

Name	Student ID 920	Date of Birth	Today's Date
-------------	--------------------------	----------------------	---------------------

Please answer the following questions by indicating Yes or No:	YES	NO
Have you ever had a positive TB skin test?		
Have you ever been vaccinated with BCG?		
Have you ever had close contact with persons known or suspected to have active TB disease?		
Were you born in one of the countries or territories listed below that have a high incidence of active TB disease? (If YES, please CIRCLE the country, below)		
Have you had frequent or prolonged visits* to one or more of the countries or territories listed below with a high prevalence of TB disease? (If yes, please CHECK the country/ies)		
Have you been a resident and/or employee of high-risk congregate settings (e.g. correctional facilities, long-term care facilities, homeless shelters)?		
Have you been a volunteer or health care worker who served clients who are at increased risk for active TB disease?		
Have you ever been a member of any of the following groups that may have an increased incidence of latent <i>M. tuberculosis</i> infection or active TB disease: medically underserved, low-income, or abusing drugs or alcohol?		

Afghanistan	Columbia	Iraq	Nauru	Singapore
Algeria	Comoros	Kazakhstan	Nepal	Somalia
Angola	Congo	Kenya	New Caledonia	South Africa
Anguilla	Côte d'Ivoire	Kiribati	Nicaragua	South Sudan
Argentina	Democratic People's Republic of Korea	Kuwait	Niger	Sri Lanka
Armenia	Democratic Republic of the Congo	Kyrgyzstan	Nigeria	Sudan
Azerbaijan	Djibouti	Lao People's Democratic Republic	Northern Mariana	Suriname
Bangladesh	Dominican Republic	Latvia	Islands	Swaziland
Belarus	Ecuador	Lesotho	Pakistan	Syrian Arab Republic
Belize	El Salvador	Liberia	Palau	Tajikistan
Benin	Equatorial Guinea	Libya	Panama	Tanzania (United Republic of)
Bhutan	Eritrea	Lithuania	Papua New Guinea	Thailand
Bolivia (Plurinational State of)	Ethiopia	Madagascar	Paraguay	Timor-Leste
Bosnia and Herzegovina	Fiji	Malawi	Peru	Togo
Botswana	Gabon	Malaysia	Philippines	Tunisia
Brazil	Gambia	Maldives	Portugal	Turkmenistan
Brunei Darussalam	Georgia	Mali	Qatar	Tuvalu
Bulgaria	Ghana	Marshall Islands	Republic of Korea	Uganda
Burkina Faso	Greenland	Mauritania	Republic of Moldova	Ukraine
Burundi	Guam	Mauritius	Romania	Uruguay
Cabo Verde	Guatemala	Mexico	Russian Federation	Uzbekistan
Cambodia	Guinea	Micronesia (Federated States of)	Rwanda	Vanuatu
Cameroon	Guinea-Bissau	Mongolia	Sao Tome and Principe	Venezuela (Bolivarian Republic of)
Central African Republic	Guyana	Montenegro	Senegal	Viet Nam
Chad	Haiti	Morocco	Serbia	Yemen
China	Honduras	Mozambique	Sierra Leone	Zambia
China, Hong Kong SAR	India	Myanmar	Serbia	Zimbabwe
China, Macao SAR	Indonesia	Namibia	Sierra Leone	

Patient Signature _____

Health Services Medical Staff will review the answers you have provided and if any of the questions were answered "YES" will request that you receive TB testing as soon as possible when you arrive on campus.