

Tuberculosis (TB) Risk Assessment

Name _____ MTSU ID Number _____
Last First Middle

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 ___

Immunosuppressed (equivalent of > 15 mg/day of prednisone for >1 month or TNF-a 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 travel exposure should be discussed with a health care provider and evaluated.*

1. Does the student have signs or symptoms of active tuberculosis disease? Yes ___ No ___

If No, proceed to 2 or 3. If Yes, 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 ___

(OVER)

