



Name

DOB

Date

Initial Assessment (*section 1-5*)

Annual Assessment (*section 1*)

Section 1 Do any of the following possible symptoms of TB exist:

- Unexplained weight loss of 10 pounds or more
- Unexplained persistent cough for more than 3 weeks
- Unexplained cough productive of bloody sputum
- Unexplained elevation of temperature for more than one week ($>101^{\circ}$ F)
- Respiratory difficulty or shortness of breath
- Chills or night sweats
- Generalized weakness or fatigue
- Poor appetite

Section 2 Do any of the following risk factors for TB infection exist:

- Close contact with a known or suspected case of active tuberculosis
- Use of illegal injected drugs
- HIV (Human Immunodeficiency Virus) infection
- Resident or employee in a high-risk congregate living setting (homeless shelter, long term care facilities with high risk clients, high risk correctional facility, or jail)
- (High Risk = cluster of persons with confirmed TB disease)

Section 3 Do any of the following risk factors for TB disease exist:

- History of inadequately treated TB
- Diabetes mellitus*
- Lymphoma or leukemia*
- Cancer of the head, neck or lung*
- Chronic kidney failure or end-stage renal disease*
- Silicosis*
- Gastrectomy or intestinal bypass*
- Long term immunosuppressive therapy or use of prednisone ≤ 15 mg/day for \geq one month*
- *Decision to skin test should be based on the individual's risk factors and local epidemiology*

Section 4 Residence or prolonged travel in a country where TB is common

In the past five years, the individual has lived in or travel for 30 days or more to any of the areas with a high prevalence of TB as defined by the World Health Organization**

The significance of the exposure should be discussed and evaluated with the PCP

Action(s)

No risk factors for TB – requires no follow-up

Administered TB skin test: Date

Results

Referred for CXR

Referred for medical evaluation

Other

Nurse signature



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INSTRUCTIONS FOR USE OF FORM

This form is for the exclusive use of YDC clinic staff when youth enter the facility to assess their risk for tuberculosis.

****Areas with a high prevalence of TB as defined by the World Health Organization:**

Africa – all countries

Asia/Southeast Asia/Pacific Islands – all countries

North, Central & South America – Argentina, Bahamas, Belize, Bolivia, Brazil, Costa Rica, Columbia, Dominican Republic, Ecuador, El Salvador, Guatemala, Guyana, Haiti, Honduras, Mexico, Nicaragua, Panama, Paraguay, Peru, Suriname, Venezuela

Europe – Belarus, Bosnia-Herzegovina, Bulgaria, Croatia, Estonia, Hungary, Latvia, Lithuania, Macedonia, Moldova, Poland, Portugal, Romania, Russian Federations, Serbia, Slovak Republic, Slovenia, Ukraine, Yugoslavia

Middle East – Bahrain, Iran, Iraq, Israel, Jordan, Kuwait, Lebanon, Oman, Qatar, Saudi Arabia, Syrian Arab Republic, Turkey, Yemen

Source: World Health Organization Global Tuberculosis Control, WHO Report 2006, Countries with Tuberculosis incidence rates of ≥ 20 cases per 100,000 populations. For future updates, refer to www.who.int/globalatlas/dataQuery/default.asp



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