

Infection Control: Employee Health Tuberculosis - Employee Screening

Policy Statement

All employees shall be screened for tuberculosis (TB) infection and disease, using a two-step tuberculin skin test (TST) or blood assay for *Mycobacterium tuberculosis* (BAMT) and symptom screening, prior to beginning employment. The need for annual testing shall be determined by the annual TB risk classification or as per State regulations.

Policy Interpretation and Implementation

New Employee Screening

- 1. Each newly hired employee will be screened for TB infection and disease after an employment offer has been made but prior to the employee's duty assignment.
- 2. The Employee Health Coordinator (or designee) will accept documented verification of two-step TST or BAMT results within the preceding 12 months.
 - a. If the TST or BAMT result was negative, the employee will not be given another skin test prior to beginning employment.
 - b. If the previous skin test result was positive or unavailable, the employee must have additional verification of absence of active TB.
- 3. Individuals who have had BCG vaccination should still have an initial screening test.
- 4. Third party contractors who may come in contact with residents, including service employees, consultants and privately hired sitters, must provide proof of screening for TB infection and disease prior to contact with residents, or as required by State regulations.

Tuberculin Skin Testing

- 1. The facility's Employee Health Coordinator will administer a TST to all newly hired employees except those who have documented positive TST or BAMT results, and those who provide documented verification of having had a negative TST or BAMT within the preceding 12 months.
- 2. The initial TB testing will be a two-step TST performed by injecting 0.1 mL (5 tuberculin units) of purified protein derivative (PPD) intradermally.
 - a. If the reaction to the first skin test is **negative**, the facility will administer a second skin test 1 to 2 weeks after the first test. The employee may begin duty assignments after the first skin test (if negative) unless prohibited by state regulations.
 - b. If the reaction to the TST is **positive**, the employee will be referred for a chest X-ray and symptom screening, which must be completed prior to employment.

Chest X-rays

1. A new employee with a known positive TST conversion or with known allergic reactions to PPD must have a baseline negative chest X-ray documented per state or local regulations.

2. An employee with a previously negative skin test who converts to a positive skin test will have a chest X-ray.

3. If the chest X-ray is **negative**:

- c. The Employee Health Coordinator will give the employee a symptom questionnaire to complete.
- d. If the employee's chest X-ray is negative and he/she is free of symptoms of active TB, the employee will be considered free of active tuberculosis.
- e. The Employee Health Coordinator will inform the employee of signs and symptoms of TB and advise the individual to contact the Employee Health Coordinator if he/she becomes symptomatic.
- f. No additional chest X-rays will be required unless the employee becomes symptomatic or a clinician recommends a chest X-ray.

4. If the chest X-ray is **positive**:

- g. If the X-ray shows signs of lung abnormalities or the symptom questionnaire is positive, the Employee Health Coordinator will refer the employee to his/her private physician or the appropriate health department to discuss possible TB prophylaxis or treatment.
- h. The private physician or health department must provide the Employee Health Coordinator with a signed medical release indicating that the individual is free from active TB prior to beginning or returning to work.
- 5. The Employee Health Coordinator will complete screens sporadically, such as during the anniversary month of hire.
- 6. The Employee Health Coordinator will refer individuals with a positive skin test result for preventive therapy if they are in close contact with a person with active TB disease, are a recent converter, or have a medical condition that increases the risk for TB.

Serial Testing of Employees

- 1. The need for annual testing will be based on TB risk classification as follows, or a required by State regulations:
 - i. "Low Risk" Classification
 - 1. Annual TB testing of employees is not conducted unless there is known exposure to *M. tuberculosis*.
 - 2. Employees with a baseline positive or newly positive TST or BAMT result are not required to have annual chest X-rays (after baseline) unless symptoms of TB appear or it is recommended by a clinician.
 - b. "Medium Risk" Classification
 - 1. Annual TB testing of employees is conducted.
 - 2. Employees with negative baseline TSTs or BAMTs will have repeat tests done sporadically such as on the anniversary of hire.
 - 3. Employees with positive baseline tests or those who convert to positive will have a baseline chest X-ray and annual symptom screening.
 - 4. Follow-up chest X-rays are not required unless a clinician recommends them.

References	
References	Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health Care Settings, 2005 at: http://www.cdc.gov/mmwr/PDF/rr/rr5417.pdf ; and www.osha.gov/SLTC/tuberculosis/index.html
Related Documents	Tuberculosis Infection Control Program Tuberculosis Screening – Administration and Interpretation of Tuberculin Skin Tests Associate/Employee TB Screening Record (CP1807)
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