

TB ELIMINATION

The facility must screen all employees for tuberculosis within two weeks of employment and annually, according to Center for Disease Control (CDC) guidelines. All persons providing services under an outside resource contract must, upon request of the nursing facility, provide evidence of compliance with this requirement.

All residents should be screened upon admission and after exposure to tuberculosis, in accordance with the attending physician's recommendations and CDC guidelines.

See the attached two charts to assist your facility in maintaining compliance with CDC and the Texas Department of State Health Services, TB Elimination Division. DSHS also states on annual testing to note that booster testing or Two step skin testing is useful when PD testing of adults is to be repeated periodically. Two step testing can be used to reduce the likelihood that a "boosted" reaction is misinterpreted as a new infection. For health care workers who have not had a documented negative PPD test result during the preceding 12 months, the baseline PPD testing should employ the two-step method; this will detect boosting phenomena that might be misinterpreted as a skin-test conversion. A second test should be performed 1-3 weeks after the first test. If the second test result is positive, this is most likely a boosted reaction, and the health care worker should be classified as previously infected. If the second test result remains negative, the health care worker is classified as uninfected, and a positive reaction to a subsequent test is likely to represent a new infection with *M. tuberculosis*. Should this occur, a chest x-ray to rule out current disease is in order. Keep this information in mind when using the attached charts.

Facilities must have written policies for the control of communicable diseases in employees and residents, the attached charts can be utilized as part of your policies.