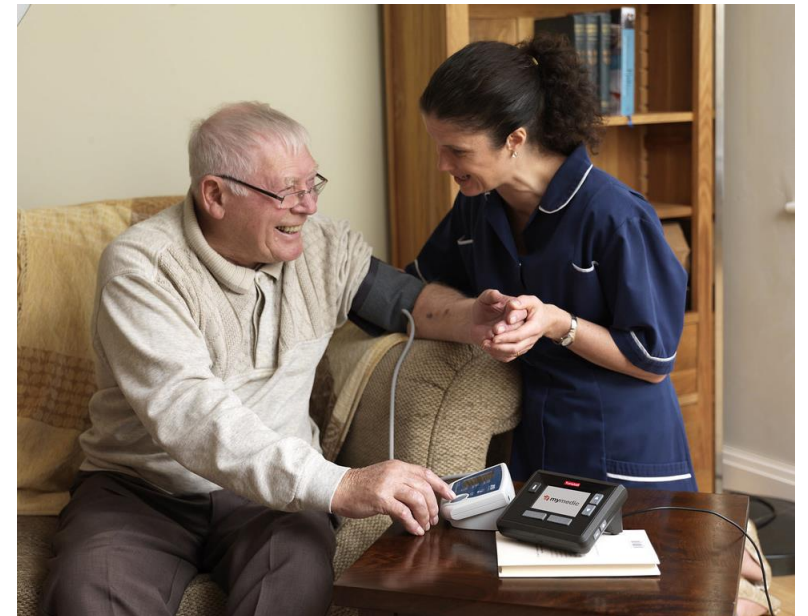


# PENNSYLVANIA HOMECARE ASSOCIATION

TUBERCULOSIS TESTING, SCREENING, AND EDUCATION  
REQUIREMENTS IN PENNSYLVANIA

September 8, 2022



## STATE DOH COVID-19 WAIVERS EXTENDED THROUGH OCT. 31, 2022

- State-specific COVID waivers expire on October 31, 2022.
- Includes two-step TB testing requirement.
- See HB2401 (Act 30) – Home Health Regulatory Flexibilities
- REVISED Guidance for Home Care Agencies, Home Health Care Agencies and Hospices During COVID-19 Pandemic - May 20, 2020
- Pre-employment Health Screening
  - The requirement for an initial baseline 2 step Mantoux skin test for tuberculin skin testing is temporarily suspended.
  - All applicants must complete an individual risk assessment and symptom evaluation prior to hire.
  - Any new employee who does not provide evidence of a Mantoux skin test within the previous 12 months must, as a condition of employment, receive the tuberculin skin test as soon as possible following termination of the Governor's COVID-19 Disaster Declaration.

# CDC TUBERCULOSIS CONTROL GUIDANCE

## ■ 2005

- Recommendations for TB Infection Control
- Guidelines for Screening and Mitigation

## ■ 2019

- Revised recommendations
- Ended annual testing requirement in most situations
- Added specifics for education

# CDC TUBERCULOSIS 2019 GUIDANCE

- CDC recommendations for testing U.S. health care personnel now include:
  - TB screening with an individual risk assessment and symptom evaluation at baseline (preplacement);
  - TB testing with an interferon-gamma release assay (IGRA) or a tuberculin skin test (TST) for persons without documented prior TB disease or latent TB infection (LTBI);
  - Thereafter, annual TB testing **not** recommended unless there is a known exposure to a case of infectious TB disease or there is ongoing transmission in the health care setting where the individual works;
  - Anyone with a newly positive TB test should receive a symptom evaluation and chest x-ray to rule out TB disease. Additional workup may be needed based on the results;
  - Treatment for latent TB infection is strongly encouraged for health care personnel diagnosed with LTBI;
  - Health care personnel diagnosed with LTBI who decline treatment should receive an annual TB screen to detect early evidence of TB disease and to reevaluate the risks and benefits of LTBI treatment;
  - Annual TB education required for all health care personnel.

# PA TUBERCULOSIS CONTROL GUIDANCE

- PA DOH utilizes CDC recommendations, including 2019 updates, for Home Health, Hospice and Homecare (non-medical)
- Homecare (non-medical) PA Code 611 requirements:
  - Every 12 months (not annually) must complete written Screening Symptom Tool (§ 611.56. Health screening (b))

# TB SCREENING AND EDUCATION GRID

- Developed to assist with TB requirements and processes.
- Applicable for all employees/volunteers having direct contact with clients/patients.
- Agency must retain all required documentation for HR file so can be proved to a surveyor for proof compliance.
  - HR file medical information is considered confidential.

# TB SCREENING AND EDUCATION GRID (CONT.)

Scenario	TB Skin Test	Blood Test for TB	CXR	Individual Risk Assessment	Written Symptom Screening Tool	Education
New Hire – <u>NO</u> previous positive TB tests & <u>NO</u> previous tests results available	2 step TB skin test required	May be done instead of skin test		Yes- see #5 below for sample from CDC	Yes	Yes
New Hire – <u>NO</u> previous positive TB tests & 1 negative previous test result (done within last 12 months) with a copy of documentation for HR file	Perform 1 TB Skin Test	May be done instead of skin test		Yes	Yes	Yes

# TB SCREENING AND EDUCATION GRID (CONT.)

Scenario	TB Skin Test	Blood Test for TB	CXR	Individual Risk Assessment	Written Symptom Screening Tool	Education
New Hire – <u>NO</u> previous positive TB tests & 2 step negative previous tests results (both tests done with in last 12 months) with a copy of documentation for HR file	No TB Skin Test required	Not needed		Yes	Yes	Yes
New Hire – previous positive TB tests			Yes	Yes	Yes	Yes
New Hire – previous positive TB tests AND untreated LTBI (latent TB infection)			Yes	Yes	Yes	Yes



# TB SCREENING AND EDUCATION GRID (CONT.)

Scenario	TB Skin Test	Blood Test for TB	CXR	Individual Risk Assessment	Written Symptom Screening Tool	Education
Annually (within 12 months): Homecare (non-medical)	Not required unless known exposure or ongoing transmission at a healthcare facility			Yes - every 12 months per DOH	Yes - every 12 months per PA Code 611	Yes
Annually: Hospice and Home Health	Not required unless known exposure or ongoing transmission at a healthcare facility			Annually per PA DOH	Annually per PA DOH	Yes

# BLOOD TESTS FOR TB

- A TB blood test may be completed for screening instead of a TB Skin Test.
- TB blood tests are also called interferon-gamma release assays or IGRAs.
- Two TB blood tests are currently approved by the FDA and are available in the USA: the QuantiFERON®–TB Gold In-Tube test (QFT-GIT) and the T-SPOT®.TB test (T-Spot).
- Blood test may be more expensive but is a single visit with results in 2-3 days.

# CHEST X-RAY (CXR)

- Document your procedure in policy.
- Have copy of results in HR file.
- Requires one CXR following the positive TB skin test reading (or BCG).
- Must have a documented report related to the CXR that indicates “no evidence of TB.”
- No need to repeat chest x-ray unless potential exposure/symptoms – consult physician.

## 2 STEP TB TEST PROCESS

- First skin test completed, documented, and read 48-72 hours later
- e.g., May 1 (test administered in one arm); May 3 (return to have test read). This completes step 1.
- If 1<sup>st</sup> test is negative, per CDC: perform 2<sup>nd</sup> skin test 1-3 weeks after first skin test read.
- e.g., 2<sup>nd</sup> step, May 10; May 12, return to have test read. 2-step TB Skin Test requires 4 visits to testing location over a 3-week time period.

# DOCUMENTATION REQUIRED

- Proof of testing including results and CXR report (if required) - **MUST** be retained in the HR file.
- Education proof is required in the HR or an education-specific file.
- Files may be electronic if agency has a policy related to recording/documentation that permits electronic files.

# ADDITIONAL INFORMATION

- Latent TB Infection: CDC strongly encourages treatment for LTBI.
- Education should include: TB risk factors, TB signs and symptoms, and the agency's TB Infection Control policies & procedures AND need proof of education (\*\*remember education is required at hire and annually).
- Written Symptom Screening Annually: DOH requirement.






# COVID VACCINATION & TB TESTING

- COVID-19 vaccination should not be delayed because of testing for TB infection.
- Testing for TB infection with one of the immune-based methods, either the tuberculin skin test (TST) or an interferon release assay (IGRA), can be done before, after, or during the same encounter as COVID-19 vaccination.
- [https://www.health.pa.gov/topics/Documents/Diseases%20and%20Conditions/TB/CD C%20-C%20Dear%20Colleague%20Letter%20August%2031%202021.pdf](https://www.health.pa.gov/topics/Documents/Diseases%20and%20Conditions/TB/CD%20-C%20Dear%20Colleague%20Letter%20August%2031%202021.pdf)



## Health Care Personnel (HCP) Baseline Individual TB Risk Assessment

**HCP should be considered at increased risk for TB if any of the following statements are marked “Yes”:**

 	<b>Temporary or permanent residence of <math>\geq 1</math> month in a country with a high TB rate</b> Any country other than the United States, Canada, Australia, New Zealand, and those in Northern Europe or Western Europe	YES <input type="checkbox"/> NO <input type="checkbox"/>
<b>OR</b>		
 	<b>Current or planned immunosuppression,</b> including human immunodeficiency virus (HIV) infection, organ transplant recipient, treatment with a TNF-alpha antagonist (e.g., infliximab, etanercept, or other), chronic steroids (equivalent of prednisone $\geq 15$ mg/day for $\geq 1$ month) or other immunosuppressive medication	YES <input type="checkbox"/> NO <input type="checkbox"/>
<b>OR</b>		
	<b>Close contact with someone who has had infectious TB disease since the last TB test</b>	YES <input type="checkbox"/> NO <input type="checkbox"/>

# CDC INDIVIDUAL RISK ASSESSMENT

Abbreviations: HCP, health-care personnel; TB, tuberculosis; TNF, tumor necrosis factor.  
Individual risk assessment information can be useful in interpreting TB test results (see Lewinsohn DM, Leonard MK, LoBue PA, et al. Official American Thoracic Society/Infectious Diseases Society of America/Centers for Disease Control and Prevention Clinical Practice Guidelines: Diagnosis of tuberculosis in adults and children. Clin Infect Dis 2017;64:111-5).  
Adapted from: Risk assessment form developed by the California Department of Health,







## Tuberculosis (TB) Risk Assessment - Adults

- Use this tool to identify asymptomatic **adults** for TB testing.
- **Do not repeat TB testing** unless there are **new** risk factors since the last test.
- Do not treat for TB infection until a diagnosis of active TB disease has been excluded:
  - For patients with TB symptoms or an abnormal chest x-ray consistent with active TB disease, evaluate for active TB disease with a chest x-ray, symptom screen, and – if indicated – sputum AFB smears, cultures and nucleic acid amplification testing (NAAT). A negative interferon gamma release assay or tuberculin skin test does not rule out active TB disease.

TB testing is recommended if any of the 3 boxes below are checked.

- Birth, travel or residence** in a country with an elevated TB rate for at least a month
- Includes any country **other than** the United States, Canada, Australia, New Zealand, or a country in western or northern Europe.
  - If resources require prioritization within this group, **prioritize** those patients with at least one medical risk for progression to TB disease (see the Pennsylvania Adult TB Risk Assessment User Guide for a list).
  - An interferon gamma release assay test is preferred over a tuberculin skin test for non-U.S. born persons 2 years of age or older.

- Immunosuppression**, current or planned
- Examples include HIV infection, organ transplant recipient or treatment with a TNF-alpha antagonist (e.g., infliximab, etanercept, others), steroids (equivalent to a prednisone dose of 15 mg/day for one month or longer), or other immunosuppressive medication.

- Close contact** to someone with infectious TB disease during lifetime

If TB test is positive, rule out active TB disease before diagnosing TB infection.

- No risk factors identified**; TB testing is not indicated at this time

Provider: \_\_\_\_\_ Patient Name: \_\_\_\_\_

Assessment Date: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

# DOH RISK ASSESSMENT - ADULTS

[https://www.health.pa.gov/topics/Documents/Diseases%20and%20Conditions/TB/ADULT%20Final\\_pa-tb-risk-assessment.pdf](https://www.health.pa.gov/topics/Documents/Diseases%20and%20Conditions/TB/ADULT%20Final_pa-tb-risk-assessment.pdf)

## Employee Tuberculosis Screening

\_\_\_\_\_  
Employee's Name

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Date

All employees are required to participate in screening for Tuberculosis. All employees must complete the following screening questionnaire if the agency is determined to be low risk per the CDC Guidelines:

Tuberculosis Symptom Review Do you <i>currently</i> have symptoms of:	YES	NO
1. Unusual fatigue for more than two weeks		
2. Weight loss > 10% of body weight. (unrelated to dieting)		
3. Loss of appetite for more than two weeks		
4. Persistent cough longer than a three-week duration.		
5. Blood-streaked sputum		
6. Fever-associated with cough for more than one week		
7. Night sweats		
8. Pain in chest when taking a breath		

# PHA RESOURCE LIBRARY

# SAMPLE SCREENING TOOL

# PA DOH WEBSITE RESOURCES

[Health](#) > [All Health Topics](#) > [Programs](#) > [Tuberculosis](#) > Health Care Providers

## Tuberculosis Health Care Providers

- [TB Education](#)
- [TB Guidelines](#)
- [TB and HIV Coinfection Guidelines](#)
- [CDC Infographics](#)
- [CDC Factsheets](#)
  
- [TB Newsletter Articles](#)

## Centers for Disease Control (CDC)

### [TB Education](#)

- [TB 101 for Health Care Workers](#)
  
- [Interactive Core Curriculum on Tuberculosis: What the Clinician Should Know](#) (web based)
  
- Self-Study Modules on Tuberculosis
  - [Modules 1 - 5](#)
  - [Modules 6 - 9](#)
- [TB in Specific Populations](#)

# REFERENCES

- 2005 CDC TB Guidelines:  
[https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5417a1.htm?s\\_cid=rr5417a1\\_e](https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5417a1.htm?s_cid=rr5417a1_e)
- 2019 CDC Updated TB Recommendations:  
[https://www.cdc.gov/mmwr/volumes/68/wr/mm6819a3.htm?s\\_cid=mm6819a3\\_w](https://www.cdc.gov/mmwr/volumes/68/wr/mm6819a3.htm?s_cid=mm6819a3_w)
- CDC Question & Answers for 2019 Recommendations:  
<https://www.cdc.gov/tb/topic/infectioncontrol/healthcarepersonnel-faq.htm>

# REFERENCES (CONT)

- Individual Risk Assessment - CDC sample:
  - <https://www.cdc.gov/tb/topic/infectioncontrol/pdf/healthCareSettings-assessment.pdf>
- CDC TB Website Healthcare Workers: <https://www.cdc.gov/tb/topic/testing/healthcareworkers.htm>
- Resources for TB Screening and Testing of Health Care Personnel:  
<https://www.cdc.gov/tb/topic/infectioncontrol/healthCarePersonnel-resources.htm>
- PA DOH TB site: <https://www.health.pa.gov/topics/programs/Tuberculosis/Pages/Providers.aspx>
- PA DOH Tuberculosis Education for Health Care Personnel:  
<https://www.health.pa.gov/topics/Documents/Diseases%20and%20Conditions/TB/TB%20Education%20for%20HCP.pdf>
- Homecare Regulations:  
<https://www.health.pa.gov/topics/Documents/Facilities%20and%20Licensing/Chapter611.pdf>
- CDC 2 step process: <https://www.cdc.gov/tb/topic/testing/healthcareworkers.htm>



QUESTIONS?  
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