



NEW YORK CITY DEPARTMENT OF  
HEALTH AND MENTAL HYGIENE  
Thomas Farley, MD, MPH  
Commissioner

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Celine Gounder, MD, ScM  
Assistant Commissioner  
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**RE: TB testing No Longer Required for School Entry**

Bureau of Tuberculosis Control  
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Dear Colleague:

Please be advised that effective June 12, 2012, the New York City Department of Health and Mental Hygiene (DoHMH) **no longer requires that new entrants to secondary schools in New York City undergo testing for latent tuberculosis (TB) infection (Tuberculin skin test or blood-based test).**

Screening tests are only beneficial when the persons being tested are at high risk for TB infection, and if infected, are also at high risk for developing active TB. Young children and adolescents who have been in contact with someone with active TB disease, who are recent immigrants from countries with a high burden of TB, and/or who are at high risk for progression to active TB disease should continue to be screened for TB infection. **A risk assessment questionnaire should be used to screen children and adolescents for risk factors for both active TB disease and latent TB infection** (see attached). Children and adolescents with one or more risk factors should be screened for active TB disease and latent TB infection. Those found to have latent TB infection or active TB disease should receive appropriate treatment.

If a student does undergo TB testing for any reason and has a positive result, he/she should undergo full evaluation including a chest x-ray as well as any other diagnostic work-up or treatment as clinically indicated.

Over the past several years, the mandate to provide TB screening to students and staff in schools has been eliminated. **Testing for latent TB infection as part of school entry requirements or for employment purposes is no longer performed at DoHMH Chest Centers.**

You may find more information about evaluation and treatment for TB, and a copy of the Tuberculosis Risk Assessment Questionnaire for Children and Adolescents on our website at <http://www.nyc.gov/health/tb> , or you may call 311 to speak to a provider.

Sincerely,

Celine Gounder, MD, ScM  
Assistant Commissioner / Director  
Bureau of Tuberculosis Control



## **Tuberculosis Risk Assessment Questionnaire for Children and Adolescents\***

**1. Was your child born outside the United States?**

If yes, and the child was born in a high TB incidence area\*\* such as Africa, Asia, Latin America or Eastern Europe, a test for TB infection should be administered.

**2. Has your child traveled outside the United States?**

If yes and the child stayed with friends or family members in a high TB incidence area\*\* such as Africa, Asia, Latin America or Eastern Europe for > 1 month cumulatively, a test for TB infection should be administered.

**3. Has your child been exposed to anyone with TB disease?**

If yes, and it has been confirmed that the child has been exposed to someone with suspected or known TB disease, a test for TB infection should be administered, and the NYC Department of Health and Mental Hygiene should be notified.

**4. Does your child have close contact with a person who had a positive test for TB infection?**

If yes, proceed as in question 3 (above).

**5. Has your child consumed dairy products obtained from abroad such as raw milk or fresh cheese?**

If yes, a test for TB infection should be administered.

\*Adapted from The Pediatric Tuberculosis Collaborative Group: Targeted tuberculin skin testing and treatment of latent tuberculosis infection in children and adolescents. *Pediatrics*, 2004; 114(4):1175-1201

\*\*High TB incidence countries are listed in <http://www.nyc.gov/html/doh/downloads/pdf/tb/tb-protocol.pdf>