

Hennepin Technical College Practical Nursing Program

Baseline TB Screening Tool

_____ / _____ / _____
Last name, first name, middle initial

____/____/____
Date form completed

____/____/____
Date of birth

(____)_____
phone number

Baseline TB screening includes three components:

- (1) Assessing for current symptoms of active TB disease
and
- (2) Assessing practical nursing student's history
and
- (3) Testing for the presence of infection with *Mycobacterium tuberculosis* by administering either a single TB blood test *or* a two-step TST.

Symptoms of active TB disease (circle all that are present)

Coughing (>3 weeks)	Weight loss/poor appetite	Chest pain	Fatigue
Night sweats		Coughing up blood	Chest pain

Note: If TB symptoms are present, promptly refer practical nursing student for a chest X-ray and medical evaluation before starting work. Do not wait for the TST or TB blood test result.

Practical Nursing Student history (circle response)

Have you ever had a positive reaction to a TB skin test or TB blood test? Yes No

If yes: Date _____ Number of millimeters of induration _____

Have you had a TB skin test in the past 12 months? Yes No

If yes: Date _____ Number of millimeters of induration _____ Result _____

Comments

Have you ever had the BCG vaccine? Yes No

Have you ever been treated for latent TB infection? Yes No

Have you ever been treated for active TB disease? Yes No

Have you ever had an adverse reaction to a TB skin test? Yes No

Have you received a live-virus vaccine within the past 6 weeks? Yes No

Health Care Provider Signature: _____

TB Blood Test

Name of TB blood test (circle)	QuantiFERON TB-Gold QuantiFERON-TB-Gold InTube T-SPOT
Date of blood draw	
Results	
Interpretation of reading (circle)	Positive* Negative Indeterminate
Healthcare provider signature	

*Refer student for a chest x-ray and medical examination to rule out active infectious TB disease

Process for Second Step Tuberculin Skin Test (TST)

Visit 1 (day 1) : First Step TST- a student receives first step mantoux. Schedule to have the first step read within 48-72 hours later.

Visit 2 (day 2 or 3) : The student **needs** to have the first step TST read. This visit is 48-72 hours after the first step TST was placed. A student who does not return within 72 hours will need to be rescheduled for another first step TST. At this visit, schedule to have the second step placed 1-3 weeks later.

Visit 3 (day 7-21): Second Step TST placed at this visit (1-3 weeks after the first step mantoux is given). Schedule a time to have the second step TST read 48-72 hours later.

Visit 4 (48-72hours after second step TST placed): have Second step TST read at this visit.

Tuberculin skin testing (TST)

	TST – First Step	TST– Second Step(1-3 weeks after first step placed)
Administration		
Name of person administering test		
Date and time administered		
Location (circle)	L forearm R forearm Other:_____	L forearm R forearm Other:_____
Tuberculin manufacturer		
Tuberculin expiration date and lot #		
Signature of person who administered test		
Results (read 48-72 hours after placement)		
Date and time read:		
Number of mm of induration: (across forearm)	____ mm	____ mm
Interpretation of reading* (circle) <small>*Consult grid at www.health.state.mn.us/divs/idepc/diseases/tb/candidates.pdf</small>	Positive ** Negative*** (if negative, schedule second step in one to three weeks)	Positive ** (if positive, refer student for chest x-ray to rule out active TB disease) Negative
Reader's signature		