TB Surveillance Record
Positive Reactor Checklist

Your Health Record indicates that you are a positive reactor to the TB skin test. A positive skin test generally means that at some point in time contact has been made with the tuberculosis bacteria.

According to the policy of the Department of Nursing, you will need to return this TB Surveillance Record annually to the secretary in the HHS Student Success Center each year by August 15 (fall semester), December 15 (spring semester), May 1 (summer I and II). Review the following questionnaire and indicate any symptoms which apply. If at any time during the year symptoms develop, contact your health care provider and the secretary in the Department of Nursing.

Have you experienced any of the following symptoms?

<table>
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<th>Yes</th>
<th>No</th>
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|     |    | Productive or prolonged cough
|     |    | Bloody Sputum
|     |    | Prolonged unexplained low-grade fever
|     |    | Night Sweats
|     |    | Loss of appetite
|     |    | Weight loss/weakness
|     |    | Chest pain
|     |    | Shortness of breath

___________________________________
(Student signature) (Date)

___________________________________
(Printed name)

09/04/lm, revised 12/09, 10/10, 7/12