

Tuberculosis (TB) Screening in Long-term Care and Retirement Homes

Recommendations for employees and volunteers

The following assessment must be initiated within 6 months before starting work or within 14 days of starting work:

Person with unknown TST	
Two-step TST is required	
Both tests are negative	Either test is positive
▼	▼
No further testing is recommended	Refer to *Person with a positive TST

Person with documented results of previous two-step TST		
Both tests were negative		Any previous test was positive
Done >6 months ago	Done <6 months ago	▼
▼	▼	Refer below to *Person with a positive TST
One-step TST is necessary Note: If the result of this TST is positive, refer below to *Person with a positive TST	No further testing is recommended	

*Person with a positive TST	
Report person with positive TST to local Health Unit	
<ul style="list-style-type: none"> A physical exam including symptom review and a chest x-ray are recommended to rule out pulmonary TB. Note: The chest x-ray can be from within the last three months unless the person is symptomatic. Further skin testing is not recommended. The person should be informed of the signs and symptoms of pulmonary TB. 	
▼	▼
<p style="text-align: center;">Person has symptoms of TB and/or an abnormal chest x-ray:</p> <ul style="list-style-type: none"> Collect 3 sputum samples at least 1 hour apart. Should not work until physician provides documentation that the person does not have infectious TB disease. 	<p style="text-align: center;">Person has no symptoms:</p> <ul style="list-style-type: none"> Can continue to work while physician completes assessment to rule out infectious TB.

Note: Persons with medical conditions that severely weaken the immune system may have a negative TST even though they have TB. Recommend further assessment by a specialist with expertise in TB (e.g. Infectious Disease Physician, Respiriologist).

Note: Volunteers include those who expect to work regularly during the next year (approximately a half day per week or more).

** Recommend further clinical assessment of staff and volunteers ≥ 65 with suspicious findings upon history and symptom review.