Name:	Date of Birth:	M#:

# Tool for Institutional Use to be Completed by Incoming Students <u>Tuberculosis (TB) Screening Questionnaire</u>

Have you ever had a positive TB skin test?  Have you ever had close contact with anyone who was sick with TB?				☐ Yes ☐ No ☐ Yes ☐ No	
•	-				
Were you born in one of the countries listed below and arrived in the U.S. within the past 5 years? * (If yes, please CIRCLE the country)  Have you ever traveled** to/in one or more of the countries listed below? (If yes, please CHECK the country/ies)				∐, Yes □ No	
			yes,	☐ Yes	□ No
Have you ever been	Have you ever been vaccinated with BCG?			☐ Yes	□ No
*future CDC update:	s may eliminate the 5 year tim	ne frame			
	e of the travel exposure sho		health care provider	and eval	uated.
Afghanistan	Congo DR	Kiribati	Nigeria		Suriname
Algeria	Cote d'Ivoire	Korea-DPR	Niue		Syrian Arab
Angola	Croatia	Korea-Republic	N. Mariana		Republic
Anguilla	Djibouti	Kuwait	Islands		Swaziland S
Argentina	Dominican	Kyrgyzstan	Pakistan		Lanka
Armenia	Republic	Lao PDR	Palau		Sudan
Azerbaijan	Ecuador	Latvia	Panama		Suriname
Bahamas	Egypt	Lesotho	Papua New		Syrian Arab
Bahrain	El Salvador	Liberia	Guinea		Republic
Bangladesh	Equatorial	Lithuania	Paraguay		Swaziland
Belarus	Guinea	Macedonia-	Peru		Tajikistan
Belize	Eritrea	TFYR	Philippines		Tanzania-U
Benin	Estonia	Madagascar	Poland		Thailand
Bhutan	Ethiopia	Malawi	Portugal		Timor-Leste
Bolivia	Fiji	Malaysia	Qatar		Togo
Bosnia &	French Polynesia	Maldives	Romania		Tonga
Herzegovina	Gabon	Mali	Russian		Tunisia
Botswana	Gambia	Marshall Islands	Federation		Turkey
Brazil	Georgia	Mauritania	Rwanda		Turkmenista
Brunei	Ghana	Mauritius	St. Vincent &		Tuvalu
Darussalam	Guam	Mexico	The Grenadines		Uganda
Bulgaria	Guatemala	Micronesia	Sao Tome &		Ukraine
Burkina Faso	Guinea	Moldova-Rep.			Uruguay
Burundi	Guinea-Bissau	Mongolia			Uzbekistan
Cambodia	Guyana	Montenegro	Senegal Vanuatu		
Cameroon	Haiti	Morocco	Seychelles		Venezuela
Cape Verde	Honduras	Mozambique	Sierra Leone		Viet Nam
Central African	India	Myanmar	Singapore		W. Bank &
Rep.	Indonesia	Namibia	Solomon Islands		Strip
Chad	Iran	Nauru	Somalia		Yemen
	Iraq	Nepal	South Africa		Zambia
China					
Colombia	Japan	New Caledonia	Spain		Zimbabwe
	Japan Kazakhstan Kenya	New Caledonia Nicaragua Niger	Spain Sri Lanka Sudan		Zimbabwe

> 20 cases per 100,000 population. For future updates, refer to www.who.int/globalatlas/dataQuery/default.asp

If the answer is YES to any of the above questions, MTSU requires that a health care provider complete a tuberculosis risk assessment (to be completed within 6months 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.

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Name:	Date of Birth:	M#:	
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# Tool for Use by Health Care Provider in the Clinical Setting

## **Tuberculosis (TB) Risk Assessment**

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

Risk Factor:	
Recent close contact with someone with infectious TB disease	☐ Yes ☐ No
Foreign-born from (or travel* to/in) a high-prevalence area (e.g., Africa, Asia, Eastern Europe, or Central or South America)	☐ Yes ☐ No
Fibrotic changes on a prior chest x-ray suggesting inactive or past TB disease	☐ Yes ☐ No
HIV/AIDS	☐ Yes ☐ No
Organ transplant recipient	☐ Yes ☐ No
$\overline{\text{Immunosuppressed (equivalent of} > 15 \text{ mg/day of prednisone for} > 1 \text{ month or TNF-}\alpha}$ antagonist)	□ Yes □ No
History of illicit drug use	☐ Yes ☐ No
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
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 e	valuated.
<ol> <li>Does the student have signs or symptoms of active tuberculosis disease? Yes</li> <li>If No, proceed to 2 or 3. If Yes, proceed with additional evaluation to exclude active tu including tuberculin skin testing, chest x-ray, and sputum evaluation as indicated.</li> <li>Tuberculin Skin Test (TST)</li> </ol>	berculosis disease
(TST result should be recorded as actual millimeters (mm) of induration, transverse dia induration, write "0". The TST interpretation should be based on mm of induration as v factors.)**	
Date Given:/ Date Read://_  M D Y  Result: mm of induration **Interpretation: positive negative	

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3. Interferon Gamma Release Assay (IG	GRA)		
Date Obtained://_ (specify	method) QFT-G	QFT-GIT	other
Result: Negative Positive Intermed	ediate		
4. Chest x-ray: (Required if TST or IGF Date of chest x-ray:// F		abnormal	_
Medical Provider Name and Title:			
Signature:		Date	Signed:

\_\_\_\_\_ M#:\_

Date of Birth:\_\_\_

#### \*\*Interpretation guidelines

#### >5 mm is positive:

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

### >10 mm is positive:

- Persons born in a high prevalence country 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

#### >15 mm is positive:

Persons with no known risk factors for TB disease

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<sup>\*</sup>The significance of the exposure should be discussed with a health care provider and evaluated.