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To: Wisconsin Local Public Health Departments, Tribal Agencies and Infection Control Practitioners

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**New CDC Recommendations:
Tuberculosis Screening, Testing and Treatment of U.S. Health Care Personnel**

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Background

The Centers for Disease Control and Prevention (CDC) and the National Tuberculosis Controllers Association (NTCA) have released [“Tuberculosis Screening, Testing, and Treatment of U.S. Health-Care Personnel: Recommendations from NTCA and CDC, 2019”](#), published in the CDC’s Morbidity and Mortality Weekly Report (MMWR). The updated recommendations reflect the overall decrease of tuberculosis (TB) cases and the low incidence of TB among health care personnel in the United States due to occupational exposure.

These recommendations update the recommendations for TB screening and testing of health care personnel from the [Guidelines for Preventing the Transmission of *Mycobacterium tuberculosis* in Health-Care Settings, 2005](#). The recommendations for facility risk assessments and infection prevention and control practices are unchanged.

The Wisconsin Division of Public Health TB Program (WTBP), in collaboration with the Division of Quality Assurance (WDQA), has worked to align Wisconsin’s guidance with updated national recommendations.

Highlights from the New Recommendations

- Health care personnel should receive a baseline [individual TB risk assessment](#), [symptom screening](#), and TB testing (e.g., TB blood test or TB skin test) upon hire.
- CDC, NTCA and WTBP do not recommend annual TB testing for health care personnel unless there is a known exposure or ongoing transmission in a health care setting.
- Treatment for latent TB infection (LTBI) is strongly encouraged for health care personnel with positive TB test results and risk for infection. Active TB disease should be ruled out before LTBI treatment is started. Shorter course [LTBI treatment](#) regimens that are three to four months in duration are encouraged over the longer six- or nine-month treatment regimens because they are easier for people to complete.

- If health care personnel have untreated LTBI, they should be screened annually for [symptoms](#) of TB disease (e.g., a cough lasting longer than three weeks, unexplained weight loss, night sweats or a fever, and loss of appetite). The [Wisconsin TB Risk Assessment and Symptom Evaluation template \(F-02314\)](#) includes a symptom evaluation section.
- All health care personnel should receive annual TB education. TB education should include information on TB risk factors, the signs and symptoms of TB disease, and TB infection control policies and procedures.
- As part of annual training, WTBP recommends that facilities should include a TB screen for each individual using a [risk assessment questionnaire](#) as a standard of practice.

Contact Information

Please call the Wisconsin TB Program at 608-261-6319 or email DHSWITBProgram@dhs.wisconsin.gov with questions.