

# Tuberculosis (TB) Risk Assessment

Child Health Services

Circle Yes or No.

- |  |     |    |
|--|-----|----|
| 1. Does the child have any symptoms of TB (cough, fever, night sweats, loss of appetite, weight loss or fatigue) or an abnormal chest X-ray? | Yes | No |
| 2. Has the child been in close contact to a person sick with active TB disease?  | Yes | No |
| 3. Was the child born outside the United States or has the child traveled outside the United States?   | Yes | No |
| 4. Does the child have a household member who was born outside the United States or who has traveled outside the United States?              | Yes | No |
| 5. Is the child exposed to a person who  | Yes | No |
| • Is currently in jail or who has been in jail in the past 5 years?  |     |    |
| • Has HIV?   |     |    |
| • Is homeless?   |     |    |
| • Lives in a group home?   |     |    |
| • Uses illegal drugs?  |     |    |
| • Is a migrant farm worker?  |     |    |
| 6. Does the child have HIV, at risk to have HIV or any other health problem that lowers the immune system?                                   | Yes | No |
| 7. Is the child/teen in jail or ever been in jail?   | Yes | No |

**Refer to Instructions for any "Yes" answer.**

# Tuberculosis (TB) Risk Assessment

## INSTRUCTIONS

Child Health Services

Tuberculosis risk assessment should be performed at first contact with a child and every 6 months thereafter for the first 2 years of life. After 2 years of age, risk assessment for tuberculosis should be performed annually. A Mantoux tuberculin skin test (TST) should be performed by a trained healthcare provider and read 48-72 hours later by a trained healthcare provider. **Any positive TST in a child <5 years of age is reportable to the local county health department.** Any child with latent TB infection (LTBI) should be treated with Isoniazid for 9 months in conjunction with the local county health department. Children <15 years of age need directly observed preventive therapy (DOPT).

**A "yes" answer to question #1 or #2 indicates the child should have an immediate tuberculin skin test (TST) regardless of age.** *NOTE: If the TB skin test result is negative for a child less than six (6) months, please retest the child at six (6) months of age.*

1. Does the child have any symptoms of TB (cough *lasting more than 2 weeks*, unexplained fever, night sweats, loss of appetite, weight loss or fatigue) or an abnormal chest X-ray *consistent with TB*?  
If yes,
  - Notify local county health department **immediately**
  - Medical evaluation for active TB disease and chest X-ray is needed
2. Has the child been in close contact to a person sick with active TB disease?  
If yes,
  - Notify local county health department **immediately**
  - Medical evaluation for active TB disease and chest X-ray is needed
  - For children <5 years, after active TB has been ruled out by medical evaluation and chest X-ray, INH therapy should be initiated during the window period under directly observed preventive therapy (DOPT) until the follow-up TST is done (8 – 10 weeks).

**A "yes" answer to question #3, #4, or #5 indicates the child should have an initial TST. Additional TSTs should only be done when a new risk factor/exposure occurs.** *NOTE: If the TB skin test result is negative for a child less than six (6) months, please retest the child at six (6) months of age.*

3. Was the child born outside the United States or has the child traveled outside the United States?  
*ASK: Was the child born in Africa, Asia, Latin America or Eastern Europe?*  
*ASK: Has the child traveled there and stayed with family/friends?*
  - If the child is well, the TST should be delayed for up to 10 weeks after travel return
4. Does the child have a household member who was born outside the United States or who has traveled outside the United States?  
*ASK: Was the household member born in Africa, Asia, Latin America or Eastern Europe?*  
*ASK: Has that household member traveled there since the child's birth and stayed with family/friends?*
  - If the child is well, the TST should be delayed for up to 10 weeks after exposure to traveler
5. Is the child exposed to a person who
  - Is currently in jail or who has been in jail in the past 5 years?
  - Has known HIV?
  - Is homeless?
  - Lives in a group home?
  - Uses illegal drugs?
  - Is a migrant farm worker?

**A "yes" answer to question #6 or #7 indicates the child should have an initial TST, regardless of age, and then an annual TST.** *NOTE: If the TB skin test result is negative for a child less than six (6) months, please retest the child at six (6) months of age.*

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|--|-----|----|
| 6. Does the child have HIV, at risk to have HIV or any other health problem that lowers the immune system? | Yes | No |
| 7. Is the child/teen in jail or ever been in jail?   | Yes | No |