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PRACTICAL PEARL: TB Screening and Management

INTRODUCTION	 2 TB manifestations Latent tuberculosis (positive screening test + normal CXR) Active disease 2 screening tests Tuberculin skin test (TST) Interferon-gamma release assay (IGRA) (i.e., T-spot® and QuantiFERON®GOLD) IGRAs For children ≥ 5 years Preferred screening test for BCG vaccine recipients ≥ 5 years Recent guidelines on appropriate evaluation for TB: http://cid.oxfordjournals.org/content/early/2016/12/08/cid.ciw694.full.pdf+html
INITIAL EVALUATION AND MANAGEMENT BY PRIMARY CARE	 Determine if screening indicated Exposure to confirmed/suspected active disease Suspicious clinical and/or X-ray findings Recent immigration from a country with endemic TB Travel histories to TB-endemic countries and/or substantial contact with people from such countries If screening indicated, determine most appropriate test (IGRA vs. TST): https://redbook.solutions.aap.org/data/Books/1484/fig3-13.jpeg Those with positive test: Obtain CXR to look for active disease Low-risk healthy children ≥ 5 years with positive TST and normal CXR: strongly consider getting IGRA before referral False-positive TST results can occur for multiple reasons
WHEN TO REFER	 Children < 5 years Exposure to active disease, regardless of TST results Positive TST, regardless of CXR findings Children ≥ 5 years with indeterminate and/or positive IGRA
HOW TO REFER	 Contact MA DPH TB Clinic Office located at Baystate's Mason Square Clinic: 794-5435 For more urgent issues, please contact the Pediatric ID doctor on call
WHAT TO EXPECT FROM BAYSTATE CHILDREN'S HOSPITAL VISIT	 Current patient information, pertinent medical records, and immigration records (if applicable) will be requested for review prior to the visit Due to the nature of some patients' symptoms, other referrals or inpatient admission for additional evaluation/management may be recommended

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