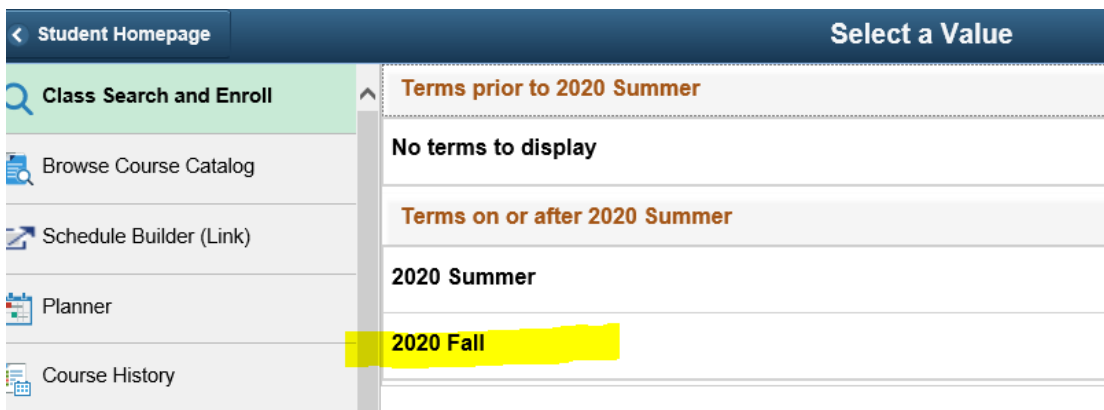


TB Questionnaire

Students to complete TB Questionnaire -- Click on the Manage Classes tile



Click on the current term



Answer 4 Yes/No questions, then click Submit

Manage Classes **TB Questionnaire**

TB Screening Questionnaire

All questions on this form must be answered before you can continue with the enrollment process. If you have any concerns about these questions, please see the [Watkins Health Services](#) website.

Yes No Have you ever had a Tuberculosis/TB test with a result that was positive which indicates TB infection?

Yes No Have you ever been told that you have had close contact with someone who was sick with TB?

Yes No Were you born in a country NOT listed below?

Yes No Have you spent at least three months in a country NOT listed below?

Submit

According to the World Health Organization, these are the countries NOT of concern for Tuberculosis:

Albania	Costa Rica	Hungary	Samoa
American Samoa	Cyprus	Iceland	Slovakia
Andorra	Czech Republic	Ireland	Slovenia
Antigua & Barbuda	Denmark	Italy	Spain
Australia	Dominica	Jamaica	Sweden
Austria	Finland	Luxembourg	Switzerland
Bahamas	France	Malta	Turks Islands & Caicos Islands
Barbados	Fiji	Nauru	United States of America
Belgium	Germany	Netherlands	US Virgin Islands
British Virgin Islands	Great Britain & North Ireland	New Zealand	Wallis Islands & Futuna Islands
Canada	Greece	Norway	
Chile	Grenada	Puerto Rico	
		Saint Kitts & Nevis	
		Saint Lucia	

Return to Home Menu - the four questions will only appear once, if you do not see them you have already completed them.

