

Documentation Checklist

(Also applies to residents of care facilities)

Pre-employment/Baseline Documentation:

- Baseline Screening Form:** risk factors, TB history, and symptom checklist (example **Appendix 3**)

- For those without documented history of LTBI or TB: **Baseline TB testing:** IGRA (QFT or T-spot) **or** TST (Might be combined with screening form to be one document)
 - For low risk individuals who have a second confirmatory test, if the second is negative, that is acceptable as “negative.” See FAQs for more information.
 - The negative IGRA (QFT or T-spot) or TST should be dated within 12 months of start date
 - If positive, per [2019 MMWR](#): *“Health care personnel with a newly positive test result (with confirmation for those persons at low risk as described previously) should undergo a symptom evaluation and chest radiograph to assess for TB disease. Additional workup might be indicated on the basis of those results.” “Health care personnel with LTBI and no prior treatment should be offered, and strongly encouraged to complete, treatment with a recommended regimen, including short-course treatments, unless a contraindication exists.”*
 - Optional documentation for those that decline LTBI treatment: **Appendix 4**. Depending on occupational health and facility policies, this may not be part of employee health.

- For those with documented LTBI/ history of TB: Documentation that they are free of infectious TB
 - Per [2019 MMWR](#): *“Health care personnel with a prior positive TB test and documented normal chest radiograph do not require a repeat radiograph unless they are symptomatic or starting LTBI treatment.” “Health care personnel with LTBI and no prior treatment should be offered, and strongly encouraged to complete, treatment with a recommended regimen, including short-course treatments, unless a contraindication exists.”*
 - Optional documentation for those with untreated LTBI that decline LTBI treatment: **Appendix 4**. Depending on occupational health and facility policies, this may not be part of employee health.

Annual Documentation:

- Annual symptom screening form for those with untreated LTBI (Example **Appendix 7**).
- Annual TB Education (see **Appendix 6**)
- Facility Risk Assessment: [Appendix B](#) of 2005 MMWR. (While reviewed annually, probably won’t have much in the way of updates.)
 - This risk assessment has not been updated. Suggested wording is available in **Appendix 1** and **Appendix 5**. For those sections that are not applicable to the facility, can be marked as N/A or crossed out.

If TB Exposure at Facility:

- Documentation of Local Health Department’s (LHD) contact investigation (CI) recommendations. If recommended by LHD, documentation that CI was performed and shared with LHD.
 - Note that not all TB is potentially infectious. The LHD may determine that there was no need for a CI based on site of disease (if no aerosolizing procedures were performed), or based on determined infectious period.