**Washington College**

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**American College Health Association Guidelines for Tuberculosis Screening and Targeted Testing of All College & University Students (updated 12 June 2023)**

***Part I: Tuberculosis (TB) Screening Questionnaire (to be completed by all incoming students)***

***Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_ Student ID #\_\_\_\_\_\_\_\_\_\_\_\_\_***

Month /Day /Year

**Have you ever had close contact with persons known or suspected to have active TB disease? ❑ Yes ❑ No**

**Were you born in one of the countries or territories listed below that have a high incidence of active TB disease? (If yes, please *CIRCLE* the country, below.) ❑ Yes ❑ No**

* Afghanistan
* Algeria
* Angola
* Anguilla
* Argentina
* Armenia
* Azerbaijan
* Bangladesh
* Belarus
* Belize
* Benin
* Bhutan
* Bolivia (Plurinational State of) Bosnia and Herzegovina
* Botswana
* Brazil
* Brunei Darussalam
* Burkina Faso
* Burundi
* Côte d'Ivoire
* Cabo Verde
* Cambodia
* Cameroon
* Central African
* Republic
* Chad
* China
* China, Hong Kong SAR
* China, Macao SAR
* Colombia
* Comoros
* Congo
* Democratic People's
* Republic of Korea
* Democratic Republic
* of the Congo
* Djibouti
* Dominican Republic
* Ecuador
* El Salvador
* Equatorial Guinea
* Eritrea
* Eswatini
* Ethiopia
* Fiji
* Gabon
* Gambia
* Georgia
* Ghana
* Greenland
* Guam
* Guatemala
* Guinea
* Guinea-Bissau
* Guyana
* Haiti
* Honduras
* India
* Indonesia
* Iraq
* Kazakhstan
* Kenya
* Kiribati
* Kyrgyzstan
* Lao People's
* Democratic Republic
* Latvia
* Lesotho
* Liberia
* Libya
* Lithuania
* Madagascar
* Malawi
* Malaysia
* Maldives
* Mali
* Malta
* Marshall Islands
* Mauritania
* Mexico
* Micronesia Federated states
* Mongolia
* Morocco
* Mozambique
* Myanmar
* Namibia
* Nauru
* Nepal
* Nicaragua
* Niger
* Nigeria
* Niue
* Northern Mariana
* Islands
* Pakistan
* Palau
* Panama
* Papua New Guinea
* Paraguay
* Peru
* Philippines
* Qatar
* Republic of Korea
* Republic of Moldova
* Romania
* Russian Federation
* Rwanda
* Sao Tome and
* Principe
* Senegal
* Sierra Leone
* Singapore
* Solomon Islands
* Somalia
* South Africa
* South Sudan
* Sri Lanka
* Sudan
* Suriname
* Tajikistan
* Thailand
* Timor-Leste
* Togo
* Tokelau
* Tunisia
* Turkmenistan
* Tuvalu
* Uganda
* Ukraine
* United Republic of Tanzania
* Uruguay
* Uzbekistan
* Vanuatu
* Venezuela (Bolivarian Republic of)
* Viet Nam
* Yemen
* Zambia
* Zimbabwe

Source: World Health Organization Global Health Observatory, Tuberculosis Incidence. Countries with average incidence rates of ≥ 20cases per 100,000 population.

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***Part I: Tuberculosis (TB) Screening Questionnaire (to be completed by all incoming students) continued-***

Have you resided in or traveled to one or more of the countries or territories listed above for a period of

one to three months or more? (If yes, CHECK the countries or territories, above) ❑ Yes ❑ No

Have you been a resident, volunteer, and/or employee of high-risk congregate settings (e.g., correctional

facilities, long-term care facilities, and homeless shelters)? ❑ Yes ❑ No

Have you been a volunteer or health care worker who served clients who are at increased risk for active

TB disease? ❑ Yes ❑ No

Have you ever been a member of any of the following groups that may have an increased incidence of

latent M. tuberculosis infection or active TB disease: medically underserved, low-income, or abusing

drugs or alcohol? ❑ Yes ❑ No

***If you answered YES to any of the above questions Washington College requires that you receive TB testing, ordered by your doctor at home, prior to the start of your first enrolled term. If the answer to all the above questions is NO, no further testing or further action is required.***

**Part II. Clinical Assessment/Targeted Testing by healthcare provider for students with positive screening**

Clinicians should review and verify the information in Part I above. Persons answering YES to any of the questions in Part I are candidates for either Mantoux tuberculin skin test (TST) or Interferon Gamma Release Assay (IGRA) unless a previous positive test has been documented. **Please circle Yes or No for each question below**

History of a positive TB skin test or IGRA blood test? (If yes, document below)Yes No

History of BCG vaccination? (If yes, consider IGRA if possible.) Yes No

1. TB Symptom Check

Does the student have signs or symptoms of active pulmonary tuberculosis disease? Yes No

**If no, proceed to 2 or 3.**

**If yes**, check below:

❑ Cough (especially if lasting for 3 weeks or longer) with or without sputum production

❑ Coughing up blood (hemoptysis)

❑ Chest pain

❑ Loss of appetite

❑ Unexplained weight loss

❑ Night sweats

❑ Fever

Proceed with additional evaluation to exclude active tuberculosis disease including chest x-ray (PA and lateral) and sputum evaluation as indicated.

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**Targeted Testing (IGRA or TST) for Students who screen positive**

**2. Interferon Gamma Release Assay (IGRA)**

Date Obtained: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (specify method) QFT T-Spot other\_\_\_\_\_\_\_\_\_\_

Month /Day /Year

Result: negative\_\_\_ positive\_\_\_ indeterminate\_\_\_ borderline\_\_\_ (T-Spot only)

Date Obtained: / / (specify method) QFT T-Spot other\_\_\_\_\_\_\_\_\_\_

Month /Day /Year

Result: negative\_\_\_ positive\_\_\_ indeterminate\_\_\_ borderline\_\_\_ (T-Spot only)

**3. Tuberculin Skin Test (TST)**

(TST result should be recorded as actual millimeters (mm) of induration, transverse diameter; if no induration, write “0”. The TST interpretation\*\* should be based on mm of induration as well as risk factors.

Date Given:\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Date Read: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Month /Day /Year Month /Day /Year

Result: ­­­ \_\_­­­­ mm of induration \*\*Interpretation: positive or negative

Date Given: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_ Date Read\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Month /Day /Year Month /Day /Year

Result: ­­­ \_\_\_\_\_­­­ mm of induration \*\*Interpretation: positive or negative

**4. Chest x-ray: (Required if IGRA or TST is positive. Note: a single PA view is indicated in the absence of symptoms.) Please send report with medical English interpretation.**

Date of chest x-ray: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Result: normal\_\_\_\_ abnormal\_\_\_\_

Month /Day /Year

**Part III. Considerations for Treatment of LTBI**

In deciding whether to recommend treatment of LTBI to individual patients, the clinician should weigh the likelihood of infection, the likelihood of progression to active tuberculosis infection, and the benefit of therapy. Students in the following groups are at increased risk of progression from LTBI to active TB disease and should be prioritized to begin treatment as soon as possible. Please check any that apply to this student.

❑ Infected with HIV

❑ Recently infected with M. tuberculosis (within the past 2 years)

❑ History of untreated or inadequately treated TB disease, including persons with fibrotic changes on chest

radiograph consistent with prior TB disease

❑ Receiving immunosuppressive therapy such as tumor necrosis factor-alpha (TNF) antagonists, systemic corticosteroids equivalent to/greater than 15 mg of prednisone per day, or immunosuppressive drug therapy, following organ transplantation

❑ Diagnosed with silicosis, diabetes mellitus, chronic renal failure, leukemia, or cancer of the head, neck, or lung

❑ Have had a gastrectomy or jejunoileal bypass

❑ Weigh less than 90% of their ideal body weight

❑ Cigarette and e-cigarette smokers and persons who abuse drugs and/or alcohol