

TUBERCULOSIS (TB) SCREENING/TESTING¹ Please answer the following questions.

1. Have you ever had a positive TB skin test? Yes No
2. Have you ever had close contact with anyone who was sick with TB? Yes No
3. Were you born in one of the countries listed below and arrived in the U.S. within the past five years? Yes No
(If yes, please the country)
4. Have you ever traveled* to/in one or more of the countries listed below? Yes No
(If yes, please the country/ies)
5. Have you ever been vaccinated with BCG? Yes No

*The significance of the travel exposure should be discussed with a health care provider and evaluated.

Afghanistan	Dominican Republic	Malaysia	Seychelles
Algeria	Ecuador	Maldives	Sierra Leone
Angola	El Salvador	Mali	Singapore
Argentina	Equatorial Guinea	Marshall Islands	Solomon Islands
Armenia	Eritrea	Mauritania	Somalia
Azerbaijan	Estonia	Mauritius	South Africa
Bahrain	Ethiopia	Micronesia (Federated States of)	Sri Lanka
Bangladesh	French Polynesia	Mongolia	Sudan
Belarus	Gabon	Montenegro	Suriname
Belize	Gambia	Morocco	Swaziland
Benin	Georgia	Mozambique	Syrian Arab Republic
Bhutan	Ghana	Myanmar	Tajikistan
Bolivia (Plurinational State of)	Guam	Namibia	Thailand
Bosnia and Herzegovina	Guatemala	Nepal	The former Yugoslav Republic of Macedonia
Botswana	Guinea	Nicaragua	Timor-Leste
Brazil	Guinea-Bissau	Niger	Togo
Brunei Darussalam	Guyana	Nigeria	Tonga
Bulgaria	Haiti	Pakistan	Trinidad and Tobago
Burkina Faso	Honduras	Palau	Tunisia
Burundi	India	Panama	Turkey
Cambodia	Indonesia	Papua New Guinea	Turkmenistan
Cameroon	Iraq	Paraguay	Tuvalu
Cape Verde	Japan	Peru	Uganda
Central African Republic	Kazakhstan	Philippines	Ukraine
Chad	Kenya	Poland	United Republic of Tanzania
China	Kiribati	Portugal	Uruguay
Colombia	Kuwait	Qatar	Uzbekistan
Comoros	Kyrgyzstan	Republic of Korea	Vanuatu
Congo	Lao People's Democratic Republic	Republic of Moldova	Venezuela (Bolivarian Republic of)
Cook Islands	Latvia	Romania	Viet Nam
Côte d'Ivoire	Lesotho	Russian Federation	Yemen
Croatia	Liberia	Rwanda	Zambia
Democratic People's Republic of Korea	Libyan Arab Jamahiriya	Saint Vincent and the Grenadines	Zimbabwe
Democratic Republic of the Congo	Lithuania	Sao Tome and Principe	
Djibouti	Madagascar	Senegal	
	Malawi	Serbia	

Source: World Health Organization, Global Health Observatory, Tuberculosis Incidence 2009. Countries with incidence rates of ≥ 20 cases per 100,000 population. For future updates, refer to <http://apps.who.int/ghodata/?vid=510>

If the answer is **YES** to any of the above questions, Illinois College requires that a health care provider complete a tuberculosis risk assessment (to be completed within 6 months prior to the start of classes).

If the answer to all of the above questions is **NO**, no further testing or further action is required.

¹The American College Health Association has published guidelines on "Tuberculosis Screening and Targeted Testing of College and University Students." To obtain the guidelines, visit www.acha.org.

TUBERCULOSIS (TB) RISK ASSESMENT Persons with any of the following risk factors are candidates for either Mantoux tuberculin skin test (TST) or Interferon Gamma Release Assay (IGRA), unless a previous positive test has been documented:

1. Recent close contact with someone with infectious TB disease? Yes No
2. Foreign-born from (or travel* to/in) a high-prevalence area (see list on opposite page)? Yes No
3. Fibrotic changes on a prior chest x-ray suggestive inactive or past TB disease? Yes No
4. HIV/AIDS? Yes No
5. Organ transplant recipient? Yes No
6. Immunosuppressed (equivalent of >15 mg/day of prednisone for >1 month or TNF- α antagonist)? Yes No
7. History of illicit drug use? Yes No
8. Resident, employee or volunteer in a high-risk congregate setting (e.g., correctional facilities, nursing homes, homeless shelters, hospitals and other health care facilities)? Yes No
9. Medical condition associated with increased risk of progressing to TB disease if infected [e.g., diabetes mellitus, silicosis, head, neck or lung cancer, hematologic or reticuloendothelial disease such as Hodgkin's disease or leukemia, end stage renal disease, intestinal bypass or gastrectomy, chronic malabsorption syndrome, low body weight (i.e., 10% or more below ideal for the given population)]? Yes No

*The significance of the travel exposure should be discussed with a health care provider and evaluated.

1. Does the student have signs or symptoms of active tuberculosis disease? Yes No

If No, proceed to 2 or 3. If Yes, proceed with additional evaluation to exclude active tuberculosis disease including skin testing, chest x-ray and sputum evaluation as indicated.

2. Tuberculin Skin Test (TST)

(TST result should be recorded as actual millimeters (mm) of induration, tranverse diameter; if no induration, write "0". The TST interpretation should be based on mm of induration as well as risk factors.)**

Date given: ___/___/___

Result: _____ mm of induration

Date read: ___/___/___

**Interpretation: Positive Negative

Date given: ___/___/___

Result: _____ mm of induration

Date read: ___/___/___

**Interpretation: Positive Negative

3. Interferon Gamma Release Assay (IGRA)

Date obtained: ___/___/___ (specify method) QFT-G QFT-GIT T-Spot Other: _____

Result: Positive Negative Indeterminate Borderline (T-Spot only)

Date obtained: ___/___/___ (specify method) QFT-G QFT-GIT T-Spot Other: _____

Result: Positive Negative Indeterminate Borderline (T-Spot only)

4. Chest x-ray: (Required if TST or IGRA is positive)

Date of chest x-ray: ___/___/___

Result: Normal Abnormal

****Interpretation Guidelines**

>5mm is positive:

- :: Recent close contacts of an individual with infectious TB
- :: Persons with fibrotic changes on a prior chest x-ray consistent with TB disease
- :: Organ transplant recipients
- :: Immunosuppressed persons: taking >15mg/d of prednisone for >1 month; taking a TNF- α antagonist
- :: Persons with HIV/AIDS

>10mm is positive:

- :: Persons born in a high prevalence county or who resided in one for a significant* amount of time
- :: History of illicit drug use
- :: Mycobacteriology laboratory personnel
- :: History of resident, worker or volunteer in high-risk congregate settings
- :: Persons with the following clinical conditions: silicosis, diabetes mellitus, chronic renal failure, leukemias and lymphomas, head, neck or lung cancer, low body weight (>10% below ideal), gastrectomy or intestinal bypass, chronic malabsorption syndromes

*The significance of the travel exposure should be discussed with a health care provider and evaluated.

>15mm is positive:

- :: Persons with no known risk factors for TB disease

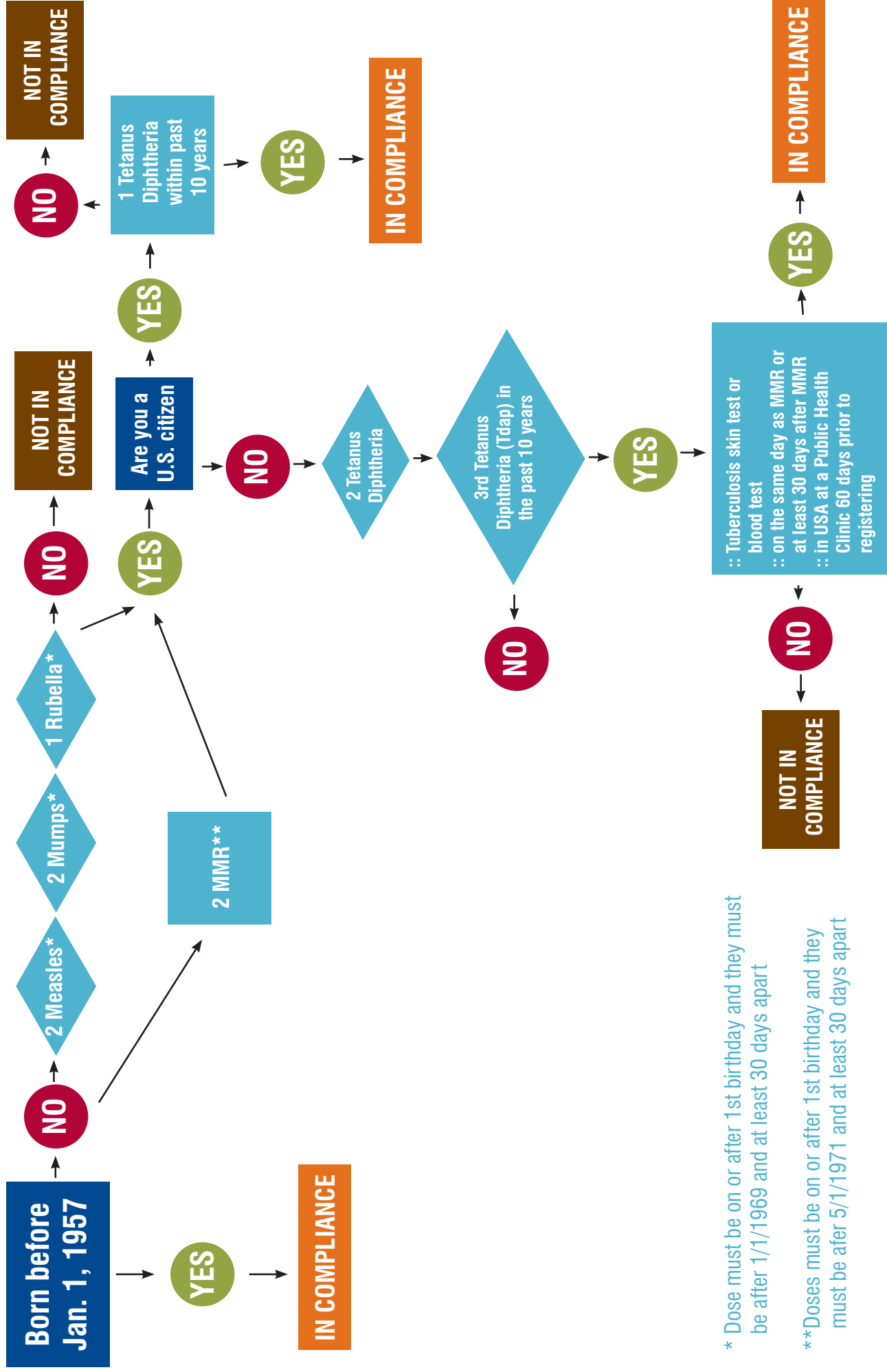
HEALTH CARE PROVIDER

Health Name(please print) _____

Signature _____ Date _____

Address _____ Phone _____

ARE YOU IN COMPLIANCE?



* Dose must be on or after 1st birthday and they must be after 1/1/1969 and at least 30 days apart

**Doses must be on or after 1st birthday and they must be after 5/1/1971 and at least 30 days apart