

Name: _____

Date: _____

USD ID #: _____



Tuberculosis (TB) Screening Questionnaire

1. Have you ever had close contact with persons known or suspected to have active TB disease?
 Yes No
2. Were you born in one of the countries listed below that have a high incidence of active TB disease? (If yes, please CHECK the country, below)
 Yes No
3. Have you had frequent or prolonged visits* to one or more of the countries listed with a high prevalence of TB disease? (If yes, CHECK the countries below)
 Yes No
4. Have you been a resident and/or employee of high-risk congregate settings (e.g., correctional facilities, long-term care facilities, and homeless shelters)?
 Yes No
5. Have you been a volunteer or health-care worker who served clients who are at increased risk for active TB disease?
 Yes No
6. Have you ever been a member of any of the following groups that may have an increased incidence of latent M. tuberculosis infection or active TB disease – medically underserved, low-income, or abusing drugs or alcohol?
 Yes No

Countries with a high incidence of active TB disease:

<input type="checkbox"/> Afghanistan	<input type="checkbox"/> Algeria	<input type="checkbox"/> Angola	<input type="checkbox"/> Argentina	<input type="checkbox"/> Azerbaijan
<input type="checkbox"/> Bangladesh	<input type="checkbox"/> Belize	<input type="checkbox"/> Benin	<input type="checkbox"/> Bhutan	<input type="checkbox"/> Bolivia
<input type="checkbox"/> Bosnia and Herzegovina	<input type="checkbox"/> Botswana	<input type="checkbox"/> Brazil	<input type="checkbox"/> Brunei Darussalam	<input type="checkbox"/> Burkina Faso
<input type="checkbox"/> Burundi	<input type="checkbox"/> Cabo Verde	<input type="checkbox"/> Cambodia	<input type="checkbox"/> Cameroon	<input type="checkbox"/> Central African Republic
<input type="checkbox"/> Chad	<input type="checkbox"/> China	<input type="checkbox"/> Colombia	<input type="checkbox"/> Comoros	<input type="checkbox"/> Congo (Democratic Republic of)
<input type="checkbox"/> Congo Republic	<input type="checkbox"/> Côte d'Ivoire	<input type="checkbox"/> Djibouti	<input type="checkbox"/> Dominican Republic	<input type="checkbox"/> Ecuador
<input type="checkbox"/> El Salvador	<input type="checkbox"/> Equatorial Guinea	<input type="checkbox"/> Eritrea	<input type="checkbox"/> Eswatini	<input type="checkbox"/> Ethiopia
<input type="checkbox"/> Fiji	<input type="checkbox"/> French Polynesia	<input type="checkbox"/> Gabon	<input type="checkbox"/> Gambia, The	<input type="checkbox"/> Georgia
<input type="checkbox"/> Ghana	<input type="checkbox"/> Greenland	<input type="checkbox"/> Guam	<input type="checkbox"/> Guatemala	<input type="checkbox"/> Guinea
<input type="checkbox"/> Guinea-Bissau	<input type="checkbox"/> Guyana	<input type="checkbox"/> Haiti	<input type="checkbox"/> Honduras	<input type="checkbox"/> Hong Kong SAR, China
<input type="checkbox"/> India	<input type="checkbox"/> Indonesia	<input type="checkbox"/> Iraq	<input type="checkbox"/> Kazakhstan	<input type="checkbox"/> Kenya

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<input type="checkbox"/> Kiribati	<input type="checkbox"/> Korea (Democratic People's Republic of)	<input type="checkbox"/> Korea (Republic of)	<input type="checkbox"/> Kyrgyz Republic	<input type="checkbox"/> Lao People's Democratic Republic
<input type="checkbox"/> Latvia	<input type="checkbox"/> Lesotho	<input type="checkbox"/> Liberia	<input type="checkbox"/> Libya	<input type="checkbox"/> Lithuania
<input type="checkbox"/> Macao SAR, China	<input type="checkbox"/> Madagascar	<input type="checkbox"/> Malawi	<input type="checkbox"/> Malaysia	<input type="checkbox"/> Maldives
<input type="checkbox"/> Mali	<input type="checkbox"/> Marshall Islands	<input type="checkbox"/> Mauritania	<input type="checkbox"/> Mexico	<input type="checkbox"/> Micronesia (Federated States of)
<input type="checkbox"/> Moldova	<input type="checkbox"/> Mongolia	<input type="checkbox"/> Morocco	<input type="checkbox"/> Mozambique	<input type="checkbox"/> Myanmar
<input type="checkbox"/> Namibia	<input type="checkbox"/> Nauru	<input type="checkbox"/> Nepal	<input type="checkbox"/> Nicaragua	<input type="checkbox"/> Niger
<input type="checkbox"/> Nigeria	<input type="checkbox"/> Northern Mariana Islands	<input type="checkbox"/> Pakistan	<input type="checkbox"/> Palau	<input type="checkbox"/> Panama
<input type="checkbox"/> Papua New Guinea	<input type="checkbox"/> Paraguay	<input type="checkbox"/> Peru	<input type="checkbox"/> Philippines	<input type="checkbox"/> Qatar
<input type="checkbox"/> Romania	<input type="checkbox"/> Russian Federation	<input type="checkbox"/> Rwanda	<input type="checkbox"/> Sao Tome and Principe	<input type="checkbox"/> Senegal
<input type="checkbox"/> Sierra Leone	<input type="checkbox"/> Singapore	<input type="checkbox"/> Solomon Islands	<input type="checkbox"/> Somalia, Fed. Rep.	<input type="checkbox"/> South Africa
<input type="checkbox"/> South Sudan	<input type="checkbox"/> Sri Lanka	<input type="checkbox"/> Sudan	<input type="checkbox"/> Suriname	<input type="checkbox"/> Syrian Arab Republic
<input type="checkbox"/> Tajikistan	<input type="checkbox"/> Taiwan	<input type="checkbox"/> Tanzania	<input type="checkbox"/> Thailand	<input type="checkbox"/> Timor-Leste
<input type="checkbox"/> Togo	<input type="checkbox"/> Trinidad and Tobago	<input type="checkbox"/> Tunisia	<input type="checkbox"/> Turkmenistan	<input type="checkbox"/> Tuvalu
<input type="checkbox"/> Uganda	<input type="checkbox"/> Ukraine	<input type="checkbox"/> Uruguay	<input type="checkbox"/> Uzbekistan	<input type="checkbox"/> Vanuatu
<input type="checkbox"/> Venezuela, RB	<input type="checkbox"/> Vietnam	<input type="checkbox"/> Yemen Republic	<input type="checkbox"/> Zambia	Zimbabwe

Source: World Health Organization Global Health Observatory, Tuberculosis Incidence 2024. Countries with incidence rates of ≥ 20 cases per 100,000 population. For future updates, https://data.worldbank.org/indicator/SH.TBS.INCD?most_recent_value_desc=true

If the answer is YES to any of the above questions, the University of San Diego requires that you receive TB testing.

If the answer to all of the above questions is NO, no further testing or further action is required.

* The significance of the travel exposure should be discussed with a healthcare provider and evaluated.

Signature: _____

Date: _____