TUBERCULOSIS SCREENING POLICY

Tuberculosis continues to be a serious communicable disease. To prevent the spread of this disease in schools and healthcare settings, Utah County requires proof of tuberculosis skin testing (TST), blood testing (QFT-G or T-Spot), and/or chest x-ray for the following individuals:

- All foreign-born (except Canada) students entering schools for the first time who have not been tested since entering this country.
- All students, school faculty and staff, who have lived in a foreign country (except Canada) for six months or more within the past five years, who have not been tested since living in the foreign country.

Results of a tuberculosis skin or blood test or chest x-ray completed after arriving in this country must be presented before the employee begins work, or a student begins attending school.

Two Tests Available
The Mantoux Tuberculin Skin Test (TST) is the standard skin test used to screen for Tuberculosis. CDC guidelines will be followed for the readings of the TST. QuantiFERON - TB Gold (QFT-G) is more specific for Tuberculosis with fewer false positives than TST, especially in clientele with a BCG history. QFT-G may be used as an alternative to the TST.

**Immunocompromised** Individuals (cancer, diabetes, chronic renal failure, HIV infected, immunosuppressive treatment, (steroids, rheumatoid arthritis, etc.)) should have QTF-G testing because of low sensitivity of TST in these individuals.

BCG Criteria
If it is known that a BCG vaccine has been given within the last year, a Tuberculin Skin Test (TST) may more likely be falsely positive so skin testing should be deferred until at least a year after the BCG was given. The QFT-G blood test is not affected by BCG vaccine and is preferred in these cases.

Two Step Testing
Those over the age of 50 who have **not** had a TST within the previous 5 years should have a repeat TST at least one week after the first TST reading, if it is negative. Also, some student/professional applications may require two step testing. The second test result is the one to be recorded. If a QFT-G blood test has been performed a TST is not required.

Any positive TST (1st step or 2nd step) or positive QFT-G requires a follow up chest x-ray.
**Reading TST TB Skin Tests**

It is important to read the TST between 48 and 72 hours after being placed. TB test return schedule is as follows: Clients returning later than the following days will need to have the TST repeated unless it is very obvious that the TST was (or still is) positive. In this case, date the positive result 72 hours after placement and send the client for a chest x-ray.

<table>
<thead>
<tr>
<th>Placed on Monday</th>
<th>Will not check after Thursday of that same week</th>
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<tbody>
<tr>
<td>Placed on Tuesday</td>
<td>Will not check after Friday of that same week</td>
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<tr>
<td>Placed on Wednesday before 4:30 pm</td>
<td>Will not check after Friday of that same week</td>
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<tr>
<td>Thursday</td>
<td>No TST will be given on Thursdays</td>
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<tr>
<td>Placed on Friday</td>
<td>Will not check after Monday of the next week</td>
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**Chest X-Ray Screening**

A chest x-ray is required for everyone newly identified as a positive reactor. Immigration clients with a previous positive TB skin test are required to have a current chest x-ray within 6 months from date of the immigration examination. Clients with a previous positive skin test must provide a report of a chest x-ray done since arriving in the US, or within 3 months if done through an American Embassy abroad. Persons who have had a normal chest x-ray following a positive skin test are not required by Utah County Health Department to have subsequent chest x-rays, unless they have symptoms suggestive of active tuberculosis disease. Some workplace policies may include a chest x-ray requirement for new employees with a previous positive skin test, but we discourage repeated serial screening chest x-rays in asymptomatic individuals. However, persons starting INH treatment are required to have a chest x-ray with 3 months.

Ralph L. Clegg, E.H. S., M.P.A.  Date  8/16/2016
Executive Director
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David C. Flinders, M.D.  Date  06/10/2016
Medical Director
Utah County Health Department