

Tuberculosis (TB) Screening Requirement Form for New Students

Tuberculosis (TB) screening is required for all incoming International students (including newly transferred) and those considered to be International by TAC §21.25(c) (formerly, HB 1403) or TEC 54.052 who were born in, resided in, or traveled to a country other than the United States. Students must complete and sign the following questionnaire. For help completing this form, please contact TWU Student Health Services at 940.898.3825 or visit us on the TWU Denton campus.

Student Name _____ TWU ID No. _____ Date of Birth _____

Is your country of birth listed below? Yes No

If yes, which of these is your birth country?

In the lists below, please check the boxes to the left of ALL countries you have traveled to and/or resided in.

Afghanistan	Colombia	Iraq	Nauru	South Africa
Algeria	Comoros	Kazakhstan	Nepal	South Sudan
Angola	Congo	Kenya	New Caledonia	Sri Lanka
Anguilla	Côte d'Ivoire	Kiribati	Nicaragua	Sudan
Argentina	Dem. People's Rep. of Korea	Kuwait	Niger	Suriname
Armenia	Dem. Rep. of the Congo	Kyrgyzstan	Nigeria	Swaziland
Azerbaijan	Djibouti	Lao People's Dem. Rep.	Northern Mariana Islands	Syrian Arab Republic
Bangladesh	Dominican Republic	Latvia	Pakistan	Tajikistan
Belarus	Ecuador	Lesotho	Palau	Tanzania (United Rep. of)
Belize	El Salvador	Liberia	Panama	Taiwan
Benin	Equatorial Guinea	Libya	Papua New Guinea	Thailand
Bhutan	Eritrea	Lithuania	Paraguay	Timor-Leste
Bolivia (Plurinational State of)	Ethiopia	Madagascar	Peru	Togo
Bosnia and Herzegovina	Fiji	Malawi	Philippines	Tunisia
Botswana	Gabon	Malaysia	Portugal	Turkmenistan
Brazil	Gambia	Maldives	Qatar	Tuvalu
Brunei Darussalam	Georgia	Mali	Republic of Korea	Uganda
Bulgaria	Ghana	Marshall Islands	Republic of Moldova	Ukraine
Burkina Faso	Greenland	Mauritania	Romania	Uruguay
Burundi	Guam	Mauritius	Russian Federation	Uzbekistan
Cabo Verde	Guatemala	Mexico	Rwanda	Vanuatu
Cambodia	Guinea	Micronesia (Fed. States of)	Sao Tome and Principe	Venezuela (Bolivarian Rep. of)
Cameroon	Guinea-Bissau	Mongolia	Senegal	Viet Nam
Central African Republic	Guyana	Montenegro	Serbia	Yemen
Chad	Haiti	Morocco	Sierra Leone	Zambia
China	Honduras	Mozambique	Singapore	Zimbabwe
China, Hong Kong SAR	India	Myanmar	Solomon Islands	
China, Macao SAR	Indonesia	Namibia	Somalia	

Source: World Health Organization Global Health Observatory, Tuberculosis Incidence 2015. Countries with incidence rates of ≥ 20 cases per 100,000 population. For future updates, refer to <http://www.who.int/tb/country/en/>.

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| 1. Did you select any of the countries above? | Yes | No |
| 2. Have you ever had a BCG vaccine (Bacillus Calmette-Guerin)? | Yes | No |
| 3. Have you ever had a positive TB test or been diagnosed with TB? | Yes | No |
| 4. Have you had close contact with persons known or suspected to have TB? | Yes | No |
| 5. Have you been a volunteer or health care worker who served clients in a hospital or healthcare facility? | Yes | No |
| 6. Have you been a volunteer, employee or resident in a correctional facility, long-term facility or homeless shelter? | Yes | No |

Students answering **NO** to every question submit only this completed form.

Any YES answer requires TB Blood Testing using T-Spot or QuantiFERON Gold; TB Skin Testing is NOT accepted.

See next page for information for students with positive TB Blood Tests results or history of antibiotics for TB infection.

I have completed the above questionnaire. I have not come from an area with high incidence of TB and I verify that all answers to the above questions are NO.

I have completed the above questionnaire and submit my TB Blood Test results. Please note that if TB test result is positive, a Chest X-Ray and Tuberculosis Clearance Statement is required in order to be considered compliant and register for classes.

I have completed the above questionnaire. I have taken antibiotics for TB infection and do not require a TB Blood Test. Submission of a recent Chest X-Ray, Tuberculosis Clearance Statement, and proof of antibiotic treatment is required in order to be considered compliant and register for classes.

Student Signature _____

Date _____

Please refer to the **TWU Student Tuberculosis Screening and Case Management Policy** for additional information. For questions, please call TWU Student Health Services at 940.898.3825 or visit TWU SHS website <https://www.twu.edu/student-health-services/tuberculosis-screening/>

Submit signed and completed form to immunization@twu.edu.

TWU Student Tuberculosis Screening and Case Management Policy Requirements

New International Students and those considered to be international by TAC §21.25(c) (formerly, HB 1403) or TEC 54.052 due to birth or residence outside of the U.S.

- Must complete the TB screening process prior to the first day of class.
- Must submit the TWU Tuberculosis (TB) Screening Requirement Form for New Students
 - Individuals who answer YES to any risk factor for TB are required to have a TB Blood Test
 - Individuals born, resided in, or traveled to countries at low risk for TB who also answer NO to all risk factor questions submit only the completed Form (TB Blood Test not required)
- **Tuberculin Skin Testing is NOT accepted for screening for these students**

Tuberculosis Testing Procedure for those answering YES to any question on the Screening Form

- TB Blood Testing using T-Spot or QuantiFERON Gold required
 - Testing must be done in the United States within 365 days prior to the first day of classes upon entrance into TWU
 - Acceptable sites for TB screening include TWU Student Health Services, TWU subcontracted health clinics in Dallas and Houston, US licensed private physicians, and US licensed medical clinics
 - Students who have previously taken antibiotics for TB do not need a TB Blood Test, see below for alternate requirements
- Students with negative TB Blood Test results submit test results with Form; no additional testing required
- All students with positive TB blood test results must submit BOTH of the following:
 - Chest x-ray results from x-ray obtained in the U.S. within 365 days prior to the first day of classes upon entrance to TWU
 - Completed Tuberculosis Clearance Statement signed by a U.S. licensed medical professional
- Students treated with antibiotics for TB infection (active or latent) in the past must submit ALL of the following:
 - Chest x-ray results from x-ray obtained in the U.S. within 365 days prior to the first day of classes upon entrance to TWU
 - Proof of antibiotic treatment, including duration of therapy
 - Completed Tuberculosis Clearance Statement signed by a U.S. licensed medical professional
 - New TB blood testing is not required
- Chest x-ray submission requires the following to meet compliance requirements
 - Positive TB Blood Test results AND/OR proof of antibiotic treatment for TB with duration of therapy
 - Completed Tuberculosis Clearance Statement signed by U.S. licensed medical professional
 - Chest x-ray and Statement without test results or proof of antibiotics is NOT accepted
- Non-compliance with this policy will prevent students from registering for classes.

Please refer to the **TWU Student Tuberculosis Screening and Case Management Policy** for additional information.

For questions, please call TWU Student Health Services at 940.898.3825 or visit TWU SHS website <https://www.twu.edu/student-health-services/tuberculosis-screening/>