Policy Information

Series 6000 - Students

Tuberculousis Testing Program Policy # 6521, 5.2.1

POLICY

2003 6521

Students

SUBJECT: Tuberculosis Testing Program

The Board of Education is committed to provide a safe and healthful work environment for our staff and students. It believes that effective precautions and work practice controls are the best methods for the containment of potentially infectious materials, thereby providing employees, students, and others in the community with the best protection against exposure to contagious diseases.

Consistent with this belief, the BOCES has established a Tuberculosis Testing Program whereby employees and students deemed as at a greater risk of exposure to and/or spread of tuberculosis (TB) will be offered a tuberculosis test, annually, at BOCES expense. The current test type commonly given for TB is the PPD test (Purified Protein Derivative, also known as the Mantoux tuberculin skin test).

Prior to PPD testing, the selected "at greater risk" groups will have information provided to them about TB and the PPD test (e.g. Centers for Disease Control: "Tuberculosis Fact Sheets", attachment-1). They will also have had an opportunity to have questions answered.

The District Superintendent or designee will provide for the administration of the Tuberculosis Testing Program to include the following:

- Designation of "at greater risk of TB/infection/Transmission" staff and student groups
- Training as needed for above designated groups
- PPD Testing
- Record-keeping practices
- Program review/revision

Board Approved 2/18/04

2003

R-6521-1

ADMINISTRATIVE REGULATIONS Students

Subject: Tuberculosis Testing Program

Employee Groups "At Greater Risk" of TB Infection/Transmission

Designation of "at greater risk of tuberculosis (TB) infection/transmission" groups involves an analysis of

activities, job tasks or classifications for their potential exposure to and subsequent transmission of TB. The BOCES has performed such an exposure determination analysis has designated the following activities, groups and/or work tasks with "at greater risk" potential.

Food Handling Services Child-Care Services School Nurses, School Nurse Teachers Cosmetology

Training

Regardless of whether or not employees within the designated "at greater risk of TB infection/transmission groups receive the PDD Test, the importance of proper hygiene (hand- washing) must be stressed. The information on the Centers for Disease Control (CDC) "Tuberculosis Fact Sheets" (attachment-1) is provided as a summary about TV and the PPD Test. It is also important to provide employees the opportunity to have their questions answered by an appropriate health care professional (e.g., physician, school nurse).

Purified Protein Derivative (PPD) Testing for Tuberculosis (TB)

PPD testing (Also called Mantoux testing or Mantoux tuberculin skin testing) will be offered, at no cost, to designated "at greater risk" employees and students. PPD testing involves the injection of a small amount of tuberculin fluid under the skin (subcutaneous), in the lower part of the arm. A "positive" PPD test is evidenced by raised skin at the test site ("induration") within two to three days as is indicative of past tuberculin exposure. It does not constitute proof of active TB disease, only of previous exposure. In this case (positive PPD test), follow-up confirmation testing must be done (e.g. chest x-ray and phlegm sampling). If known from previous PPD testing that a person test positive, an alternate test should be substituted (e.g. negative chest x-ray and an annual physician's statement verifying no sign of symptoms). If the PPD test is given by in-house personnel (e.g., school nurses), then the TB-PPD (Tuberculosis Purified Protein Derivative) Test Records must be completed to include the following data: manufacturer, lot number, expiration date, vial opening date, testing/reading dates and reactions, if any (attachment-2).

Record-keeping

Medical Records are maintained for each employee or student with greater risk potential of exposure to/transmission of tuberculosis. The Personnel Office is responsible for the maintenance of such employee records which will be kept confidential and not disclosed to any person other than the employee or his/her designee without written permission from the employee except as required by law. Student PPD-Test records will be placed in the student's medical file and will be kept in a likewise confidential manner. Medical records will include the following:

- Employee name and Social Security number., or as may be the case, student name
- TB-PD test results, test dates.
- If vaccine given in-house: the TB-PPD Test Records (Attachment-3).

Tuberculosis Test Program: Reviews and Revisions

The Tuberculosis Test Program will be reviewed and updated at least annually and as necessary to reflect new or modified employee or student procedures which may affect TB exposure or transmission.

Board Approved 02/18/04

TUBERCULOSIS General Information

Tuberculosis (TB) is caused by the microorganism Mycobacterium tuberculosis.

M. Tuberculosis is carried in airborne particles, or droplet nuclei, that can be generated when persons who have pulmonary or laryngeal TB sneeze, cough, speak or sing. The particles are 1-5 micro-meters (um) in size, and normal air currents can keep them airborne for prolonged time periods and spread them throughout a room or building. Infection occurs when a susceptible person inhales droplet nuclei containing M. tuberculosis, and these droplet nuclei traverse the mouth or nasal passages, upper respiratory tract, and bronchi to reach the alveoli of the lungs. Once in the alveoli, the organisms are taken up by alveolar macrophages, a type of white-blood- cell, and spread throughout the body. Usually within 2-10 weeks after initial infection the immune response limits further multiplication/spread, but some of the infectious agent can remain dormant and viable for years ("latent TB infection"). Persons with latent TB infection have positive purified derivative (PPD)-tuberculin skin-test results, but they do not have symptoms of active TB, and they are not infectious.

In general, persons who become infected with M. tuberculosis have approximately a 10% risk for developing active TB during their lifetimes. The risk is greatest during the first two years after infection. Immunocompromised persons have a greater risk for progression of latent TB infection to active TB disease. HIV infection is the strongest known risk factor for this progression.

The probability that a person who is exposed to M. tuberculosis will become infected depends primarily on the concentration of infectious droplet nuclei in the air and the duration of exposure. Environmental factors that enhance the likelihood of transmission include: exposure in relatively small enclosed spaces, inadequate local or general ventilation (insufficient dilution/removal) and recirculation of air containing infectious droplet nuclei. Vaccination with Bacille of Calmette and Guerin (BCG) probably does not affect the risk of infection, but rather, decreases the risk of progressing from latent TB infection to active TB.

CDC Tuberculosis Fact Sheet

What is a Tuberculin Skin Test?

The tuberculin skin test is used for finding out whether a person is infected with the TB germs. It does not tell whether a person has TB disease. For the skin test, a small amount of fluid called tuberculin is injected under the skin in the lower part of the arm. Two or three days later, a health care worker looks for a reaction on the arm.

What Does a Positive Reaction Mean?

A positive reaction to the tuberculin skin test usually means that the person has been infected with the TB germ. It does not necessarily mean that the person has the TB disease. Other tests, such as a chest x-ray and a sample of phlegm, are needed to see whether the person has TB disease. People who have a positive reaction to the skin test but who do not have TB disease cannot spread the germs to others. They may be given a drug to treat the infection and prevent them from developing TB disease. People who have TB disease must take several drugs to cure the disease.

Skin Testing for Persons Who Have Been Vaccinated with BCG

BCG, or bacille Calmette-Guerin, is a vaccine for TB disease. BCG is used in many countries, but is not generally recommended in the United States. BCG vaccination does not completely prevent people from getting TB. People who have been vaccinated with BCG can be given a tuberculin skin test.

Treatment of Latent TB Infection

If you have latent TB infection but not TB disease, your doctor may want you to take a drug to treat the infection and prevent you from developing the disease. The decision about taking treatment for latent infection will be based on your age and on the chances that you will develop the disease. Some people are more likely than others to develop TB disease once they have TB infection; this includes: people with HIV infection, people who were recently exposed to someone with TB disease, and people with certain medical conditions.

Treatment for TB Disease

TB disease can be cured by taking several drugs for 6 to 12 months. It is very important that people who have TB disease take the drugs exactly as prescribed. If they stop taking the drugs too soon or if they do not take the drugs correctly, the germs that are still alive may become resistant to those drugs. TB that is resistant to drugs is harder to treat.

In some situations, staff of the local health department meet regularly with patients who have TB to help them remember to take their medications. This is called directly observed therapy.

F - 6521 - 1

Tuberculosis-Purified Protein Derivative Test Record							
Name:		Date of Birth:					
Last	First						
Address:		Cit	y:		7	Zip:	
Work Phone:		Home Phone:					
Have you ever had	Fuberculosis?	_NoYes	If yes, da	ate:			
Have you ever had a	a Tuberculosis Test?	No	_Yes				
If Yes, test type, dat	e, result:		Loca	ation:			
Medication allergies	s?No	_Yes If yes, list:					
Some of the more co days): Injection-site arm so Severe allergic react	preness (-50%), head	lache (-17%), tiredi	ness (-7%)	·	 ccination	, for 1-2	
Dates Given/Read	Test-Type Site	Vial-Open-Date	Exp. Date	Manufacturer	Lot #	Initials	

Reactions after test:NoYes	
Remarks:	
Name (Nurse Administering Vaccine)	Signature
Please forward completed form to Test Coordinate	or, who will forward on to the District Clerk.

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