



DELAWARE HEALTH AND SOCIAL SERVICES

Division of Public Health TB Elimination Program

Frequently Asked Questions Regarding the Tuberculin Shortage

This document is provided in response to questions raised in recent weeks, and will be revised as conditions change. For additional information, including updated guidance, visit the Delaware Health Alert Network Notifications at <http://dhss.delaware.gov/dhss/dph/php/alertshan2013.html>

Please check back regularly.

Prior to making any change in TB testing/screening procedures, all responsible facilities (skilled nursing facilities, home health care etc.) or other entities (colleges, employers) for whom TB testing is mandated should verify that the change in process is acceptable to your regulatory authority.

How long may an opened vial of tuberculin be used?

*Once punctured, a vial may be used for up to 30 days, or until the expiration date on the vial, **whichever is earliest**. Write the date first used on the vial. The vial should always be kept refrigerated and protected from light (such as in a brown paper bag) when not in immediate use.*

Can a chest radiograph be used to in place of a tuberculosis screening or tuberculin test?

No. A chest radiograph is inappropriate as a screening tool. It is used to rule out active pulmonary tuberculosis and does not detect tuberculosis infection. Depending on availability and practicality, the Mantoux tuberculin skin test (TST), or interferon gamma release assay (IGRA) should be used where indicated, within the restricted guidance, or the TB signs and symptoms screening tool.

Should the TB Symptom Screening Questionnaire be used if the guidance directs doing a tuberculin test (such as new hire health care employees, correctional staff or new inmates or residents moving into adult care facilities)?

Yes. A medical screening should always be completed for anyone prior to having a skin test placed. A TST should be completed as soon as normal supplies resume (or use an IGRA). A sample symptom screening questionnaire can be accessed at <http://dhss.delaware.gov/dhss/dph/dpc/tbelimination.html>.

We have plenty of tuberculin on hand in our facility at this time, should we be concerned with following the restricted use guidelines during the shortage?

Yes, even if you believe you currently have an adequate supply of PPD solution, please follow the guidance as provided for restricted testing during this shortage. There may be other facilities in your community who do not have any tuberculin, and individuals may need to be referred to you, or you may be asked to share what PPD solution you have with other facilities to meet the need of your local community during this critical time of limited supply.

Is it OK to switch between Tubersol and Aplisol depending on what we have available?

No. Although research has found no clinically significant difference between the two available PPD solutions, there can be problems with false readings when switching between Tubersol and Aplisol if doing serial testing. It is best to stick with one product.

Is there a shortage of IGRA tests at this time?

No, IGRAs are readily available and are an excellent replacement for tuberculin skin tests, although the TST is preferred for children under age five. IGRAs should always be considered, based on your resources, instead of a deferring a test, or when it is clear that additional information regarding tuberculosis infection or disease would be beneficial.

Do we continue to test new hires in adult care facilities and correctional facilities?

Yes, as per the guidance, a screening for signs and symptoms of TB should be completed and a single step tuberculin skin test or IGRA should be given to all new hires who have neither documentation of a previous test which was done within the last twelve months, nor a previously documented positive test for tuberculosis infection, done at any time.

Should skin test be used in short-term skilled nursing units for new admissions?

No, all admissions to short term skilled nursing units may be screened with the TB Symptom Screening Questionnaire. However, this should be done in consultation with the Long Term Care Residents Protection Licensing Bureau, which can be reached at 302-577-6661

Should health care facilities be doing annual skin testing on a regular basis, even if Delaware is not in a time of product shortage?

In most cases the answer would be no. All health care facilities should be using the Tuberculosis Risk Assessment Tool annually to determine the need for annual screening programs. This tool and full guidance for implementation may be found at

http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5417a1.htm?s_cid=rr5417a1_e

Should school personnel and daycare new hire staff be tested with tuberculin at this time?

Not in most situations. Please complete the TB Symptom Screening Questionnaire to determine if immediate further evaluation is needed. If there are no indications of TB signs and symptoms, the screening form may be used as documentation to meet the regulatory screening requirements, and the tuberculin tests should be deferred at least three months, or until the shortage is over. There should be no annual testing conducted for these personnel, instead, screen for signs and symptoms using the above mentioned form where annual testing is required.

Should post-secondary (college and university students) institutional testing be done at this time?

Yes. As per the restricted guidance, testing using the one step tuberculin method or IGRA should be continued on all students who are identified by screening to be at-risk.

Should students entering health care profession training programs continue to be tested at this time?

Yes, but as per the restricted guidance, these students should be tested with an IGRA or using the one step only skin test method until the shortage ends. The testing should be delayed until just prior to the student beginning their clinical practice rotations, if at all possible.

Should college students who are entering teaching majors (e.g. student teachers) be tested with tuberculin at this time?

No, all college students or staff entering into school districts at this time should be screened first using the TB Symptom Screening Questionnaire and have their tuberculin deferred until the shortage is over unless there is indication for need of further evaluation based on the questionnaire.

Should tuberculin be used for homeless populations during the shortage?

Yes, if there is not a recent documented skin test or IGRA for anyone entering into a homeless shelter within the past twelve months, the person should be screened for signs and symptoms as well as having a single step skin test or IGRA performed.

You may contact Jeannie Rodman, RN, Nurse Consultant for Delaware's Division of Public Health TB Elimination Program at (302) 744-1050, or jeanette.rodman@state.de with questions.