

TB Screening Questionnaire

Name:		Date of Birth:	S#:			
Addre	ss:	City:				
Zip Code: State:			Gender:			
ar	cy 1.0X: International Students in F-1 street required to have, as part of the Internations, and Rubella (MMR). Add additional immunization re	rnational Student Enrollment	requirement, proof o be screened for Tu	of immunizat iberculosis (TE	ions fo	r
Part I:	Please answer the following Tubercul	osis (TB) screening questions	:			
1.	Have you ever had a positive Tuberculos	sis (TB) skin test?	Yes	No		
2.	Have you ever been diagnosed with TB i	nfection or TB disease?	Yes	No		
3.	Have you ever had close contact with ar	yone who was sick with TB?	Yes	No		
4.	Have you ever been vaccinated with BC	G?	Yes	No		
Were	you born in one of the countries listed be	low that have a high incidence	of active TB disease?			
(If yes,	please <i>CIRCLE</i> the country, below)	-				
Angola Azerbai Banglac Belarus Botswa Brazil	desh Congo DR Congo	Kazakhstan Kenya Kyrgyzstan Lesotho Liberia Malawi	Pakistan Papua New Guinea Peru Philippines Republic of Moldova Russian Federation	Tajikist Thailan Uganda Ukraine UR Tan Uzbeki	id a e zania	
Cambodia Ghana		Mozambique	Sierra Leone	Viet Nam		
Camero		Myanmar	Somalia		Zambia	
Centrai Republi	African India c Indonesia	Namibia Nigeria	South Africa Swaziland	Zimbab	owe	
	World Health Organization Global Health Observatory on. For future updates, refer to http://apps.who.int/g		ntries with incidence rates o	f ≥ 20 cases per 100	0,000	
5.	Have you had frequent or prolonged vis	its* to one or more of the cour	tries listed above wit	h a high	Yes	No
	prevalence of TB disease (if yes, CHECK	the countries, above)				
6.	Have you been a resident and/or employee of high-risk congregate setting (e.g., correctional facilities, long-term care facilities, and homeless shelters)?				Yes	No
7.						No
8.	Have you ever been a member of any of latent <i>M. Tuberculosis</i> infection of active drugs and alcohol?	the following groups that may	have an increases inc	cidence of	Yes	No

Part II: Measles, Mumps, and Rubella (MMR)

- Proof of two MMR vaccinations, after your first birthday, and that are administered at least four weeks apart. In order to complete this requirement, you must submit appropriate documentation to the Center for Health and Counseling.
 OR
 - Complete blood tests to show immunity to Measles, Mumps and Rubella. You may visit the Center for Health & Counseling to complete these tests.
- As an F1 International Student, you are also required to complete a Tuberculosis (TB) Screening, which may require additional testing. You may also complete this test at the Center for Health & Counseling.

^{***}Return to Health and Counseling Center with required medical documentation within 5 weeks of your first semester***