

Who May Administer, Read and Interpret a Tuberculin Skin Test (TST) in Washington State

Profession	May Administer TST	May Read* TST	May Interpret€ TST	Considerations
RN	Yes	Yes*	Yes€	<ul style="list-style-type: none"> Medical provider must order TST. May direct the LPN or delegate to the MA & RNA/CNA after initial assessment.
LPN	Yes	Yes*	Yes€	<ul style="list-style-type: none"> Medical provider must order TST. LPN may not delegate to others.
MA-Registered	No	No	No	<ul style="list-style-type: none"> Not allowed to inject tuberculin or medications.
MA-Certified	Yes	Yes*	No	<ul style="list-style-type: none"> Read TST under delegation by RN or medical provider, not LPN.
Certified (CNA) and Registered (RNA) Nursing Assistants and Health Care Aides	No	Yes*	No	<ul style="list-style-type: none"> Read TST only under delegation by RN or medical provider, not LPN. See RCW 18.360.050
Health Care Provider (MD, DO, ARNP, PA, DPM, DDS, ND)	Yes	Yes*	Yes€	<ul style="list-style-type: none"> May direct RN or LPN or delegate to the MA & RNA/CNA after initial assessment.
TB Community Health Worker	Yes	Yes*	No	<ul style="list-style-type: none"> Must work within TB Program in LHJ Complete DOH TST and DOT training supervised by an RN. Health Officer (HO) authorization is needed. If HO is not a Medical Provider, must receive authorization from Medical Consultant to HO. See WAC 246-170-035
Community Health / Outreach Worker	No	No	No	<ul style="list-style-type: none"> Not allowed See RCW 70.28.032
Pharmacist	Yes	Yes*	No	<ul style="list-style-type: none"> CLIA Certificate & proper training; Collaborative agreement established. See https://www.wsparx.org/page/tuberculincert
EMS	No	¥ see below	¥ see below	<ul style="list-style-type: none"> See: Licensure Contacts by Facility Type for Health Care Personnel TB Screening
Medical Assistant - Phlebotomist	No	No	No	<ul style="list-style-type: none"> Not allowed See RCW 18.360.050

* determine mm size of induration only

€ “positive” or “negative”. An RN or LPN may not make a medical diagnosis but may create a plan of care and follow standing orders that outline the next steps after reading.

For more information see:

- ¥ [Licensure Contacts by Facility Type for Health Care Personnel TB Screening](#)
- Nursing Care Quality Assurance Commission email: nursingpractice@doh.wa.gov or ARNPPpractice@doh.wa.gov; website: <https://nursing.wa.gov/>
- Washington State Pharmacy Commission email: WSPQAC@doh.wa.gov; website: [Pharmacy Commission | Washington State Department of Health](#)
- For delegation rules, see: [RCW 18.360.060](#) and [WAC 246-827-0110](#)
- For the full scope of practice for all medical assistant professions, see RCW [18.360.050](#)

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