

Santa Clara County Tuberculosis Screening Requirements



For All Employees and Volunteers* in Schools: Public, Private and Parochial Pre-K, K-12 and Pre-Schools
Child Care Facilities, Day Nurseries and Developmental Centers Effective January 1, 2015

Complete **Adult Tuberculosis Risk Assessment Questionnaire¹** and **Certificate of Completion²**
(To satisfy California Education Code Section 49406 and Health and Safety Code sections 121525-121555)

Initial Screening		Repeat Screenings	
All employees/volunteers* must have a <u>TB Risk Assessment Questionnaire¹</u> ; TB testing based on the results of the TB risk assessment (no more than 60 days prior to <i>initiation</i> of employment/volunteering) and submit a signed <u>Certificate of Completion²</u>			
Prior negative or unknown TST/IGRA status	Prior positive TST/IGRA	Prior Negative TST/IGRA	Prior Positive TST/IGRA
<ol style="list-style-type: none"> <u>Adult Tuberculosis (TB) Risk Assessment Questionnaire</u> administered by a licensed health care provider (including RN) If yes to any response on questionnaire then a tuberculin (TST) or Interferon Gamma Release Assay (IGRA) blood test should be performed. If Symptom Review on questionnaire is negative OR either TST or IGRA is negative, licensed medical provider (including RN) signs <u>Certificate of Completion²</u> determining patient is free of infectious TB. If this initial TST/IGRA is positive: <ul style="list-style-type: none"> ➤ Obtain medical evaluation, including physical exam and chest x-ray. ➤ Obtain <u>Certificate of Completion²</u> determining patient is free of infectious TB signed by a medical provider. ➤ If active TB is ruled out, treatment for latent TB infection should be considered. Negative TST (<10 mm induration) Positive TST (≥10 mm induration) If symptom review is <i>positive</i>, a medical evaluation that includes a physical exam and chest X-ray must also be done prior to employment. 	<ol style="list-style-type: none"> Provide documentation of prior positive TST/IGRA. All TSTs <u>must be documented</u> and include: <ul style="list-style-type: none"> ➤ Date given (month, day and year) ➤ Date read (in millimeters of induration) Obtain a medical evaluation, and a chest x-ray within last 60 day and a <u>Certificate of Completion²</u> determining patient is free of infectious TB signed by a medical provider. If symptom review is positive the person may not start work until a medical exam and chest x-ray is done If active TB is ruled out, treatment for latent TB infection should be considered if not previously treated. <p><i>If TST or IGRA is not documented, repeat TST or IGRA.</i></p>	<ol style="list-style-type: none"> Repeat <u>Adult Tuberculosis (TB) Risk Assessment Questionnaire¹</u> administered by a licensed health care provider (including RN) every four years. Repeat (TST) or (IGRA) blood test if yes to any response on questionnaire. If Symptom Review is negative OR either TST or IGRA is negative, licensed medical provider (including RN) signs <u>Certificate of Completion²</u> determining patient is free of infectious TB. If this initial TST/IGRA is positive: <ul style="list-style-type: none"> ➤ Obtain medical evaluation, including physical exam and chest x-ray. ➤ Obtain <u>Certificate of Completion²</u> determining patient is free of infectious TB signed by a medical provider. ➤ If active TB is ruled out, treatment for latent TB infection should be considered. Negative TST (<10 mm induration) Positive TST (≥10 mm induration) If symptom review is positive person is restricted from work until a medical evaluation including physical exam and chest X-ray is done. 	<p>Once an employee or volunteer has a documented positive test for TB infection followed by an x-ray, the TB risk assessment is no longer required. If an employee or volunteer becomes symptomatic for TB, then he/she should seek care from his or her health care provider.</p> <p>Signs and symptoms of TB include prolonged cough, coughing up blood, fever, night sweats, weight loss, and excessive fatigue.</p>

* A volunteer: works regularly (i.e. 10 hours per month) on school premises. All facilities shall maintain a file containing an up-to-date certificate for each person covered by this policy.
For more information about Tuberculosis, Symptom Review Form, IGRA testing, etc. visit www.sccphd.org/tb.