



## Pediatric TB Risk Assessment Questionnaire

The following questions are designed to determine whether a tuberculin skin test (TST) or Interferon Gamma Release Assay (IGRA) is indicated for your pediatric patient. According to recent DCD guidelines, a TST is preferred for a child less than 5 years of age. If a child is 5 years of age or older and is foreign-born, then an IGRA is preferred.

Date of Risk  
Assessment:

\_\_\_\_\_

Name of Child:

First Name

Middle Initial

Last Name

Date of Birth

\_\_\_\_\_

1) Was your child born in a high-risk country?\*

- Yes  
 No

2) Has your child traveled to a high-risk country\* for more than 1 week?

- Yes  
 No

3) Has a family member or contact had tuberculosis disease?

- Yes  
 No

4) Has a family member had a positive TST or IGRA result?

- Yes  
 No

\* High-risk country: Any country other than the United States, Canada, Australia, New Zealand, or a country in Western or Northern Europe.

**If there is a "YES" response to any of the questions above, then TST or IGRA testing should be performed.**

**NOTE:** If the child being screened was previously tested, had a documented negative TST or IGRA result, and has not acquired any new risk factors since the last assessment, then he/she does not need to be re-tested.