

Ohio Northern University Health Center TB Screening Questionnaire ONU Health Center

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Part I: <u>Tuberculosis (TB) Screening Questionnaire</u> (to be completed by incoming students)

Please answer the following	g questions:				
Have you ever had close co	ontact with persons known or	suspected to have active TI	B disease?	☐ Yes	□ No
Were you born in one of th disease? (If yes, please CIF	e countries or territories listed RCLE the country, below)	l below that have a high inc	eidence of active TB	☐ Yes	□ No
Afghanistan Algeria Angola Anguilla Argentina Arrmenia Azerbaijan Bangladesh Belarus Belize Benin Bhutan Bolivia (Plurinational State of) Bosnia and Herzegovina Botswana Brazil Brunei Darussalam Bulgaria Burkina Faso Burundi Cabo Verde Cambodia Cameroon Central African Republic Chad China China, Hong Kong SAR China, Macao SAR Colombia Comoros	Congo Côte d'Ivoire Democratic People's Republic of Korea Democratic Republic of the Congo Djibouti Dominica Dominican Republic Ecuador El Salvador Equatorial Guinea Eritrea Eswatini Ethiopia Fiji French Polynesia Gabon Gambia Georgia Ghana Greenland Guam Guatemala Guinea Guinea Guinea-Bissau Guyana Haiti Honduras India Indonesia	Iran (Islamic Republic of) Iraq Kazakhstan Kenya Kiribati Kuwait Kyrgyzstan Lao People's Democratic Republic Latvia Lesotho Liberia Libya Lithuania Madagascar Malawi Malaysia Maldives Mali Malta Marshall Islands Mauritania Mauritius Mexico Micronesia (Federated States) Mongolia Morocco Mozambique Myanmar	Namibia Nauru Nepal Nicaragua Niger Niue Nigeria Northern Mariana Islands Pakistan Palau Panama Papua New Guinea Paraguay Peru Philippines Qatar Republic of Korea Republic of Moldova Romania Russian Federation Rwanda Sao Tome and Principe Senegal Sierra Leone	Singapore Solomon Isla Somalia Sout South Sudan Sri Lanka Sudan Suriname Swaziland Tajikistan Thailand Timor-Leste Togo Tokelau Tunisia Turkmenistat Uganda Ukraine United Repui Tanzania Uruguay Uzbekistan Vanuatu Venezuela (E Republic o Viet Nam Yemen Zambia Zimbabwe	n Tuvalu blic of
	ion Global Health Observatory, Tub refer to <u>http://www.who.int/tb/countr</u>		ries with incidence rates of≥	20 cases per 1	00,000
	orolonged visits* to one or mo sease? (If yes, CHECK the co			☐ Yes	□ No
Have you been a resident a long-term care facilities, ar	nd/or employee of high-risk c nd homeless shelters)?	ongregate settings (e.g., co	rrectional facilities,	☐ Yes	□ No
Have you been a volunteer TB disease?	or health care worker who ser	rved clients who are at incr	eased risk for active	☐ Yes	□ No
	mber of any of the following ection or active TB disease:			☐ Yes	□ No
	S to any of the above question Part II and Part III for assess			ealth care	
	of the above questions is NO			lease sign th	is
Student Name:		DOB	Date:		

Part II. Clinical Assessment by Health Care Provider

Clinicians should review and verify the information in Part I. Persons answering YES to any of the questions in Part I are candidates for either Mantoux tuberculin skin test (TST) or Interferon Gamma Release Assay (IGRA), unless a previous positive test has been documented.

History of a positive TB skin test or IGRA blood test? (If yes, document below) Yes No
History of BCG vaccination? (If yes, consider IGRA if possible.) Yes No
1. TB Symptom Check
Does the student have signs or symptoms of active pulmonary tuberculosis disease? Yes No
If No, proceed to 2 or 3
If yes, check below:
 □ Cough (especially if lasting for 3 weeks or longer) with or without sputum production □ Coughing up blood (hemoptysis) □ Chest pain □ Loss of appetite □ Unexplained weight loss □ Night sweats □ Fever
Proceed with additional evaluation to exclude active tuberculosis disease including tuberculin 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, transverse diameter; if no induration, write "0". The TST interpretation should be based on mm of induration as well as risk factors.)**
Date Given:/ Date Read:// M D Y M D Y
Result: mm of induration **Interpretation: positive negative
Date Given:/ Date Read:// M D Y M D Y
Result: mm of induration **Interpretation: positive negative
**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 and other immunosuppressed persons (including receiving equivalent of >15 mg/d of prednisone for >1 month. HIV-infected persons
>10 mm is positive: recent arrivals to the U.S. (<5 years) from high prevalence areas or who resided in one for a significant* amount of time injection drug users mycobacteriology laboratory personnel residents, employees, or volunteers in high-risk congregate settings

persons with medical conditions that increase the risk of progression to TB disease including silicosis, diabetes mellitus, chronic renal failure, certain types of cancer (leukemias and lymphomas, cancers of the head, neck, or lung), gastrectomy or jejunoileal bypass and weight loss of at least 10% below ideal body weight.

>15 mm is positive:

persons with no known risk factors for TB who, except for certain testing programs required by law or regulation, would otherwise not be tested.

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

3. I	nterferon Gamma Release Ass	ay (IGRA)					
	Date Obtained:// M D Y	(specify method)	QFT-GIT	T-Spot	other		
	Result: negative positive_	indeterminate_	borde	rline (T-	-Spot only)		
	Date Obtained:// M D Y	(specify method)	QFT-GIT	T-Spot	other		
	Result: negative positive_	indeterminate_	borde	rline (T-	-Spot only)		
	4. Chest x-ray: (Required if TS	ST or IGRA is posit	ive)				
	Date of chest x-ray:// M D Y	_ Result: normal	_ abnorma	l			
Pa	rt III. Management of Po	sitive TST or I	GRA				
rec are	students with a positive TST or IC ommendation to be treated for late at increased risk of progression fro sible.	nt TB with appropria	ite medicati	on. Howev	er, students in	n the following groups	
	Infected with HIV Recently infected with <i>M. tuberce</i> History of untreated or inadequate consistent with prior TB disease Receiving immunosuppressive the corticosteroids equivalent to/great organ transplantation Diagnosed with silicosis, diabetes Have had a gastrectomy or jejuno Weigh less than 90% of their idea Cigarette smokers and persons who	ely treated TB diseas erapy such as tumor ter than 15 mg of pre s mellitus, chronic re- pileal bypass al body weight	e, including necrosis fac dnisone per	tor-alpha (' day, or im	TNF) antagor munosuppres	nists, systemic ssive drug therapy following	
	pulations defined locally as having an inculations	reased incidence of disea	se due to M. tı	<i>uberculosis</i> , in	ncluding medica	lly underserved, low-income	
	Student agrees to receive trea	tment					
	Student declines treatment at	this time					
	Health Care Profess	sional Signature			Date		
	Address						
	0	Dhio Northern Univers 525 S. Main St	•		er		

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