## **Tuberculosis (TB) Follow-Up Recommendations:**

## Arrivals With a TB Class Condition



TB Classification	Overseas Screening	U.S. TB Follow-Up Recommendations
Class A—Infectious TB	✓ Identified to have infectious TB	☐ Review overseas medical exam documentation.
including extrapulmonary with abnormal CXR	✓ Often must complete treatment before travel is permitted	☐ Perform a stateside chest X-ray (CXR).*
		Assess the patient clinically and perform additional diagnostic testing, such as sputum collection for acid-fast bacilli (AFB) smear and culture, if indicated.
		☐ Continue or revise treatment regimen, as indicated.¥
Class B0—Completed	✓ Identified to have active TB	☐ No follow-up guideline has been established by CDC.
treatment for active TB with overseas panel physician	✓ Completed adequate anti-TB directly observed therapy (DOT) before departure	☐ No TB follow-up is recommended at this time.
Class B1—May have clinically active (NOT infectious) pulmonary or extrapulmonary TB (previously treated TB without panel physician)	<ul> <li>✓ Abnormal CXR or positive HIV test</li> <li>✓ Three negative sputum smears and cultures</li> </ul>	☐ Review overseas medical exam documentation.
		☐ Perform an interferon gamma release assay (IGRA). <sup>β</sup>
		☐ Perform a stateside CXR.*
		☐ Evaluate for signs and symptoms of active TB.
		☐ If there is a positive IGRA and abnormal CXR, collect three sputa for AFB smear and culture.
		☐ Treat for latent tuberculosis infection (LTBI) or active TB, as appropriate. ¥
Class B2—May have TB infection (NOT active)	<ul> <li>✓ Positive IGRA (TST no longer accepted in panel physician guidelines)</li> <li>✓ Normal CXR</li> </ul>	☐ Review overseas medical exam documentation.
		☐ Perform a stateside CXR.*
		$\hfill \square$ In cases where a TST was performed overseas, perform an IGRA. $^\beta$
		☐ If there is a positive IGRA and abnormal CXR, collect three sputa for AFB smear and culture.
		☐ Treat for LTBI or active TB as appropriate.¥
Class B3—Contact with someone with active TB	✓ Identified as a contact to a person known to have TB disease.	☐ Review overseas medical exam documentation.
		☐ Perform an IGRA. <sup>β</sup>
		☐ If IGRA is positive, perform a stateside CXR.*
		☐ If the IGRA is positive and the CXR is abnormal, collect three sputa for AFB smear and culture.
		☐ Treat for LTBI or active TB as appropriate.¥
(*) Perform a CXR stateside and compare it with the overseas CXR when available.  (*) DOT is the standard of practice for persons with TB disease.  (*) DOT is the standard of practice for persons with TB disease.		



 $(^{\beta})$  IGRA may be used for children 2 and up. It should be performed on all TB Class B1, B2, and B3 individuals who do not have a **documented** previously positive IGRA.

into the electronic TB worksheet in WEDSS.