

Acknowledgment of Refusal of Baseline Tuberculosis Testing
(Pursuant to Health PEI Policy on Immunization and Tuberculosis Testing*)

Employee Information:

Name:	Date of Birth:
Position:	Employee #:

Health PEI values the health and safety of its workers and the populations they serve. The Public Health Agency of Canada (www.phac-aspc.gc.ca) identifies health care workers as a specific risk group. *“The importance of conducting proper baseline tuberculin skin testing for all potentially exposed health care workers in all health care settings cannot be overemphasized. At the time of employment, many health care workers may already be TST positive because of prior exposure, particularly workers born or previously residing in countries with high TB incidence who could have been exposed or infected before moving to Canada. In addition, older Canadian-born workers in some provinces/territories may have received bacilli Calmette-Guérin (BCG) vaccination, which can interfere with TST results. Prior exposure to M. tuberculosis, nontuberculous mycobacterial infection or BCG vaccination can result in a boosting phenomenon that is misdiagnosed as a TST conversion. The occurrence of boosting phenomena has been documented in 3%-10% of Canadian health care workers; therefore a two-step TST is recommended.”* (Canadian Tuberculosis Standards 7th Edition, 2014 pg. 386)

*The purpose of the Immunization and Tuberculosis Testing Policy is to ensure workers are immunized and screened according to the recommendations contained in the current Canadian Immunization Guide (www.phac-aspc.gc.ca/publicat/cig-gci/) and National Advisory Committee on Immunization and Tuberculosis Screening (www.phac-aspc.gc.ca/naci-ccni).

I acknowledge that my employer has offered baseline Tuberculosis Testing at no cost to me. I have declined to receive the baseline Tuberculosis Testing. In declining the baseline Tuberculosis Testing, I acknowledge that in the event I have an exposure to an active Tuberculosis case, the management of my exposure may be compromised. Individuals may have less extensive exposure but, if infected, are immunologically vulnerable to rapid development of active TB. Failure to obtain baseline testing can also result in long delays in appropriate contact follow-up when the index case is already known to be highly infectious. A fundamental difficulty is that transmission can be very difficult to evaluate when the background rate of positive TST results is unknown.

The employee health nurse/designate has discussed with me the nature and anticipated effects of the baseline Tuberculosis Testing, including the risks to me, my clients/patients, and other health care workers of not receiving the testing. I have had the opportunity to ask questions and to have my questions answered. I am satisfied with and understand the information provided to me.

(Employee)

(Date)

(Witness)