

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: _____