leading cause of death from a single infectious disease (World Health Organization, 2015). Ten million to 15 million persons in the United States are infected with TB. TB occurs in all ages but is most common in urban, low-income areas and among non-white racial and ethnic groups (American Academy of Pediatrics Committee on Infectious Diseases and Pickering, 2012). Children who were born in other countries have accounted for more than one fourth of newly diagnosed cases of TB in children 14 years old or younger in the United States (American Academy of Pediatrics Committee on Infectious Diseases and Pickering, 2012). The following groups have the greatest rates of latent TB infection: immigrants, international adoptees, refugees from or travelers to high-prevalence regions (Asia, Africa, Latin America, and countries of the former Soviet Union), homeless individuals, and inmates of correctional facilities (American Academy of Pediatrics Committee on Infectious Diseases and Pickering, 2012). Children with human immunodeficiency virus (HIV) infection have an increased incidence of TB disease, and all children with TB should be tested for HIV.

TB is caused by *M. tuberculosis,* an acid-fast bacillus. Children are susceptible to the human *(M. tuberculosis)* and the bovine *(Mycobacterium bovis)* organisms. In parts of the world where TB in cattle is not controlled or milk is not pasteurized, the bovine type is a common source of infection from the milk or is spread via airborne transmission.

The source of TB infection in children is usually an infected member of the household or a frequent visitor to the home, such as a babysitter or domestic worker. The airway is the usual portal of entry for the organism. In the lungs, a proliferation of epithelial cells surrounds and encapsulates the multiplying bacilli in an attempt to wall it off, thus forming the typical tubercle. Extension of the primary lesion at the original site causes progressive tissue destruction as it spreads within the lung, discharges material from foci to other areas of the lungs (e.g., bronchi, pleura), or produces pneumonia. Erosion of blood vessels by the primary lesion can cause widespread dissemination of the tubercle bacillus to near and distant sites (miliary TB). Extrapulmonary (miliary) TB may be manifested as malaise, fever, weight loss, superior lymphadenitis, meningitis, hepatomegaly, splenomegaly, and osteoarthritis