#### City and County of San Francisco

Population Health Division
Department of Public Health



#### **Tuberculosis Control Program**

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# London Breed Mayor

# Policy for Tuberculosis Screening Requirement at Preschool and TK/K-12 School Entry Originally Issued 3 September 2014, <u>Updated 1 March 2019</u>

The Tuberculosis (TB) Prevention and Control Program at the San Francisco Dept. of Public Health strongly recommends a medical provider's risk assessment for TB infection as the universal screening requirement for school entry in the City and County of San Francisco, rather than universal TB testing with a skin or blood test. Only children identified by their provider as having one or more risk factors for TB infection are required to have a TB skin or blood test prior to school entry. Children with no risk factors identified do not require TB testing.

The policy applies to both Preschool and TK/K-12 school entry. Children who were screened before Preschool should also be screened for TB within 1 year prior to entering a TK/K-12 school in SF.

The purpose of assessing children for TB upon school entry is: (1) to identify opportunities for preventive treatment of TB infection; and (2) to detect active TB disease in children as early as possible to reduce transmission to others.

# **Rationale for Universal TB Risk Assessment:**

TB testing in low risk children can have undesirable consequences. There can be increased and unnecessary costs to families, as many insurance plans do not cover the costs of TB tests in low risk children. National shortage of TB skin testing solution (as occurred in 2013) can lead to low risk children having limited options to complete the testing requirement and delayed school entry. The alternate test, the TB blood test, can be costly. Testing of low risk children also results in more false positive results that prompt initiation of unnecessary evaluation and treatment.

The Universal TB Risk Assessment policy has been adopted by the SF Unified School District and is consistent with guidelines by the American Academy of Pediatrics, US Preventive Services Task Force, CA Health and Disability Program, CDPH Tuberculosis Branch, and the CA TB Controllers' Association. These guidelines take into consideration the higher rates of TB in CA and support the Universal TB Risk Assessment as a safe and effective approach for TB screening in low risk children.

#### Rationale for 1 March 2019 update:

Starting with the 2019-20 school year, the California School Immunization Record, or "Blue Card" will no longer contain sections to record TB Assessment/Testing results or a signature line for parents to claim a Personal Beliefs Exemption for TB Assessment. Therefore, we propose an alternate method to record the results of the TB Risk Assessment and TB testing.

In addition, our updated recommendations align with the California TB Controllers' Association and California Department of Public Health, which has recently simplified the list of risk factors that necessitate TB testing, such that fewer children would be required to be tested.

### **RECOMMENDATION:**

The Tuberculosis Prevention and Control Program strongly recommends that all Preschools and TK/K-12 Schools in the City and County of San Francisco adopt a <u>Universal TB Risk Assessment</u> policy for TB screening, requiring TB testing only in those with risk factors for TB infection. TB screening is required for first entry both to Preschool and TK/K-12 school in SF. A signature by the child's health provider attesting to "no risk factors for TB" should be sufficient for school entry for low risk children.

# Information for Health Care Providers – TB Risk Factors, Testing, and Referrals

Risk factor screening or TB testing must occur within 1 year before first entry (i.e. first day of attendance) to school in SF (both Preschool and TK/K-12 school)

#### Risk factors for TB infection in children:

- Birth, travel, or residence in a country with an elevated TB rate (includes any country other than the United States, Canada, Australia, New Zealand, or a country in western or northern Europe)
- Immunosuppression, current or planned (examples include HIV infection, organ transplant recipient, TNF-alpha antagonist, steroids, or other immunosuppressive medication)
- Have a family member or contact with a history of confirmed or suspected TB

If the child has <u>one or more risk factors for TB</u>, the provider should perform a TB symptom review and administer a TB test (tuberculin skin test or interferon gamma release assay blood test / IGRA).

The <u>TB symptom review</u> consists of an assessment of:

- Cough > 3 weeks
- Coughing up blood
- Fever
- Weight loss or concerns about appropriate growth and development
- Night sweats

If the TB test is positive or a child has one or more symptoms suggesting active TB disease, a chest X-ray should be obtained.

Document on the school health record as suggested below.

All San Francisco children suspected of having TB disease should be reported to the San Francisco TB Clinic at Ward 94, SF General Hospital (415-206-8524) for evaluation and clearance for school entry.

## **Documentation**

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We recommend that providers and schools use the following format for documentation.
☐ Child has no risk factors for TB and does not require TB testing (skip "Results of TB testing", sign below)
$\Box$ Child has one or more risk factors for TB and requires TB testing (complete "Results of TB testing", sign below)
Results of TB testing:  TB Test:   Mantoux / TST   IGRA Blood Test  Date:   Induration:   Impression:   Positive   Negative  Negative
CXR: Required with positive TB test or positive TB symptom review CXR Date: Impression: □ Normal □ Abnormal Prescribed Treatment and duration:
Health Care Provider Signature Date