SCHOOL OF MEDICINE and SCHOOL OF PHARMACY UC SAN DIEGO
TUBERCULOSIS HEALTH ASSESSMENT

Student ID:	Date of Birth: (MM/DD/YYYY)	Name: First Last

This form must be **completed and signed by a LICENSED HEALTH CARE PROVIDER** and must be received by UCSD Student Health via Health Record upload, noted at the bottom of the page.

TESTING MUST BE performed with 3 months of entering the University

AUTHORIZATION TO RELEASE INFORMATION

I authorize UCSD Student Health Services to share information on this form to UCSD School of Medicine or School of Pharmacy Student Affairs for the purpose of clinical placement requirements.

SIGNATURE: _____ **DATE:**_____**CELL PHONE**:_____

1. SYMPTOMS: ☐ **No current symptoms**

Does your patient have any of the following symptoms? (check any that apply)

☐ Cough for greater than 4 weeks ☐ Coughing up blood ☐ Unexplained chest pain ☐ Persistent fever/chills/night sweats
☐ Persistent unexplained fatigue ☐ Unexplained weight loss

2. IGRA-TB BLOOD TEST

QUANTIFERON - Interferon Gamma Release Assay – IGRA **Date of QTF test**:_____

Result: ☐ **Negative** ☐ **Positive** (If positive, proceed to **CHEST X-RAY**)
Upload laboratory result
☐ **Indeterminate** (If Indeterminate, repeat test or proceed to **chest x-ray**)

3. CHEST X-RAY REQUIRED if Quantiferon/IGRA + or symptoms are positive or previous treatment for TB or latent TB

YOU MUST ATTACH WRITTEN RADIOLOGY CHEST X-RAY REPORT IN ENGLISH (Do not send films/CD of actual x-ray)
Any abnormal result, including scars and old granulomatous changes – **must perform sputum testing**

Date of chest x-ray:_____ **Result:** ☐ Normal ☐ Abnormal
(Results submitted without chest x-ray report will NOT be accepted.)

4. TB SPUTUM

Results (AFB smear and cultures x3 are **REQUIRED** if the chest x-ray is read as ABNORMAL)

1. Date:_____AFB:_____Culture:_____
2. Date:_____AFB:_____Culture:_____
3. Date:_____AFB:_____Culture:_____

5. SIGNATURE

MD/PA/NP/RN	_____	(MM/DD/YYYY)
Licensed Health Care Provider Name	Signature	Date

6. Upload PDF or image to: MyStudentChart.ucsd.edu/shs/