

## Tuberculosis (TB) Screening Information

All healthcare worker (HCW) students and HCW staff are required to complete and submit the [Queensland Health Tuberculosis Risk Assessment Form for Students](#). This is a self-assessment form (completed by yourself) to be submitted to your **Immunisation Evidence Request in my.UQ** for assessment and advice from the Immunisation Record Team (IRT) along with your other immunisation evidence. Whilst the TB Risk Assessment form is labelled “for Students” it is the accepted Queensland Health Tool for UQ healthcare worker staff as well as students. Please complete your self-assessment form carefully. If your self-assessment indicates that you have a TB exposure risk history, you will need to attach results and/or medical documentation.

### Why do I need this risk assessment?

HCW students or staff with undiagnosed active TB may pose a significant risk, particularly to vulnerable patients such as young children and immune-suppressed persons. Some people are at increased risk of developing tuberculosis because they have spent significant time in overseas [countries with a high incidence of TB](#), have been in direct contact with a person with active TB, or have been exposed to TB infection as a result of their work. <sup>1</sup> Further information is available on the [Queensland Health TB Fact Sheet](#).

### What if I need further screening?

It is expected that you will follow the guidance on the [TB Risk Assessment Form for Students](#) and seek appropriate screening and/or treatment if you identify as having signs of active TB or a TB exposure risk history (may have latent TB). The form should be taken with you to any appointments. If you are currently residing overseas, please see section below for screening advice.

**There are two options for routine latent TB screening (See Screening Option 1 and Screening Option 2 in the boxes below).** Latent TB screening (blood test or skin test) is required if you have answered ‘Yes’ to any of Questions 3-5 of Part B of the [Queensland Health Tuberculosis Risk Assessment Form for Students](#) but have not answered ‘Yes’ to any of the other sections.

**However, if you have answered ‘Yes’ to any of the following sections, you will need to be reviewed by a TB Control Service (Screening Option 1 only):**

- Signs of active TB (‘Yes’ to any of the Part A questions –**urgent appointment required and can be with your doctor**); or
- History of a diagnosis of active TB (‘Yes’ to Question 6, Part B); or
- Immune deficiency AND possible TB exposure. \* (‘Yes’ to Question 7, Part B; PLUS ‘Yes’ to any of Questions 3-5).

**↓ THEN YOU MUST UNDERTAKE SCREENING OPTION 1 ONLY ↓**

SCREENING  
OPTION

**1**

Contact a [Queensland TB Control Service](#) either by phone or email. These services provide free TB related assessment and screening. There may however be long waiting times for screening (up to 12 months for non-urgent screening) therefore organising an appointment as promptly as possible is advised. The closest TB service for St Lucia Campus is the Metro South Clinical Tuberculosis Service (MSCTBS), Princess Alexandra Hospital Campus, via Cornwall Street, Woolloongabba, Brisbane.

**OR**

SCREENING  
OPTION

**2**

If you only require a latent TB test, your medical practitioner can order an Interferon Gamma Release Immunoassay (IGRA)/Quantiferon®-TB Gold blood test at a Private Pathologist however there will be an associated cost (not refundable via Medicare or Overseas Student Health Cover). The advantages of the IGRA test are that it can be done immediately, the result will be available within a short time and it only requires one visit to a pathology collection centre for the blood sample to be taken.

**Those who receive a positive or indeterminate IGRA/Quantiferon®-TB Gold blood test result will need a referral from their medical practitioner to a Queensland TB Control Service – See Screening Option 1 above.**

\*If you are known to be immunosuppressed, but have no known exposure to TB, then you require review either at the TB control unit (Screening option 1) or with the UQ Occupational Physician to arrange appropriate testing.

## What if I am currently residing outside Australia?

You must still complete and upload the [Tuberculosis Risk Assessment Form for Students](#) to your **Immunisation Evidence Request in my.UQ** for verification and advice from the Immunisation Record Team.

If you require latent TB screening (blood test or skin test), and have been residing in a [country with a high incidence of TB](#), screening should be **delayed until 12 weeks after arrival in Australia** (as long as you are not attending clinical placements before arriving in Australia).

On arrival in Australia, if you opt for Screening Option 1 (previous page) please contact the [Queensland TB Control Service](#) by email or phone as soon as you know your address, as there may be a long waiting time (up to 12 months). Screening Option 2 can be done more quickly through a medical practitioner.

If you are attending clinical placements before arrival in Australia and require latent TB screening, please proceed as soon as possible with the screening in your country of residence.

If you have had a TB screening blood test completed as part of your Health Care Student visa process, please upload that result so that the UQ Immunisation Record Team can guide you further.

## What if my test result indicates I have a latent TB infection?

Latent infection cannot be spread to other people, and in the majority of cases the immune system controls the progression, and the TB disease will not develop. Tuberculosis can be treated, and the purpose of mandatory follow up is to ensure that persons at greater risk of developing active tuberculosis receive the essential information for support and to mitigate any potential future health issues.

If you receive a positive latent tuberculosis result (blood or skin test) you will need to follow up with a specialist at a Queensland TB Control Service (see screening option 1). If your test was not done at the TB Control Service, you will need a referral from a Medical Practitioner (GP).

Whilst you are waiting to see a specialist at the TB Control Service, a latent TB infection won't prevent you from going on placement as long as you are not suffering any symptoms suggestive of pulmonary TB. In some cases, you may be asked to provide a clear chest x-ray result prior to placements.

***NOTE: It can take up to twelve months for an appointment with a specialist at the Queensland TB Control Service. Please ensure you make your appointment as soon as possible. A letter of clearance or discharge will be provided by the Service following initial assessment. Please upload this letter to my.UQ to complete your records as soon as possible to avoid non-compliance.***

For further support please contact the [UQ Immunisation Records Team](#)

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<sup>1</sup>[Tuberculosis Risk Assessment FAQ for Workers in Queensland Health Facilities. Queensland Health.](#)