

# Tuberculin Skin Test

## What is a Tuberculin skin test (TST)?

The TST is a simple & safe test to show if a person has ever been exposed to tuberculosis (TB) bacteria (or germs).

## Who should be tested?

- > People who have had contact with someone who has active TB
- > People from countries where TB is common
- > People who are travelling to or have recently returned from countries where TB is common
- > People who have to be tested for work e.g. health care workers
- > People who have to be tested for medical reasons
- > People who require a Bacille Calmette-Guerin (BCG) vaccination

## When should the TST be delayed?

- > If you have a fever (>38°C) or have had a recent infection
- > If you have received a live virus vaccine e.g. measles-mumps-rubella (MMR), yellow fever, chicken pox (varicella), shingles within the last 4 weeks. NOTE: the TST can be given on the same day as live vaccines. If not given on the same day, the TST should not be done until at least 4 weeks later as live vaccines may reduce the immune response to the TST.<sup>1</sup>

## When should the TST not be done?

- > If you have or have had TB
- > If you have had a previous large reaction to a TST
- > If you have an allergy to any component of tuberculin solution<sup>2</sup>

**Please let the healthcare worker know if any of these are relevant to you.**

## How is the test done?

A small amount of tuberculin<sup>3</sup> is injected into the skin on the inner forearm by a healthcare worker.

## Care of the test site

- > Remove cotton wool from TST site after 60 minutes. Leave uncovered
- > Do not scratch. If it itches, place a cold pack on it
- > Shower or bathe as usual

## What happens next?

**Three to four days later** you will need to return for the site of the test to be checked & the result recorded. Test documentation will be provided for your records. **Only a trained healthcare worker can accurately measure & interpret the test result.**

## A TST can result in:

- > Redness
- > Lump at site
- > Bruising
- > Blistering
- > Ulceration

## Depending on the reaction & your medical & TB history you may be advised:

- > To have the TST repeated
- > To avoid future TST
- > To make an appointment to see a medical practitioner experienced in TB management
- > That no further testing or follow-up is required

Information courtesy of Central Adelaide Local Health Network (CALHN). Please refer any questions about this information to your treating medical officer and/or nursing staff. The information contained within this publication does not constitute medical advice, and is for general information only. Readers should always seek independent, professional advice where appropriate. CALHN will not accept any liability for any loss or damage arising from reliance upon any information in this publication.

### References:

1. The Australian Immunisation Handbook 10th Edition, 2015. National Health & Medical Research Council. <http://www.immunise.health.gov.au/>
2. TUBERSOL® contains: Purified protein derivative of *M. tuberculosis*; Polysorbate 80 0.0006%; Phenol 0.22% to 0.35% w/v in sterile isotonic phosphate buffered saline
3. Tuberculin is available in Australia as TUBERSOL®. It is a purified protein derived from the TB bacteria but contains no active TB bacteria. In Australia the standard dose of TUBERSOL® is 5 Tuberculin Units (TU) per test dose of 0.1 ml.

## For more information

Royal Adelaide Hospital, Chest Clinic  
SA TB Services  
Telephone: (08) 7117 2967  
Monday-Friday, 8:45am-4:45pm



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