Tuberculosis (TB) Assessments

Frequently Asked Questions

Why must I be assessed for Tuberculosis (TB)?

State and Federal regulations require a TB assessment for individuals who come in contact with patients or work inpatient care areas, laboratory personnel working with specimens or working in patient care areas. This assessment is required at the time of pre-placement examination. In addition, annual TB assessments are required for individuals who work in hospitals or clinics with less than 200 beds if three or more patients per year have documented TB infections and for hospitals with 200 beds or more, six or more patients per year had documented TB infections. The only Johns Hopkins Health System entity that meets the criteria for annual testing is the Johns Hopkins Hospital in Baltimore, MD.

What is included in the assessment process?

The appropriate TB assessment will be determined by your previous TB history and the OH nurse screening. The assessment may include one of the following. A TB skin test, an injection that is placed in the arm and read 2-3 days later, a TB blood test, a tube of blood is collected, sent to the lab for testing with results available in 2-3 days, a review of symptoms for known positive TB test responders, or a CXR if deemed necessary by the OH nurse.

What if I only seldom come in contact with patients or enter patient care areas?

If there is ANY chance that you will either come in contact with patients or enter patient care areas, you must be assessed.

For medical reasons (including previously testing positive) I cannot have a skin test, what do I need to do to be compliant?

You must still have a TB assessment through OH annually. As indicated above, this assessment may include: a brief history, physical examination, a blood test, or chest x-ray.

I had BCG in the past and I know I will be positive. How do I get assessed?

History of BCG vaccine along with any previous skin test results are used to determine the appropriate TB assessment, either the skin test, blood test, or review of symptoms. Documentation of previous test results will be helpful in order to make this determination.

I know I have been assessed before; do I still need to be assessed again?

Yes, this is an annual requirement. If you are not sure of when your last TB assessment was, please call OH for this information.

Can I read my own skin test?

No one is allowed to read their own skin test. For the purposes of documentation, the preferred readers are the OH staff. OH will accept readings performed by TB trained healthcare professionals skilled at evaluating tuberculin skin tests. However, for any reactive or positive readings OH staff must evaluate to confirm the reading during the 48 hour to 72 hour read period.

Is assessment mandatory for University as well?

If there is ANY chance that you will either come in contact with patients or enter patient care areas in the Johns Hopkins Hospital, you must be assessed.

The majority of my time is spent off of the main medical campus site; do I still need to be assessed? When you are on campus, if there is ANY chance that you will either come in contact with patients or enter patient care areas of the Johns Hopkins Hospital, including the Johns Hopkins Outpatient Center, you must be assessed.
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Where can I be assessed?

TB assessments are offered through Occupational Health and are provided at the following locations and times:

Occupational Health - 98 North Broadway - Mon. through Fri. - 7:30 a.m. to 4:00 p.m.
Occupational Health - Blalock Room 144 - Mon. through Fri. - 7:00 a.m. to 3:30 p.m.

*PLEASE NOTE, TB SKIN TEST CANNOT BE PLACED ON THURSDAYS. TB blood tests can be done for appropriate personnel and TB skin tests can be read on Thursdays.

How can I determine if I am compliant with the TB assessment requirement?

You can contact Occupational Health at the East Baltimore campus @ 410-955-6211 with any questions regarding your TB assessment status.

Reference: Guidelines for Preventing the Transmission of *Mycobacterium tuberculosis* in Health-Care Setting, Morbidity and Mortality Weekly Report (MMWR) Recommendations and Reports December 20, 2005/54 (RR17); 1-141.