

**Texas Department of State Health Services (DSHS)  
Recommendations for Tuberculosis Screening for  
School Aged Children**

1. Assessing the risk of TB in school children should continue to be a service determined by the prevalence of risk factors for TB infection in school age children in each community. Working with the public health system, school districts can determine whether or not to establish a TB screening program. TB screening programs' access to TB testing resources should be assessed in consultation with the local or regional health department or the DSHS TB and Hansen's Disease Branch.
2. Decisions to screen school children should be made on the basis of sound public health principles and guidelines. To this end, the Centers for Disease Control and Prevention, the American Thoracic Society and the American Academy of Pediatrics recommend that only high-risk children be skin tested or blood tested for tuberculosis.
3. A universal questionnaire to identify children at high risk for TB infection has been developed by experts working with the Texas Department of State Health Services. This questionnaire should be used to determine a child's risk for TB infection and thus target TB testing to identified high-risk individuals. Any new affirmative answers to a part of the questionnaire should trigger referral for or placement of a tuberculin skin test or referral for a TB blood test and appropriate follow-up.
4. TB skin testing/blood testing programs should only be developed if follow up services including access to medical evaluation and treatment are provided. Once identified, children with a positive test result will require a chest x-ray and medical evaluation. To place a skin test or perform a blood test and not offer such services defeats the public health purpose of TB testing.
5. Skin test or blood test positive children who do not have signs or symptoms of TB disease should not be excluded from school while medical evaluation is in progress.
6. TB screening and/or skin/blood testing programs for school children should include a system to keep track of data collected and the tools to evaluate and analyze the data and the program on a regular basis. Collaboration with local/regional health departments to develop such data tracking systems is encouraged. (Such systems would include a list of variables, a contact name to receive and review submitted data and answer questions, and a method for periodic data analysis and evaluation.)

7. Because screening programs have a social impact, the managers of such programs must have in place strategies that prevent any implications of discrimination and disenfranchisement of individuals screened. Information gained from use of a screening questionnaire should be subject to the same standards for confidentiality that are observed for other school medical records. Administration of the questionnaire should be sensitive to the cultural and language differences of the individuals screened.
8. If a TB screening program is indicated, school districts must join the public health system in sharing the burden of implementation for such a program.
9. Policies for evaluating for TB infection in children will be periodically examined by the Blue Ribbon Committee on Childhood Tuberculosis.

### **Definitions**

**Screening:** A process of identifying individuals with risk factors for a medical condition. It may include gaining information through questions and a diagnostic test or procedure.

**Tuberculin skin test:** A diagnostic test that measures an individual's immune response to a test solution containing specific proteins associated with the bacteria that cause tuberculosis. It is classified as positive or negative depending on the size of the intradermal induration and the patient's risk factors for TB. Please note that a positive reaction to the tuberculin skin test in a person who does not have TB infection may be the result of recent vaccination with BCG or infection with other closely related bacteria that do not cause tuberculosis.

**BCG:** Bacille Calmette-Guérin, (BCG) is a vaccine for TB disease that is used in many countries but rarely used in the United States.

**TB infection:** The condition where tuberculosis bacteria are present in the body but are blocked by the immune system from causing disease. The person with TB infection will usually have a positive reaction to a Mantoux skin test or TB blood test, but does not have any symptoms of disease and cannot transmit tuberculosis bacteria to another person. Treatment is provided for those with TB infection to prevent development of active TB disease.

**TB disease:** The condition where tuberculosis bacteria overcome the immune response and cause symptoms of illness and the possibility that the person can transmit tuberculosis bacteria to another person. Shortly after appropriate treatment begins, the person is no longer able to transmit tuberculosis bacteria.