# F-170 TB/Mantoux Skin Test

### **Purpose**

Identify infection through injecting the bacillus Mycobacterium tuberculosis.

### **Applies To**

Registered Nurses

Licensed Practical/Vocational Nurses

Other (Identify):

### **Equipment/Supplies**

- 1ml tuberculin syringe with ½ inch, 26- or 27-gauge needle.
- Alcohol prep pads.
- PPD solution (0.1 ml of 5 tuberculin units).
- One pair of disposable gloves.
- Sharps container.

#### **Procedure**

Caution: Do not administer TB skin test if the person has previously tested positive by skin test.

- 1. Wash hands. Refer to the Hand Washing procedure.
- 2. Prepare the syringe:
  - a. Withdraw just over 0.1 ml into syringe.
  - b. Hold syringe upright and tap lightly.
  - c. Expel air and one drop of solution.
  - d. Verify that 0.1 ml remains in the syringe.
- 3. Administer medication according to the *Intradermal Injections* procedure, steps 3 through 15.
- 4. Read results in 48 to 72 hours. A TB skin test shall be considered significant for results of:
  - a. A tuberculin reaction of 5 mm or more in the following groups:
    - Persons who have had close recent contact with an individual with infectious TB.
    - Persons, who have chest radiographs with fibrotic lesions likely to represent old, healed TB.

- Persons with known or suspected HIV infection.
- b. A tuberculin reaction of 10 mm or more in persons who do not meet the above criteria but who have other risk factors for TB. This would include:
  - Foreign-born persons from countries with a high prevalence of TB (e.g., countries in Asia, Africa, and Latin America).
  - Persons from medically underserved, low-income populations, including high-risk racial and ethnic minorities (e.g., those from Asia, Africa, and Latin America).
  - Users of intravenous drugs.
  - Residents of long-term care facilities, such as correctional institutions and nursing homes.
  - Persons with medical conditions known to increase the risk of TB once infection has occurred.
  - Other populations that have been identified locally as having an increased prevalence of TB.
- c. A tuberculin reaction of 15 mm or more in all other persons.

#### **Documentation Guidelines**

Document in the clinical record:

- 1. Medication name, dose, route, lot number, and time administered.
- 2. Injection site.
- 3. Results positive/negative.
- 4. Report adverse reactions to the physician.

### **Related Procedures**

**Intradermal Injections** 

## **Policy History**

Approval Date	11/1/2009
Approved By	Anne Tyson, Herman Pippin, Sandra Hill
Revision Date	12/31/2009
Approved by	Anne Tyson, Herman Pippin, Sandra Hill
Revision Date	
Approved by	
Revision Date	
Approved by	