

Adult Tuberculosis Risk Assessment

- Use this tool to identify asymptomatic **adults** for latent TB infection (LTBI) testing.
- **Do not repeat testing** unless there are **new** risk factors since last test.
- Do not treat for LTBI until active TB disease has been excluded:
For patients with TB symptoms or an abnormal chest x-ray consistent with active TB disease, further evaluation may be needed such as: sputum AFB smears, cultures and nucleic acid amplification testing. A negative tuberculin skin test or interferon gamma release assay does not rule out active TB disease.

LTBI testing is recommended if any of the three boxes below are checked.

Born, live, or travel in a country with an elevated TB rate for at least one month.

- The duration of at least one consecutive month to trigger testing is intended to identify travel most likely to involve TB exposure.
- Includes any country other than the United States, Canada, Australia, New Zealand, or a country in western or northern Europe.
- If resources require prioritization within this group, **prioritize** patients with at least one medical risk for progression (see Adult TB Risk Assessment User Guide for this list).
- Interferon Gamma Release Assay is preferred over Tuberculin Skin Test for non-U.S.-born persons ≥ 2 years old.

Immunosuppression, current or planned.

HIV infection, organ transplant recipient, treated with TNF-alpha antagonist (e.g., infliximab, etanercept, others), steroids (equivalent of prednisone ≥ 15 mg/day for ≥ 1 month) or other immunosuppressive medication.

Close contact to someone with infectious TB disease during lifetime.

Treat for LTBI, if LTBI test result is positive and active TB disease is ruled out.

None; no TB testing is indicated at this time.

Provider: _____
 Assessment Date: _____

Patient Name: _____
 Date of Birth: _____
(Place sticker here if applicable)

See the [Adult TB Risk Assessment User Guide](#) (pages 2-3) for more information about using this tool.

Pediatric Tuberculosis Risk Assessment

- Use this tool to identify asymptomatic **children** for latent TB infection (LTBI) testing.
- **Do not repeat testing** unless there are **new risk factors** since last test.
- Do not treat for LTBI until active TB disease has been excluded:
For patients with TB symptoms or an abnormal chest x-ray consistent with active TB disease, further evaluation may be needed such as: sputum AFB smears, cultures and nucleic acid amplification testing. A negative tuberculin skin test or interferon gamma release assay does not rule out active TB disease.

LTBI testing is recommended if any of the three boxes below are checked.

Born, live, or travel in a country with an elevated TB rate for at least one month.

- The duration of at least one consecutive month to trigger testing is intended to identify travel most likely to involve TB exposure.
- Includes any country other than the United States, Canada, Australia, New Zealand, or a country in western or northern Europe
- TB testing should occur at least 8 weeks after the child left the country with elevated TB prevalence
- Interferon Gamma Release Assay is preferred over Tuberculin Skin Test for non-U.S.-born persons ≥ 2 years old

Immunosuppression, current or planned.

HIV infection, organ transplant recipient, treated with TNF-alpha antagonist (e.g., infliximab, etanercept, others), steroids (equivalent of prednisone ≥ 2 mg/kg/day, or ≥ 15 mg/day for ≥ 2 weeks) or other immunosuppressive medication

Close contact to someone with infectious TB disease during lifetime.

Treat for LTBI if LTBI test result is positive and active TB disease is ruled out.

None; no TB testing is indicated at this time.

Provider: _____

Assessment Date: _____

Patient Name: _____

Date of Birth: _____

(Place sticker here if applicable)

See the **Pediatric TB Risk Assessment User Guide** (page 2 and 3) for more information about using this tool.