

Integrating COVID-19 Vaccination with Tuberculosis Testing

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This document explains the integration of COVID-19 vaccine administration with tuberculosis (TB) testing, in accordance with the CDC's interim clinical considerations for use of COVID-19 vaccines currently authorized in the United States. It contains MDH recommendations for new hire health care personnel onboarding, health care personnel serial TB screening, and TB contact investigations. Call 651-201-5414 with questions.

[Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States \(https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html\)](https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html)

Onboarding new hires who have not received COVID-19 vaccine yet

This process also applies to facility volunteers and residents of boarding care homes, residential hospice, and long-term care settings licensed by MDH.

Scenario A

1. Complete the new hire TB screening process **using an IGRA before** administering the first dose of COVID-19 vaccine. MDH and CDC recommend the use of the IGRA (TB blood test) as the preferred TB test over the use of the TST (TB skin test).

Scenario B

1. If the facility cannot use the IGRA and must use a two-step TST, administer the first step of the two-step TST with complete symptom screen **before** the first dose of COVID-19 vaccine.
 - a. If the first step and symptom screen are negative, the new hire may begin working with patients. **Defer administration of the second step of the two-step TST until four weeks after the second dose of the COVID-19 vaccine.**
 - b. If the first step is positive, complete the entire TB screening process, including CXR and provider exam before allowing for direct patient care.

Onboarding new hires who already started the COVID-19 vaccine process before hire

1. This process also applies to facility volunteers and residents of boarding care homes, residential hospice, and long-term care settings licensed by MDH. Conduct a TB symptom screen and allow for direct patient care if negative. **Defer the TB testing (single IGRA or two-step TST) until four weeks after the second dose of the COVID-19 vaccine.**
 - a. If the TB test (single IGRA or two-step TST) was given earlier than the recommended four weeks after the last dose of COVID-19 vaccine **and the result was negative**, repeat the TB test (single IGRA or one additional TST) four weeks after the last dose of COVID-19 vaccine.

Integration of vaccine with annual TB testing

1. Vaccine administration is a priority for all health care personnel. Defer annual TB testing until after the vaccination process. For guidance on who to include in serial screening programs, refer to the CDC Morbidity and Mortality Weekly Report: [Tuberculosis Screening, Testing, and Treatment of U.S. Health Care Personnel: Recommendations from the National Tuberculosis Controllers Association and CDC, 2019](https://www.cdc.gov/mmwr/volumes/68/wr/mm6819a3.htm?s_cid=mm6819a3_w) (https://www.cdc.gov/mmwr/volumes/68/wr/mm6819a3.htm?s_cid=mm6819a3_w).

Conducting TB contact investigations for people receiving COVID-19 vaccinations

1. Perform a TB symptom screen.
2. A test for infection (MDH recommends IGRA) should be done before or at the same time as the administration of COVID-19 vaccination. If this is not possible, prioritization of testing for TB infection needs to be weighed with the importance of receiving COVID-19 vaccination, based on potential COVID-19 exposures and TB risk factors. MDH is not recommending delaying vaccine.
 - a. Contacts **with high-risk conditions for TB progression** should be fully evaluated as soon as possible. It is not understood whether the vaccine will cause a false negative result if given within four weeks of a COVID-19 vaccine dose; therefore, one should repeat testing for negative results four weeks after the second vaccine dose.
 - b. Contacts **without high-risk conditions for TB progression** should proceed with all recommended aspects of the evaluation but delay a test for TB infection (TST or IGRA) if prioritized for receiving COVID-19 vaccination.
 - c. All potential recipients of COVID-19 vaccination should weigh the risks and benefits of delaying TST/IGRA with their providers.



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