



## Policy and Procedure

Policy Name:	Tuberculosis Screening –Pediatric and Adult		
Effective Date:		Revision Date:	
Department(s)/Site(s):			
Document Owners:			
Approved By:			
Relevant Law/Standard:			
Facility Site Review Source:	Department of Health Care Services (DHCS) All Plan Letter 20-006, Site Reviews: Facility Site Review and Medical Record Review		

### **Background:**

Tuberculosis is a potentially fatal contagious disease that can affect almost any part of the body but is mainly an infection of the lungs. It is caused by a bacterial microorganism, the tubercle bacillus or *Mycobacterium tuberculosis*.

Tuberculosis disease was once the leading cause of death in the United States. Today, however, people with active TB disease can be treated and cured if they seek medical help. Even better, people with latent TB infection can take medicine so they will not develop active TB disease.

### **Purpose:**

Tuberculosis (TB) Risk Assessment is an activity to assess and document a patient's TB symptoms and/or risk factors. A completed risk assessment form and/or screening practices will help the provider to determine the need for further medical testing and evaluation.

### **Policy:**

1. Tuberculosis screening is required for all new members unless it was done in the past year.
2. Tuberculosis screening is completed at each health assessment visit.
3. Pediatrics
  - a. All children are assessed for risk of exposure to tuberculosis (TB) at each health assessment. The Mantoux skin test, or other approved TB infection screening test,\* is administered to children *identified at risk*, if there has not been a test in the previous year. The Mantoux is not given if a previously positive Mantoux is documented.

- b. Documentation of a positive test includes follow-up care (e.g. further medical evaluation, chest x-ray, diagnostic laboratory studies and/or referral to specialist). Practitioners are required to follow current CDC and American Thoracic Society guidelines for TB diagnosis and treatment. \*Per June 25, 2010 CDC MMWR, FDA approved IGRA serum TB tests, i.e., QuantiFERON®-TB Gold (QFT-G and QFT-GIT) and T-SPOT®.TB (T-Spot). The Mantoux is preferred over IGRA for children under 5 years of age. (see Links)

4. Adults

- a. All adults are screened for tuberculosis (TB) risk factors upon enrollment and at periodic physical evaluations. The Mantoux skin test, or other approved TB infection screening test,\* is administered to all asymptomatic persons at increased risk of developing TB irrespective of age or periodicity if they had not had a test in the previous year. Adults already known to have HIV or who are significantly immunosuppressed require annual TB testing.\*\* The Mantoux is not given if a previously positive Mantoux is documented.
- b. Documentation of a positive test includes follow-up care (e.g. further medical evaluation, chest x-ray, diagnostic laboratory studies and/or referral to specialist). Practitioners are required to follow current CDC and American Thoracic Society guidelines for TB diagnosis and .treatment. \* Per June 25, 2010 CDC MMWR, the FDA approved IGRA serum TB tests, such as QuantiFERON®-TB Gold (QFT-G and QFT-GIT) and T-SPOT®.TB (T-Spot). (see Links)

**Procedure:**

1. All children are assessed for risk of exposure to tuberculosis (TB) at each health assessment.
2. Tuberculosis screening – required for all new members unless it was done in the past year or member is a converter.

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First Name Last Name – Title

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Date

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First Name Last Name – Title

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Date

The material in this document is a knowledge-sharing tool provided by the FSR team to enhance compliance with Facility Site Review requirements. All content is for informational purposes and may be used and/or modified according to site-specific practices. Ensure appropriate review and approval by site management prior to adoption.

**Resources:**

**CDC:**

[www.cdc.gov/tb/publications/factsheets/testingIGRA.htm](http://www.cdc.gov/tb/publications/factsheets/testingIGRA.htm)

**CTCA/CDPH:**

<http://www.ctca.org/guidelines/IIA2targetedskintesting.pdf>[www.ctca.org/guidelines/IIA2targetedskintesting.pdf](http://www.ctca.org/guidelines/IIA2targetedskintesting.pdf)

**CDPH Adult TB Risk Assessment**

<https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/TBCB-CA-TB-Risk-Assessment-and-Fact-Sheet.pdf>

**CDPH Pediatric TB Risk Assessment**

<https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/TBCB-CA-Pediatric-TB-Risk-Assessment.pdf>