

Recommendations for Tuberculosis (TB) Screening in Elder Care, Long-Term Care and Retirement Homes

Recommendations for NEW Residents:

All new residents must undergo:

- 1. A history and physical examination by a physician/nurse practitioner within 90 days prior to admission or within 14 days of admission
- 2. A symptom review for active pulmonary TB disease
 - If there are concerning findings on the review of symptoms, order a chest x-ray and the collection of three sputum specimens for acidfast bacilli (AFB) and culture, collected at least one hour apart. Send these specimens to the Public Health Laboratory.

Note: It can take up to 8 weeks for a culture report.

Tuberculin skin tests (TSTs) are not recommended to be done upon admission for residents. If a TST was previously done, record the date and result of the most recent TST.

Management of Residents with Suspected Active TB Disease

- 1. If not admitted yet, do not admit and notify the Health Unit
- 2. If admitted, isolate the resident immediately using airborne precautions and notify the Health Unit
 - a. Single room with the door closed,
 - b. Limited interactions with staff and visitors,
 - c. Proper PPE (resident wears surgical mask when others are in the room; staff wear an N95 mask)
- 3. Seek immediate appropriate medical care, investigation, and follow up according to facility policies and procedures to rule out active TB
 - a. Obtain a chest x-ray,
 - b. Collect 3 sputum specimens (1 hours apart) using appropriate PPE and send to PHOL

Reporting Requirements for Tuberculosis

Under the Health Protection and Promotion Act, R.S.O. 1990, c. H.7, diagnoses of TB infection and cases of suspect, and confirmed active TB disease are reportable to the Health Unit. For information on how to report or to ask for advice related to TB infection or TB disease, please contact the Health Unit at 1-866-888-4577 ext. 1232, after hours at 1-888-255-7839 or email <u>outbreaks@hkpr.on.ca</u>. Medication for treatment of TB infection and TB disease is free through the Health Unit.



Recommendations for NEW employees and volunteers

Person with an undocumented previous 2-step TST		Person with documented results of a previous 2-step TST		*Person with a positive TST	
A 2-step TS If both tests are NEGATIVE No further testing is recommended	T is required If either test is POSITIVE Refer to *Person with a positive TST (right column)	If both tests were NEGATIVE A 1-step TST is necessary. Note: if the result of this TST is positive, refer to *Person with a positive TST.	If any previous test was POSITIVE Refer to *Person with a positive TST (right column)	 Report person with positive A physical exam including ray are recommended to read and the second secon	symptom review and a chest x- rule out active TB disease. recommended. rrmed of the signs and

Notes: Persons with medical conditions that severely weaken the immune system may have a negative TST even though they have TB infection. Recommend further assessment by a specialist with expertise in tuberculosis (e.g. Infectious Disease, Respirologist, TB Clinic). Volunteers include those who expect to work regularly during the next year (approximately a half day per week or more).

Requirements for Contract Workers and Students

Supplying agencies or schools are responsible for pre-placement TB assessment and follow-up. This should be clarified with agencies or schools to confirm that individual contract workers and/or students have had their TB skin test and any additional assessment as needed to rule out TB disease prior to starting the placement.

Regular Screening for Residents, Employees and Volunteers

Annual TB skin and/or chest x-rays testing is **not** recommended. If an infectious case of active TB disease occurs in the facility, contact follow-up will be coordinated by the local Health Unit. TB skin testing is free for individuals identified as a contact of a case of TB disease.

Reference: Canadian Tuberculosis Standards, 8th Edition. ID.TBSCNRES.FM.002.2.0 O: 2014 R: March 2025

1-866-888-4577

