

## PART 4 TUBERCULOSIS (TB) SCREENING/TESTING

Please answer the following questions:

Have you ever had close contact with persons known or suspected to have active TB disease? ☐ Yes ☐ No

Were you born in one of the countries listed below that have a high incidence of active TB disease?

(If yes, please CIRCLE the country, below) ☐ Yes ☐ No

Afghanistan	Côte d'Ivoire	Kenya	Nicaragua	South Africa
Algeria	Democratic People's Republic of Korea	Kiribati	Niger	South Sudan
Angola	Democratic Republic of the Congo	Kuwait	Nigeria	Sri Lanka
Argentina	Djibouti	Kyrgyzstan	Niue	Sudan
Armenia	Dominican Republic	Lao People's Democratic Republic	Pakistan	Suriname
Azerbaijan	Ecuador	Latvia	Palau	Swaziland
Bahrain	El Salvador	Lesotho	Panama	Tajikistan
Bangladesh	Equatorial Guinea	Liberia	Papua New Guinea	Thailand
Belarus	Eritrea	Libya	Paraguay	Timor-Leste
Belize	Estonia	Lithuania	Peru	Togo
Benin	Ethiopia	Madagascar	Philippines	Trinidad and Tobago
Bhutan	Fiji	Malawi	Poland	Tunisia
Bolivia (Plurinational State of)	Gabon	Malaysia	Portugal	Turkey
Bosnia and Herzegovina	Gambia	Maldives	Qatar	Turkmenistan
Botswana	Georgia	Mali	Republic of Korea	Tuvalu
Brazil	Ghana	Marshall Islands	Republic of Moldova	Uganda
Brunei Darussalam	Guatemala	Mauritania	Romania	Ukraine
Bulgaria	Guinea	Mauritius	Russian Federation	United Republic of Tanzania
Burkina Faso	Guinea-Bissau	Mexico	Rwanda	Uruguay
Burundi	Guyana	Micronesia (Federated States of)	Saint Vincent and the Grenadines	Uzbekistan
Cabo Verde	Haiti	Mongolia	Sao Tome and Principe	Vanuatu
Cambodia	Honduras	Morocco	Senegal	Venezuela (Bolivarian Republic of)
Cameroon	India	Mozambique	Serbia	Viet Nam
Central African Republic	Indonesia	Myanmar	Seychelles	Yemen
Chad	Iran (Islamic Republic of)	Namibia	Sierra Leone	Zambia
China	Iraq	Nauru	Singapore	Zimbabwe
Colombia	Kazakhstan	Nepal	Solomon Islands	
Comoros			Somalia	
Congo				

Source: World Health Organization Global Health Observatory, Tuberculosis Incidence 2012. Countries with incidence rates of  $\geq 20$  cases per 100,000 population. For future updates, refer to <http://apps.who.int/ghodata>.

Have you had frequent or prolonged visits\* to one or more of the countries listed above with a high prevalence of TB disease? (If yes, CHECK the countries, above) ☐ Yes ☐ No

Have you been a resident and/or employee of high-risk congregate settings (e.g., correctional facilities, long-term care facilities, and homeless shelters)? ☐ Yes ☐ No

Have you been a volunteer or health-care worker who served clients who are at increased risk for active TB disease? ☐ Yes ☐ No

Have you ever been a member of any of the following groups that may have an increased incidence of latent M. tuberculosis infection or active TB disease – medically underserved, low-income, or abusing drugs or alcohol? ☐ Yes ☐ No

**If the answer is YES to any of the above questions**, [insert your college/university name] requires that you receive TB testing as soon as possible but at least prior to the start of the subsequent semester).

**If the answer to all of the above questions is NO**, no further testing or further action is required.

1 The significance of the travel exposure should be discussed with a health care provider and evaluated.

## **TUBERCULOSIS (TB) RISK ASSESSMENT (to be completed by health care provider)**

Clinicians should review and verify the information above. Persons answering YES to any of the questions in Part K are candidates for either Mantoux tuberculin skin test (TST) or Interferon Gamma Release Assay (IGRA), unless a previous positive test has been documented.

History of a positive TB skin test or IGRA blood test? (If yes, document below) ☐ Yes ☐ No

History of BCG vaccination? (If yes, consider IGRA if possible.) ☐ Yes ☐ No

### **1. TB Symptom Check**

**Does the student have signs or symptoms of active pulmonary tuberculosis disease?** ☐ Yes ☐ No

If No, proceed to 2 or 3

**If yes, check below:**

- ☐ Cough (especially if lasting for 3 weeks or longer) with or without sputum production
- ☐ Coughing up blood (hemoptysis)
- ☐ Chest pain
- ☐ Loss of appetite
- ☐ Unexplained weight loss
- ☐ Night sweats
- ☐ Fever

Proceed with additional evaluation to exclude active tuberculosis disease including tuberculin skin testing, chest x-ray, and sputum evaluation as indicated.

### **2. Tuberculin Skin Test (TST)**

(TST result should be recorded as actual millimeters (mm) of induration, transverse diameter; if no induration, write "0". The TST interpretation should be based on mm of induration as well as risk factors.)\*\*

Date Given: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date Read: \_\_\_\_/\_\_\_\_/\_\_\_\_  
M D Y M D Y

Result: \_\_\_\_ mm of induration \*\*Interpretation: positive ☐ negative ☐

Date Given: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date Read: \_\_\_\_/\_\_\_\_/\_\_\_\_  
M D Y M D Y

Result: \_\_\_\_ mm of induration \*\*Interpretation: positive ☐ negative ☐

### **\*\*Interpretation guidelines**

#### **>5 mm is positive:**

- Recent close contacts of an individual with infectious TB
- persons with fibrotic changes on a prior chest x-ray, consistent with past TB disease
- organ transplant recipients and other immunosuppressed persons (including receiving equivalent of >15 mg/d of prednisone for >1 month.)
- HIV-infected persons

#### **>10 mm is positive:**

- recent arrivals to the U.S. (<5 years) from high prevalence areas or who resided in one for a significant\* amount of time
- injection drug users
- mycobacteriology laboratory personnel
- residents, employees, or volunteers in high-risk congregate settings
- persons with medical conditions that increase the risk of progression to TB disease including silicosis, diabetes mellitus, chronic renal failure, certain types of cancer (leukemias and lymphomas, cancers of the head, neck, or lung), gastrectomy or jejunioileal bypass and weight loss of at least 10% below ideal body weight.

#### **>15 mm is positive:**

- persons with no known risk factors for TB who, except for certain testing programs required by law or regulation, would otherwise not be tested.

*\* The significance of the travel exposure should be discussed with a health care provider and evaluated.*

### 3. Interferon Gamma Release Assay (IGRA)

Date Obtained: \_\_\_\_/\_\_\_\_/\_\_\_\_ (specify method) QFT-GIT T-Spot other\_\_\_\_  
M D Y

Result: negative ☐ positive ☐ indeterminate ☐ borderline ☐ (T-Spot only)

Date Obtained: \_\_\_\_/\_\_\_\_/\_\_\_\_ (specify method) QFT-GIT T-Spot other\_\_\_\_  
M D Y

Result: negative ☐ positive ☐ indeterminate ☐ borderline ☐ (T-Spot only)

### 4. Chest x-ray: (Required if TST or IGRA is positive)

Date of chest x-ray: \_\_\_\_/\_\_\_\_/\_\_\_\_ Result: normal ☐ abnormal ☐  
M D Y

#### Management of Positive TST or IGRA

All students with a positive TST or IGRA with no signs of active disease on chest x-ray should receive a recommendation to be treated for latent TB with appropriate medication. However, students in the following groups are at increased risk of progression from LTBI to TB disease and should be prioritized to begin treatment as soon as possible.

- ☐ Infected with HIV
- ☐ Recently infected with M. tuberculosis (within the past 2 years)
- ☐ History of untreated or inadequately treated TB disease, including persons with fibrotic changes on chest radiograph consistent with prior TB disease
- ☐ Receiving immunosuppressive therapy such as tumor necrosis factor-alpha (TNF) antagonists, systemic corticosteroids equivalent to/greater than 15 mg of prednisone per day, or immunosuppressive drug therapy following organ transplantation
- ☐ Diagnosed with silicosis, diabetes mellitus, chronic renal failure, leukemia, or cancer of the head, neck, or lung
- ☐ Have had a gastrectomy or jejunioileal bypass
- ☐ Weigh less than 90% of their ideal body weight
- ☐ Cigarette smokers and persons who abuse drugs and/or alcohol
- Populations defined locally as having an increased incidence of disease due to M. tuberculosis, including medically underserved, low-income populations
- ☐ Student agrees to receive treatment
- ☐ Student declines treatment at this time

#### HEALTH CARE PROVIDER

NAME SIGNATURE

ADDRESS

PHONE FAX