

How is 2-step tuberculin skin testing done?

The 2-step tuberculin skin test (TST) is not the usual PPD skin test in which you receive an injection and the test area is observed one time, within a specific time frame.

The 2-step TST is a four part process that is used to detect individuals with past tuberculosis (TB) infection who now have diminished skin test reactivity. This procedure will reduce the likelihood that a boosted reaction is later interpreted as a new infection. Beyond that, secondary testing is useful to help offset potential false negative testing results.

At Exceptional Care for Children, we only utilize the "4 visit" approach for 2-step skin testing. If you know that you test positive or have a reaction to TB via the skin test, we also accept TB bloodwork or chest x-ray.

Appointment schedule for two-step testing

Visit 1, day 1

- The first TST is given to the volunteer and he/she is told to return in 48 to 72 hours for the test to be read.

Visit 2, day 3

- The first TST is evaluated, measured, and interpreted. The results are documented in millimeters (e.g. 0mm, 4mm, 12mm).
- If the first TST is negative, the volunteer is given an appointment to return for a second test in 7-21 days
- If the first TST is positive, it may indicate TB infection. The volunteer will likely be referred for a chest x-ray and physician evaluation. An asymptomatic volunteer, whose chest x-ray/bloodwork indicates no active disease, may submit to the Volunteer Coordinator their negative results and begin to volunteer.

Visit 3, day 7-21

- The second TST will be given to all volunteers whose first test was negative.

Visit 4, 48-72 hours after the second test

- The second TST is evaluated, measured, and interpreted. The results are documented in millimeters (e.g. 0mm, 4mm, 12mm).
- If the second TST is negative, the volunteer is not infected. Volunteer may submit, to the Volunteer Coordinator, their Step1 & Step 2 results and may begin to volunteer.
- If the second test is positive, it may indicate TB infection. The volunteer will likely be referred for a chest x-ray and physician evaluation. An asymptomatic volunteer, whose chest x-ray/bloodwork indicates no active disease, may submit to the Volunteer Coordinator their negative results and begin to volunteer.