The fellow will participate in routine surveillance activities such as communicating with providers on reporting issues, preparing information for internal and external requests, performing quality checks of surveillance data and revising quality assurance procedures, and preparing surveillance reports. These activities will be an opportunity for the fellow to become familiar with program management including creating and revising protocols, to work with large datasets, and be involved in many aspects of a TB control program. The fellow will attend the BTBC new staff training, monthly TB-related journal club and methods seminars, the Columbia Mailman School of Public Health TB epidemiology course, TB management seminars, relevant team meetings and Citywide TB rounds. SAS and other relevant computer software training will be available along with other trainings at the NYC DOHMH in many areas such as scientific writing, presentation skills, and epidemiology. In addition, the fellow will have the opportunity to attend the monthly DOHMH Epidemiology Grand Rounds and other seminars.

The fellow will be part of the DOHMH's emergency response structure and be assigned to the Epidemiology and Surveillance sub-section. This section is responsible for 1) investigating the incident to characterize event by person, place and time; 2) collecting data and developing databases; 3) implementing enhanced, active or passive syndromic surveillance to monitor impact and recommend preventive measures. The fellow will receive emergency response training and may have the opportunity to participate in emergency response exercises such as point of distribution (POD) exercises.

Potential projects include:

Surveillance or program evaluation

- a. Evaluate the completeness and accuracy of the TB Surveillance Registry using data from the patient interview form and chart abstraction.
- b. Examine the completeness of HIV testing being offered to TB patients.

Outbreak/field investigation

- a. Lead investigator for an expanded contact investigation (ECI) which will involve working with the site to conduct a presentation on TB and its transmission, if needed, to arrange testing of the exposed persons, tracking the final status exposed persons, and writing a report of the investigation.
- b. Participate and lead genotype cluster investigations which will involve review of records and re-interviews of the patients to identify sites of exposure and epidemiologic links between patients.

Possible data analysis or program evaluation projects

- a. Evaluate usefulness of conducting contact investigations for sputum smear-negative, culture-positive TB by comparing transmission in these cases versus sputum smear-positive TB and determine what factors are associated with transmission.
- b. Describe the prevalence and types of nontuberculous mycobacteria in NYC using information available from the Public Health Laboratory.
- c. Analyze aspects of use of QFT-G in BTBC chest centers such as whether patient's with a positive QFT-G result are more likely to initiate and complete treatment for latent TB infection.

There will be numerous opportunities for the fellow to present the results from their projects, both in written and oral format, including at Bureau-level, Agency level and at national or international TB meetings in addition to the annual CSTE meeting.

Assignment Location:	New York City, New York
Primary Mentor:	Tiffany Harris, PhD Director, Office of Surveillance Bureau of TB Control, New York City Dept of Health and Mental Hygiene
Advanced Degrees:	PhD, University of Washington (2003) MS, University of Washington (2001)
Secondary Mentor:	Shama Ahuja, MPH Director of Epidemiology, Bureau of TB Control

New York City Department of Health & Mental Hygiene

Advanced Degrees:

PhD candidate, Johns Hopkins University

MPH, Emory University (1997)