

Employee Health
 Business Center
 3200 Burnet Avenue, A Level
 Cincinnati OH 45229
 Phone 513-585-6600
 Fax 513-585-6524

TB Screening Questionnaire

- annual
- replacement
- 1 step
- 2 step
- post exposure

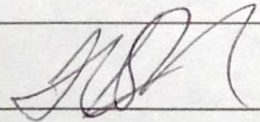
Name: (print) Tusha Shal SSN or EID: 079-48-2910
 Dept: Med Staff Date: 10/3/12

Workplace location:

- The University Hospital
- Drake Center
- Other (specify _____)
- Business Center
- UC Physicians
- West Chester Hospital
- Lindner Center of Hope

1. Do you have a history of a positive TB Skin Test, or history of having TB? Yes No
2. Do you now have any condition requiring prolonged steroid or immunosuppressive therapy? Yes No
3. Do you have an immunosuppressive illness at the present time? Yes No
4. Have you had any of the following **in the past year**?
 - Recent, close contact with any person having active tuberculosis? Yes No
 - Unexplained productive cough? Yes No
 - Coughing up blood? Yes No
 - Unexplained weight loss or increased fatigue? Yes No
 - Unexplained fever or night sweats? Yes No
5. Have you ever had the BCG vaccine? Yes No
 (Vaccine given primarily in foreign countries where there is a high incidence of tuberculosis)

I hereby consent to the injection of tuberculin PPD skin test. I further understand that my site ***must be read and documented by a physician or nurse 48-72 hours*** after the injection. This form must be returned to Employee Health. I grant permission for the information contained in this form to be shared with other health systems for the purpose of employment, education, or licensure.

Signature: 

SITE Drake DATE/TIME 10/03/12 ADMINISTERED BY: Christine Pat
 DATE READ: 10/6/2012 READ BY: M. Niranjan Reddy
 RESULT: Negative MM INDURATION: 3mm

If any redness or induration appears, the skin test must be read and measured by EH staff. Failure to have the site appropriately read and documented will render the test invalid.

SITE _____ DATE/TIME _____ ADMINISTERED BY: _____
 DATE READ: _____ READ BY: _____
 RESULT: _____ MM INDURATION: _____