



**STATE OF WASHINGTON**  
**DEPARTMENT OF SOCIAL AND HEALTH SERVICES**  
*Aging and Long-Term Support Administration*  
*PO Box 45600, Olympia, WA 98504-5600*

July 27, 2016

**AL TSA: ALF #2016-012**  
**TUBERCULOSIS (TB) TESTING UPDATE**

Dear Assisted Living Facility Administrator:

In 2013, Residential Care Services (RCS) distributed a Dear Provider letter indicating there was a temporary shortage of tuberculin skin test antigen solutions. During this time period, RCS revised the TB testing expectations in acknowledgement of the shortage. This shortage no longer applies and the current WAC expectations for TB testing in each program need to be followed. Here is the current testing standard:

1. TB testing for staff must begin within 3 days of employment;
2. The provider may accept documentation for either a Mantoux (skin test) or an IGRA (blood test) to determine if an individual is positive or not.
3. For the skin test, a two-step process must be completed initially if the individual has no documentation a previous two-step process has ever been completed. Please note, a two-step testing process will require four visits to the health care provider. Please ensure staff review the requirements of a two-step process with their health care provider.
4. If an individual states s/he had a positive reaction from a prior skin test, but has no documentation from that test, the provider should make sure that either a repeated skin test or a blood test is done.
5. If the individual comes from a country where TB may be prevalent the individual may want to complete a blood test. The individual can contact the Department of Health to obtain the most current list.
6. If either the skin or blood test results in an individual testing positive, that individual needs a chest x-ray and needs to follow the recommendations of their health care provider. *NOTE: An IGRA blood test is not an acceptable alternative to the chest x-ray required after a positive result from testing/screening.*
7. If an individual declines the skin test, s/he must take the blood test.
8. Staff who work for the same provider/corporation across multiple homes operated by that provider/corporation do not need to complete a separate TB test for each facility.
9. If an individual is diagnosed with TB, the local health department should be notified and the individual should follow all recommendations of their health care provider and the local health department.

RCS will periodically review the Washington Administrative Code to determine if the rules need to be revised to reflect any changes in TB testing standards. Please use the concepts above when reviewing, revising and implementing your infection control procedures around TB testing.

Sincerely,

Candace Goehring, Director  
Residential Care Services

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