



WISCONSIN TUBERCULOSIS (TB) SCREENING TOOL FOR UKRAINIAN HUMANITARIAN PAROLEES (UHP) PARTICIPATING IN THE UNITING FOR UKRAINE PROGRAM (U4U)

All of the information on this tool shall be kept confidential.

For Ukrainian humanitarian parolees resettled in Wisconsin presenting to clinics or local health departments for TB screening, the Wisconsin Tuberculosis Program and Refugee Health Program recommends the following TB screening components are completed.

Do not treat for LTBI until active TB disease has been excluded:

Evaluate for active TB disease with a chest x-ray, symptom evaluation, and if indicated, sputum AFB smears, cultures, and nucleic acid amplification testing. A negative TST or IGRA does not rule out active TB disease.

The following screening expanded with **attention to Multi Drug Resistant (MDR)TB and disseminated TB**^{1,2}

Individual/Patient Name (Print): _____	Date of Birth: _____
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SYMPTOM EVALUATION (some items may not be applicable to all patients; lists not exhaustive)

Yes No

- Persistent cough lasting more than 10 days
- Hemoptysis
- Fever
- Night sweats
- Unexplained or unintended weight loss or failure to thrive (FTT) in pediatric patients
- Fatigue
- Lymphadenopathy
- Unexplained back or joint pain

MEDICAL HISTORY FOR PAST TUBERCULOSIS DIAGNOSIS OR EXPOSURE

Yes No

- Spinal (Gibbus) deformity
- Unexplained infertility
- Sterile pyuria
- Abnormalities on imaging of urinary tract
- History of past TB diagnosis or exposure
- Treatment or exposure to known MDR-TB
- Treatment or exposure to persons being treated for TB with a prolonged course of medication (18-24 months)
- Treatment or exposure to persons being treated for TB with injectable medications (IV or IM)
- Treatment interruption or unknown completion of TB treatment

LABS

Yes No

- IGRA blood test for persons aged 2 years and older
- Chest radiographs for persons aged 6 months and older
- PA view for those ≥ 10 years of age
 - AP or PA view **and** lateral view for those < 10 years of age

RISK FOR PROGRESSION TO TB DISEASE

Yes No

- Human immunodeficiency virus (HIV) infection
- Current or planned immunosuppression** including receipt of an organ transplant, treatment with an TNF-alpha antagonist (for example, infliximab or etanercept), chronic steroids (equivalent of prednisone ≥ 15 mg/day for ≥ 1 month), or other immunosuppressive medication

Medical examination should follow for persons with positive IGRAs, abnormal chest radiographs consistent with tuberculosis, or positive symptom screening. Any “yes” answers should prompt further investigation.

Respiratory samples should be collected if indicated by the chest radiograph, medical examination, or symptom screening.

For more information on medical screening, please see Centers for Disease Control and Prevention's [Immigrant, Refugee, and Migrant Health webpage](#) and the [Wisconsin Refugee Health Program webpage](#).

USE OF THIS TOOL

Use this tool to assess Ukrainian Humanitarian Parolees granted this status through the Uniting for Ukraine (U4U) Program for *M. tuberculosis* infection.

SYMPTOM EVALUATION

TB symptoms are listed on the front of this tool. TB can occur anywhere in the body, but the most common areas include lungs, pleural space, lymph nodes, and major organs such as heart, liver, spleen, kidney, eyes, and skin. Clinical judgement should be accompanied by careful evaluation of patient history including residence in a country with high TB incidence, history of previous treatment for TB or LTBI, and history of TB in the family.³

RISK FOR TB INFECTION

Birth, travel, or **residence (for more than or equal to 1 month) in a country with a high TB rate (Ukraine)**

The World Health Organization (WHO) estimates TB incidence around the world in the *Global Tuberculosis Report*. Ukraine is a high burden country for MDR/RR-TB in the period 2021–2025.^{4,5} War in Ukraine has disrupted patient care for those with Tuberculosis, likely disrupting treatment regimens and care before coming to the U.S. Ukraine has the fifth-highest number of confirmed cases of extensively drug resistant TB.⁶

CLOSE CONTACT TO SOMEONE WITH INFECTIOUS TB DISEASE

Infectious TB includes pulmonary, culture-positive disease and disease with pulmonary cavitation on radiograph. High priority contacts include household members (one in three chance of infection), children under five years of age, and immunosuppressed individuals (for example, HIV-positive, organ transplant, cancer, diabetes). Also consider those exposed for shorter duration in a more confined space (for example, exam room, dormitory room, office, or vehicle).⁷

RISK FOR PROGRESSION TO TB DISEASE

Immune suppression is a risk factor for reactivation and progression to active TB disease. Immune suppression alone is not a risk for acquiring TB infection.

LTBI treatment should be strongly considered in HIV-infected individuals; significant immune suppression can cause inaccuracy of diagnostic TB tests.

LTBI treatment can be considered for other immune suppression (for example, cancer, organ transplant, medications, or diabetes) **when in combination with risk for infection (see page 2).**

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- ¹ World Health Organization Global Tuberculosis Report 2021. <https://www.who.int/teams/global-tuberculosis-programme/tb-reports/global-tuberculosis-report-2021>
 - ² Holt, E. (2022). Tuberculosis Services disrupted by war in Ukraine. *The Lancet*, 22(5). [https://doi.org/10.1016/S1473-3099\(22\)00214-6](https://doi.org/10.1016/S1473-3099(22)00214-6)
 - ³ Lewinsohn, D. et al. Official American Thoracic Society/Infectious Diseases Society of America/CDC Clinical Practice Guidelines: Diagnosis of tuberculosis in adults and children. *Clinical Infectious Diseases*, 2017; 62(2):111-115.
 - ⁴ World Health Organization Global Tuberculosis Report 2021. <https://www.who.int/teams/global-tuberculosis-programme/tb-reports/global-tuberculosis-report-2021>
 - ⁵ Wisconsin Tuberculosis Program. <https://www.dhs.wisconsin.gov/tb/index.htm>. Phone: 608-261-6319.
 - ⁶ Holt, E. (2022). Tuberculosis Services disrupted by war in Ukraine. *The Lancet*, 22(5). [https://doi.org/10.1016/S1473-3099\(22\)00214-6](https://doi.org/10.1016/S1473-3099(22)00214-6)
 - ⁷ CDC. Guidelines for the investigation of contacts of persons with infectious tuberculosis: recommendations from the National Tuberculosis Controllers Association and CDC. *MMWR* 2005; 54(No. RR-15).