

Stamford Public Schools Tuberculosis Screening Policy For School-Aged Children

Connecticut law delegates to local health departments the responsibility for determining appropriate tuberculosis screening policy for schoolchildren (Connecticut General Statutes Section 10-206(b)(4)).

The following policy, which is consistent with the May 2000 guidelines issued by the Connecticut Department of Public Health, shall be the policy of the Stamford Health Department.

At the time of mandatory health assessments, children that are not known to have a positive test for TB must be tested if:

- 1. Born in a high risk¹ country and do not have a documented test performed in the US.**
- 2. Have traveled to a high risk¹ country since their last mandatory health assessment.**
- 3. Have had extensive contact with people who have recently come to the US since their last mandatory health assessment.**
- 4. Had contact with a person(s) suspected to have tuberculosis.**
- 5. Have been living in a homeless shelter.**
- 6. Have HIV infection.**

For purposes of determining tuberculosis risk, a history of BCG vaccination should be considered to be irrelevant.

The intradermal injection (Mantoux) test should be used in preference to multiple puncture (Tine) tests. Results of the Mantoux test should be recorded in millimeters of induration. If a multiple puncture test is used, any reaction should be followed up immediately with a Mantoux test. Results of multiple puncture tests should be clearly recorded as “no reaction” or “reactive”.

¹ As of 8/28/2001, high risk countries include all countries in Africa, Asia (including the former Soviet Union), Russia, Eastern Europe, Central and South America, Dominican Republic and Haiti.