

## Positive Tuberculosis (TB) Information Sheet

This information sheet is for learners with documented positive tuberculin skin testing (TST) or other positive TB history (blistering TST reaction, positive IGRA serology, previous diagnosis and/or treatment for latent TB infection or active TB disease).

Positive TST usually indicates TB infection but may also be due to BCG vaccination if the vaccine was given later than age 12 months or more than once, or infection with other TB-like bacteria. Positive IGRA is most likely due to TB infection. While most individuals infected with TB have latent (inactive) TB infection and are not contagious, progression to active TB disease can occur at any time (even for those who have been treated for active TB disease or latent TB infection in the past). The risk of reactivation is highest in the first two years after infection and is also increased by HIV infection, fibronodular scarring on chest x-ray, chronic steroids (equivalent of prednisone  $\geq 15$  mg/day for  $\geq 1$  month), other immunosuppressive medications, and end stage renal failure. Both latent TB infection and active TB disease can be treated with antibiotic medication.

For learners with a NEW positive TST, assessment by your healthcare provider should include a history of risk factors for TB, symptoms of active disease and a chest x-ray. In the absence of active TB disease, a referral for assessment and treatment of latent TB infection (LTBI) should be considered.

For learners previously TST positive or with latent TB infection (LTBI), if a previous chest x-ray was negative, a repeat x-ray is not required unless medically indicated. Referral for assessment and treatment of LTBI should be considered for individuals not previously treated for LTBI with conditions which predispose to developing active TB disease.

It is important to be aware of the symptoms of active TB disease and to seek prompt medical attention if symptoms develop.

Symptoms of active TB disease include:

- persistent cough or fever lasting three or more weeks
- hemoptysis (coughing up blood)
- night sweats
- unexplained or involuntary weight loss

Learners with a negative chest x-ray and no symptoms of active TB disease will be fully cleared for participation in clinical activities.

For more information:

[Hamilton Public Health: Tuberculosis](#)

[Hamilton Public Health: Tuberculosis Reporting Guidelines and Resources](#)

**QUESTIONS?** Contact the Health Screening Office: hrsadmin@mcmaster.ca, 905-525-9140 ext 22249