



**NEW YORK CITY DEPARTMENT OF
HEALTH AND MENTAL HYGIENE**

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To Whom It May Concern:

A person whose test result for tuberculosis (TB) infection is positive should undergo a chest x-ray to rule out active TB disease. A physician uses the chest x-ray result, as well as the medical history and physical examination, to determine appropriate follow up.

Once a person:

- **tests positive for TB infection and**
- **has had a chest x-ray that is negative for active TB disease**

no follow-up radiologic tests are recommended or indicated as long as the person has no symptoms of active TB.

Some employers still recommend routine follow-up chest x-rays at regular intervals; such radiographs are not indicated, nor are they recommended by city, state or federal health agencies.^{1,2}

The New York City Department of Health and Mental Hygiene Chest Centers will not perform follow-up chest x-rays for persons who are already known to have a positive test for TB infection, have had a chest x-ray that is negative for active TB disease, and who have no symptoms of active TB. If completion of a follow-up chest x-ray is a condition of employment, individuals or employers may contact the Director of Medical Affairs, Bureau of Tuberculosis Control (BTBC), at (347) 396-7486. The BTBC Medical Affairs Office will assist employers in bringing their policies into accordance with city, state and federal recommendations.

Chest x-rays should be obtained on all patients with suspected or confirmed active TB as indicated, regardless of when the test for TB infection was done. In addition, a chest X-ray should be performed just prior to the initiation of prophylaxis for TB infection.

Sincerely,

Joseph Burzynski
Assistant Commissioner
Bureau of Tuberculosis Control

1 New York City Department of Health and Mental Hygiene, Bureau of Tuberculosis Control. *Clinical Policies and Protocols*, 3rd ed., 1999. Call (347) 396-7486 to request copies of the relevant portions of this publication.

2 Centers for Disease Control and Prevention. Guidelines for preventing the transmission of *Mycobacterium tuberculosis* in Health Care Facilities, 1994. *MMWR* 1994;43(RR-3):40.