



The Superintendent may require an independent medical examination of any employee by a physician selected by the Board, under the following conditions, subject to the limitations set forth, if any, in the applicable bargaining unit agreement:

- a. whenever the Superintendent has grounds to believe that the performance of the employee is adversely affected by illness of any kind;
- b. whenever the Superintendent has grounds to believe that the health/safety of students or other employees may be at risk due to the illness of an employee;
- c. whenever the Superintendent has grounds to believe the employee may have abused sick leave or other leave policies;
- d. as a condition of approval for a medically-related leave of absence such as sick leave, maternity leave, FMLA or worker's compensation leave;
- e. as a condition of approval for continuation or extension of such leave;
- f. as a condition of approval for return to duty from such leave.

### **Tuberculosis Test**

It is a requirement of the Clinton Board of Education that all staff have baseline skin testing at the time of employment. The superintendent, in consultation with the school medical advisor, may accept a test within one year prior to employment.

At the beginning of each school year, each employee shall complete a tuberculosis screening form in lieu of the traditional periodic testing. This questionnaire shall be turned in to the principal who, in consultation with the school nurse, will submit a list of those employees who fit any of the categories listed in the above paragraph. The superintendent then may require those employees to be tested and provide proof of negative results.

Repeat skin testing on persons with a negative test is not routinely necessary, but should be done if the employee is exposed to a potentially infectious tuberculosis case in the school, if the employee is exposed to infectious tuberculosis outside the school or if the employee develops symptoms of tuberculosis. If an employee visits a high-risk country', the school principal in consultation with the school nurse shall determine whether or not testing is required for that employee.

School volunteers who work with students on a regularly scheduled basis may be required to have a tuberculin test at the discretion of the Superintendent and the chief school medical advisor.

Legal Reference: Centers for Disease Control Guidelines and Standards (June 2000)

Policy adopted: August 20, 2001  
Policy revised: March 18, 2002  
Policy revised: March 17, 2008  
Policy revised: July 20, 2020



### I. Procedure

At the time of being offered employment with the Clinton Public Schools, a person will receive the necessary health forms from the Central Office clerk. These forms must be completed and returned to the clerk in a timely manner, generally prior to the person on the first day of employment. The superintendent, or designee, will review the completed forms. If there is any question as to the results of the tuberculosis testing, the superintendent will consult with the school medical advisor.

At the beginning of each school year, each employee shall complete a tuberculosis screening form in lieu of the traditional periodic testing. This questionnaire shall be turned in to the principal who, in consultation with the school nurse, will submit a list of those employees who fit any of the categories listed in the accompanying policy. The superintendent or designee then may require those employees to be tested and provide proof of negative results.

If an employee is required to be tested as a result of this screening, the principal or nurse will provide the employee with a copy of the screening form to give to his/her physician. If the employee's physician believes that the employee does not need the testing, the physician must contact the School Medical Advisor for further discussion and/or determination.

### II. Type of Test and Recording Results

The intradermal injection test (Mantoux test) should be used. Results of the Mantoux test should be recorded in millimeters of induration.

### III. Interpretation and Management of Test Results

#### A. Negative/Non-Significant Reactions

In general, an induration of 0-9 mm obtained by routine screening by the Mantoux test should be considered negative. If testing is being done as part of a contact investigation following discovery of a potentially infectious case, an induration of 0-4 mm should be considered negative. No further evaluation is indicated unless the employee has a chronic unexplained cough or is a contact to a known infectious case of tuberculosis. In the latter instance, initiation of INH (Isoniazid) preventative therapy and repeat skin testing in 2 months may be indicated.



### B. Significant Reactions

Under routine testing conditions, induration of greater than or equal to 10 mm by the Mantoux test should be considered positive. If testing is conducted as part of a contact investigation, induration  $>5$  mm should be considered positive. Each employee with a positive skin test should have a symptom screen and chest x-ray to rule out active disease. When indicated, employees should be offered INH (Isoniazid) preventive therapy by their physicians. Repeat chest x-rays should be performed only if the employee develops symptoms consistent with tuberculosis.

Legal Reference: Tuberculosis Screening Guidelines for CT Schools, Connecticut Department of Health

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Regulation revised: March 18, 2002  
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