

**Medical Staff of Providence Regional Medical Center Everett
Medical Staff Policy**

PPD TESTING POLICY

The CDC recommends that health care professionals have annual PPD testing. As of May 1, 1997, PPD testing is mandatory for all members of the Medical Staff and Physician Directed Allied Health Professionals.

TESTING REQUIREMENTS

At the time of initial appointment, advancement, or reappointment, practitioners must submit to the Medical Staff Office evidence of current (within one year) PPD testing and, if indicated, follow-up care. Such PPD testing shall use the Mantoux test and not the Tine test.

A. Types of Tests

1. Baseline PPD test: This two-step PPD test is recommended for practitioners who have never had a two-step test.
 - a. Negative PPD test result: If the first test is negative, a second test is done approximately three weeks later. If the second test is negative, there is more certainty that a subsequent conversion is true and not a booster effect from a previous test.
 - b. Positive PPD test result*: If either the first or second test is positive, a chest x-ray must be performed and results must be submitted to the Credentials Committee.
 - (1) If the infection is inactive, the practitioner will be advised that a Providence Health System Everett Symptom Checklist should be completed on a yearly basis and submitted to the Medical Staff Office.
 - (2) If the infection is active, the Credentials Committee will be notified. Any necessary medical management is the responsibility of the practitioner and his/her personal physician.
2. Yearly PPD test:
 - a. Negative PPD test result: If the test result is negative, no further action is needed at this time.
 - b. Positive PPD test result*: If the test result is positive, a chest x-ray must be performed.
 - (1) If the infection is inactive, the practitioner will be advised that a Providence Health System Everett Symptom Checklist should be completed on a yearly basis and submitted to the Credentials Committee.

- (2) If the infection is active, the Credentials Committee will be notified. Any necessary medical management is the responsibility of the practitioner and his/her personal physician.

B. Evidence of Testing

1. Results of PPD Test: Test results must be in millimeters and must be signed and dated by the test administrator.
2. Symptom Checklist: If the result of a previous PPD test was positive or if there is a history of BCG vaccine, PPD testing will no longer be required; however, a current Providence Health System Everett Symptom Checklist must be completed and submitted to the Credentials Committee. If indicated by symptoms (as determined by the Chairman of the Credentials Committee or his/her designee), an x-ray will be required.
3. X-ray: X-ray interpretations must be dated and signed by a practitioner (other than the practitioner being tested) qualified to read x-ray reports.

C. Requirements for Practitioners with Temporary Privileges

These requirements will apply to practitioners requesting locum tenens privileges and temporary privileges for pendency of an application. There will be no requirements for PPD testing for practitioners requesting temporary privileges for care of a specific patient.

AVAILABILITY OF TESTING

PPD tests are available through the hospital's Employee Health Department, or may be done in the practitioners' offices. PPD tests must be read two days after the test is administered by a test administrator. A practitioner may not serve as his/her own test administrator or interpret his/her own x-rays.

COSTS OF TESTING

There will be no charge to the practitioner for testing and x-rays required by this policy and performed by Providence Health System Everett staff.

*Defined by PRMCE Policy

Approved 3/98