

Part I: Tuberculosis (TB) Screening Questionnaire

Please answer the following questions (circle your answer):

Have you ever had close contact with persons known or suspected to have active TB disease? Yes No

Were you born in one of the countries listed below that have a high incidence of active TB disease? Yes No
 (If yes, please CIRCLE the country, below)

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

Have you had frequent or prolonged visits* to one or more of the countries listed above with a high prevalence of TB disease? (If yes, CHECK the countries, above) Yes No

Have you been a resident and/or employee of high-risk congregate settings (e.g., correctional facilities, long-term care facilities, and homeless shelters)? Yes No

Have you been a volunteer or health-care worker who served clients who are at increased risk for active TB disease? Yes No

Have you ever been a member of any of the following groups that may have an increased incidence of latent *M. tuberculosis* infection or active TB disease – medically underserved, low-income, or abusing drugs or alcohol? Yes No

Have you ever had a positive TB skin test or IGRA blood test? Yes No

Have you had the BCG vaccination? Yes No

The BCG vaccination is a vaccine for Tuberculosis that is typically given in foreign countries with a higher incidence of TB. Please visit <http://www.cdc.gov/tb/publications/factsheets/prevention/BCG.htm> for more information regarding this vaccine.

Print Name _____ Date of Birth / / Student ID _____

Signature _____ Date / / _____