



# **Tuberculosis (TB) Risk Assessment**

# CHILD AND TEEN CHECKUPS (C&TC) FACT SHEET FOR PRIMARY CARE PROVIDERS

## **C&TC** Requirements

#### General

Tuberculosis (TB) risk assessment is required at the 1-, 6-, 12-, and 24-month C&TC visits and annually starting at three years. Refer to the Minnesota Department of Health (MDH) <u>Updated Latent</u> <u>Tuberculosis Infection (LTBI) Screening and Treatment Recommendations (health.state.mn.us)</u>.

TB *screening* is only recommended for children identified as high-risk for having been exposed to TB.

#### Personnel

Tuberculin Skin Tests (TSTs) should be performed, read, and recorded by health care workers trained in administering and interpreting TSTs.

A licensed, trained health care worker can draw TB blood tests. A licensed health care provider (physician, nurse practitioner, physician assistant) must interpret results and provide follow-up.

#### **Documentation**

Document the TB risk assessment result. If positive for TB risk exposure, document the screening test was ordered and completed. Record the results in the patient's record.

For documentation examples, refer to the <u>C&TC Provider Documentation Forms</u> (mn.gov/dhs).

#### **Procedure**

#### Risk Assessment

The <u>Pediatric TB Risk Assessment</u> (<u>health.state.mn.us</u>) tool may be used.

### Screening with a TB Blood Test

Interferon-gamma release assay (IGRAs) is the primary TB screening test for patients two and older (American Academy of Pediatrics, 2021).

#### Screening with a TB Skin Test

TST is an acceptable alternative if an IGRA is unavailable, costly, or burdensome, such as for employment and mass screenings. TSTs are recommended for children under two.

A positive TST at any age is considered valid; however, a negative TST is only valid in children six months and older. If a child is under six months old and has a negative TST, repeat the TST after age six months. Refer to Tuberculin Skin Test (TST) (health.state.mn.us).

### Follow Up

A positive TST or IGRA indicates a likely TB infection. A licensed provider must discern non-contagious LTBI and active TB disease.

Refer to <u>Basic TB Facts (cdc.gov)</u>. Medical evaluation includes TB test, complete TB history, and physical exam with symptom review. If indicated, a chest radiograph and sputum culture may be necessary.

#### Reporting

Report confirmed or suspected cases of active TB disease to MDH within one working day of identification. Do not wait for culture confirmation to report.

Call or fax reports to MDH TB Prevention and Control Program at 651-201-5414 or 877-676-5414. Refer to Reporting Tuberculosis (health.state.mn.us).

# Importance of Risk Assessment

In 2022, 132 new active TB cases were reported in Minnesota. Of these, 6% were under age five, and another 3% were ages 5-15 years (Minnesota Department of Health, 2023). Children under five are more likely to develop life-threatening TB disease (Centers for Disease Control and Prevention, 2022).

# Professional Recommendations

### American Academy of Pediatrics

Perform TB risk assessment and appropriate actions at the first and six-month visits and annually from 12 months through 20 years (American Academy of Pediatrics, 2022).

#### Resources

# Minnesota Department of Human Services

<u>C&TC Schedule of Age-Related</u>
 <u>Screening Standards (dhs.state.mn.us)</u>

Minnesota Health Care Programs
 (MHCP) Provider Manual - C&TC Section
 (dhs.state.mn.us)

# Minnesota Department of Health

- Child and Teen Checkups (C&TC) (www.health.state.mn.us)
- <u>TB Information for Health Professionals</u> (health.state.mn.us)

#### Other Resources

 Professional Resources and Tools (cdc.gov)

### References

American Academy of Pediatrics. (2021). *Red Book: 2021–2024 Report of the Committee on Infectious Diseases.*American Academy of Pediatrics.

American Academy of Pediatrics. (2022). 2022 Recommendations for Preventive Pediatric Health Care. *Pediatrics*, *150*(1). doi:10.1542/peds.2022-058044

Centers for Disease Control and Prevention. (2022). *TB and Children*. Retrieved from

www.cdc.gov/tb/topic/populations/tbinchildren/default.h tm

Minnesota Department of Health. (2023). *TB Statistics*. Retrieved from

www.health.state.mn.us/diseases/tb/stats/index.html

### **For More Information**

The Child and Teen Checkups (C&TC) program is administered through a partnership between the Minnesota Department of Human Services and the Minnesota Department of Health.

For questions about this fact sheet or to obtain this information in a different format, call 651-201-3650 or email health.childteencheckups@state.mn.us.

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