



BOSTON BAPTIST COLLEGE

Tuberculosis Screening & Targeted Testing

PART I: Tuberculosis (TB) Screening Questionnaire

This form must be completed by all incoming students

(1.) Have you ever had close contact with persons known or suspected to have TB disease?

Yes No

(2.) Were you born in one of the countries or territories listed below that have a high incidence of active TB disease? If yes, please **circle** below.

Afghanistan	Colombia	Indonesia	Nepal	Suriname
Albania	Comoros	Iraq	Nicaragua	Swaziland
Algeria	Congo	Kazakhstan	Niger	Tajikistan
Angola	Côte d'Ivoire	Kenya	Nigeria	Tanzania
Anguilla	D.P.R. Korea	Kiribati	Niue	Thailand
Argentina	D.P.R. Congo	Kuwait	Northern Mariana Islands	Timor-Leste
Armenia	Djibouti	Kyrgyzstan	Pakistan	Togo
Azerbaijan	Dominican Republic	Laos	Palau	Tunisia
Bangladesh	Ecuador	Latvia	Panama	Turkmenistan
Belarus	El Salvador	Lesotho	Papua New Guinea	Tuvalu Uganda
Belize	Equatorial Guinea	Liberia	Paraguay	Ukraine
Benin	Eritrea	Libya	Peru	Uruguay
Bhutan	Eswatini	Lithuania	Philippines	Uzbekistan
Bolivia	Ethiopia	Madagascar	Portugal	Vanuatu
Bosnia & Herzegovina	Fiji	Malawi	Qatar	Venezuela
Botswana	French-Polynesia	Malaysia	Republic of Korea	Vietnam
Brazil	Gabon	Maldives	Romania	Yemen
Brunei	Gambia	Mali	Russia	Zambia
Bulgaria	Georgia	Marshall Islands	Rwanda	Zimbabwe
Burkina Faso	Ghana	Mauritania	Sao Tome & Principe	
Burundi	Greenland	Mexico	Senegal	
Cape Verde	Guam	Micronesia	Sierra Leone	
Cambodia	Guatemala	Moldova	Singapore	
Cameroon	Guinea	Mongolia	Solomon Islands	
Central African Republic	Guinea-Bissau	Morocco	Somalia	
Chad	Guyana	Mozambique	South Africa	
China	Haiti	Myanmar	South Sudan	
China, Hong Kong SAR	Honduras	Namibia	Sri Lanka	
China, Macao SAR	India	Nauru	Sudan	

Yes No

(3.) Have you had frequent or prolonged visits* to one or more of the countries or territories listed above with a high prevalence of TB disease? (If yes, please **underline** above)

Yes No

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

(4.) Have you been a resident and/or employee of high-risk congregate settings (e.g., correctional facilities, long-term care facilities, homeless shelters, etc...)?

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 under-served
- Low-income
- Drug/Alcohol abuser

Yes No

If you answered YES to any of the questions above, please continue to Part II of this questionnaire. Boston Baptist College requires that you receive TB testing as soon as possible but at least prior to the start of the subsequent semester.

If you answered NO to all of the questions above, no further testing or action is required at this point. Please sign and date below to indicate all information above is accurate.

Print Name

Signature

/ /
Date