ABINGTON SCHOOL DISTRICT

HEALTH SERVICES

**TUBERCULOSIS(TB) EXPOSURE RISK ASSESSMENT QUESTIONNAIRE**

 Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_

1. Was the student born outside the United States? (circle one)

YES (what country) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NO

If yes and if the country is listed on page 2 as having a low incidence of TB, then NO testing is required.

**IF COUNTRY IS NOT LISTED, TESTING IS REQUIRED PRIOR TO ADMISSION TO SCHOOL. Tear off bottom of page on dotted line.**

1. Has the student traveled outside the United States for > 90days? (circle one)

YES (what country) \_\_\_\_\_\_\_\_\_\_ NO

If yes and the country is listed on page 2 as having a low incidence of TB, then NO testing is required.

IF COUNTRY IS NOT LISTED, TESTING IS REQUIRED WITHIN 8-10 WEEKS OF RETURN TO U.S.

Date returned to U.S. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Test required date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Take this form to your Primary Physician/Montgomery County Health Department (MCHD) (215-784-5415)**

**This person was born in a High Risk Country for Tuberculosis as defined by the CDC/MCHD.**

**TB MEDICAL CLEARANCE IS REQUIRED PRIOR TO ADMISSION TO SCHOOL.**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Results\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medical Provider Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Rev.01/14/2020*

**WORLD HEALTH ORGANIZATION: THE FOLLOWING COUNTRIES HAVE A LOW INCIDENCE OF TB AND REQUIRE NO TB TESTING**

Albania

American Samoa

Andorra

Antigua and Barbua

Aruba

Australia

Austria

Bahamas

Bahrain

Barbados

Belgium

Bermuda

Bonaire

British Virgin Islands

Canada

Cayman Islands

Chile

Cook Islands

Costa Rica

Croatia

Cuba

Curacao

Cyprus

Czech Republic

Denmark

Dominica

Egypt

Estonia

Finland

France

Germany

Greece

Grenada

Hungary

Iceland

Iran

Ireland

Israel

Italy

Jamaica

Japan

Jordan

Lebanon

Luxembourg

Malta

Monaco

Montenegro

Montserrat

Netherlands

Netherlands Antilles

New Caledonia

New Zealand

Norway

Oman

Poland

Puerto Rico

Saba

Saint Eustatius

Saint Kitts and Nevis

Saint Lucia

Saint Maarten (Dutch)

Saint Vincent & Grenadine

Samoa

San Marino

Saudia Arabia

Serbia

Seychelles

Slovakia

Slovenia

Spain

Sweden

Switzerland

Syrian Arab Republic

TFYR Macedonia

Tokelau

Tonga

Trinidad and Tobago

Turkey

Turks and Caicos

United Arab Emirates

United Kingdom of Great Britain

United States of America

Virgin Islands

Wallis & Futuna

West Bank & Gaza Strip