## TB Skin Test Questionnaire

- **ID#** ______________________  **Today’s Date:** _________________

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<tr>
<th><strong>Name (last)</strong></th>
<th><strong>(first)</strong></th>
<th><strong>(M.I.)</strong></th>
<th><strong>Birthdate</strong></th>
<th><strong>(local) Telephone #</strong></th>
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<th><strong>(Local) Address</strong></th>
<th><strong>City</strong></th>
<th><strong>State</strong></th>
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### Please answer the following questions:

1. Have you had a previous positive [tuberculin skin test](#)?
2. Have you ever taken medication (INH) for tuberculosis?
3. Have you ever had active tuberculosis?
4. Have you received a **LIVE** viral vaccine (e.g., polio, measles, mumps, rubella, VARICELLA, Flu Mist) within the last 30 days?
5. If you were born in a country outside of the United States, did you receive the BCG vaccine for immunization against TB, if so when?
6. Are you taking any steroid therapy (e.g., cortisone, prednisone?)
7. Are you pregnant?
8. Can you return to the SHC in 48 hours to have this test read? **NOTE:** If you do not return results will be inconclusive and a NEW test must be administered as well as a new fee charged.

To determine if tuberculosis has ever entered your body, a drop of a solution is placed into the skin of your arm. If a firm bump appears in 48 hours (2 days) that measures over 10 millimeters (3/8 of an inch), it means a present or past infection with tuberculosis. A chest x-ray must then be done.

No hardness, or hardness less than 10 millimeters in size, means you show no evidence of infection with tuberculosis (no chest x-ray is necessary).

Some redness or blistering may occur on your arm, but it does not necessarily indicate a positive test for TB.

I give my consent to have a tuberculin skin test.

- **Signature:** ___________________________  **Test Date:** _______________
- **Reading Date:** _________  **Neg.** ___  **Pos.** ___  **mm** ___  **Read by:** ____________________
- **Site:** ________________  **Manufacturer:** ______________________  **Lot No.** ______

Revised 8/15/07