

Guidelines for Tuberculin Screening of Health Care Workers

COMMUNICABLE DISEASE CONTROL

These recommendations for tuberculin screening apply to health care workers in health facilities, and depend on the specific health care facility (high or low risk) and activity risk (high, intermediate or low). See chart below for definitions of high vs. low-risk facilities and activity risk.

Health care workers who are employed in high-risk health care facilities and engaged in high or intermediate-risk activities *without* a previously documented tuberculin test result, should be assessed for their tuberculosis (TB) infection status upon employment, using a two-step tuberculin test. Health care staff working in high-risk facilities who are at low activity risk need not be screened upon employment. Health care staff working in low-risk facilities do not require tuberculin screening upon employment.

The test results of employees who are screened upon employment should be kept on record. Employees who should have been tested upon employment (based on the nature of the facility and degree of risk attached to the activities they undertake), but were not, should be tested subsequently at the earliest convenient time. Documentation

should indicate whether the health care worker is tuberculin test negative or positive (including the size of the reaction in millimetres). It should also indicate whether the health care worker has received therapy for latent or inactive TB, or treatment for active TB.

Health care workers screened upon employment who have a *negative* tuberculin test should undergo subsequent screening, using a one-step tuberculin test (see below).

Health care workers who have previously been treated for TB, given preventive therapy for TB, or have a documented *positive* tuberculin test, should not undergo further tuberculin testing. They should be educated regarding the symptoms of active TB and instructed to seek medical evaluation as soon as possible if these symptoms develop.

Routine screening on employment is not recommended for health care workers who are not based in health care facilities, such as community health nurses. Post-exposure tuberculin testing may be indicated following significant exposures.

Health Care Worker Tuberculin Screening Guidelines

Activity Risk	Health care facility risk	
	High	Low
High	Every 6 months	Post-exposure
Intermediate	Annually	Post-exposure
Low	Post-exposure	Post-exposure

Adapted from Health Canada. Guidelines for Preventing the Transmission of Tuberculosis in Canadian Health Care Facilities and Other Institutional Settings. *Canadian Communicable Disease Report 1996*, Volume 22, Supplement 1.

Definitions

High-risk facility: Six or more individuals with TB admitted annually, or any facility with a ratio of health care workers to TB cases of $\leq 100:1$

Low-risk facility: Fewer than six individuals admitted annually, or any facility with a ratio of health workers to TB cases of $> 100:1$

High-risk activities: Workers involved in cough-inducing procedures, autopsy, morbid anatomy and pathology examinations, bronchoscopy and TB-related laboratory procedures

Intermediate-risk activities: Workers with direct patient contact on units that may accommodate patients with active TB

Low-risk activities: Workers with minimal patient contact (e.g., medical records, administration) or with direct patient contact on units that rarely accommodate patients with TB (e.g., obstetrics, gynecology, neonatal intensive care)