

FOR THE INTERNATIONAL STUDENT	Student Last Name	First Name	Fresno State ID Number ____ - ____ - ____
	<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth (MM/DD/YY) __ / __ / __	Age
	<p>Dear Student:</p> <ul style="list-style-type: none"> ▪ Students that plan to attend California State University, Fresno are required to have a T-spot or Quantiferon blood test within three (3) months of the first semester start date. You are encouraged to get this test in your home country. ▪ If you have your blood test done in your home country, this <i>TB Blood Test Verification Form</i> should be completed by your health care provider and a copy of the blood test result must be included. ▪ As part of the check-in process, you will need to present this form, a copy of your blood test result, and copies of all vaccine records. ▪ If you have your blood test done at the Fresno State Student Health and Counseling Center after you arrive in the United States, there will be a \$64 (USD) fee. 		

FOR THE HEALTHCARE PROVIDER	THIS SECTION MUST BE COMPLETED BY YOUR HEALTH CARE PROVIDER: TB SKIN TESTS/PPD WILL NOT BE ACCEPTED		
	I certify that the above-named patient is free from active tuberculosis as determined by:		
	<input type="checkbox"/> T-Spot Blood Test, <i>or</i>	Date of Test: _____	
	<input type="checkbox"/> Quantiferon Blood Test	Test Result: _____	
A PRINTED COPY OF THE T-SPOT OR QUANTIFERON LAB RESULT IS REQUIRED. THE LAB RESULTS MUST INCLUDE THE STUDENT'S NAME AND BIRTHDATE IN ENGLISH.			
Name of Health Care Provider: _____			
Address: _____			
E-mail Address: _____			
Signature of Health Care Provider _____	Date _____		
		<i>Seal or Stamp Here</i>	

_____ Attachment(s): Blood Test Laboratory Report

Surname/Last Name	Given First Name	Date of Birth (MM/DD/YY) __ / __ / __	Fresno State ID Number ____ - ____ - ____
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TUBERCULOSIS (TB) SCREENING QUESTIONNAIRE

Please answer questions #1 through #5 below. If your answer to ALL of the questions is NO, return this questionnaire to the ISSP office during the Orientation Check-In process. A final evaluation of your questionnaire will be required by the campus Student Health and Counseling Center.

#1	Have you ever had a positive TB test (TB skin test, T-spot blood test, or Quantiferon blood test)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
#2	Have you ever had close contact with anyone who was sick with TB?	<input type="checkbox"/> Yes <input type="checkbox"/> No
#3	Were you born in or have you lived in one of the countries listed below? If YES, please CIRCLE the country.	<input type="checkbox"/> Yes <input type="checkbox"/> No
#4	If you are now in the United States, did you arrive less than five (5) years ago? If YES, please CIRCLE the country you came from the list of countries below.	<input type="checkbox"/> Yes <input type="checkbox"/> No
#5	Have you traveled to any of the countries listed below and stayed for more than one (1) month? If YES, please UNDERLINE all countries.	<input type="checkbox"/> Yes <input type="checkbox"/> No

IF YOU ANSWERED YES TO ANY QUESTIONS, YOU WILL BE REQUIRED TO HAVE A T-SPOT OR QUANTIFERON BLOOD TEST WITHIN THREE (3) MONTHS OF THE SEMESTER START DATE.

PLEASE SEE REVERSE SIDE.

If you plan to have the T-spot or Quantiferon blood test done in your home country, this *TB Blood Test Verification Form* (reverse side) must be completed by you and your health care provider (**IN ENGLISH**). **You must provide a copy of the blood test result.**

You may have the T-spot blood test done at the Fresno State Student Health and Counseling Center (**\$64**). You will receive more information during the check-in process regarding T-spot testing.

Afghanistan Albania Algeria Angola Anguilla Argentina Armenia Azerbaija Bahamas Bangladesh Belarus Belize Benin Bhutan Bolivia (Plurinational State of) Bosnia and Herzegovina Botswana Brazil Brunei Darussalam Bulgaria Burkina Faso Burundi Cabo Verde Cambodia Cameroon Central African Republic Chad China China, Hong Kong SAR China, Macao SAR	Colombia Comoros Cote d'Ivoire Congo Democratic People's Republic of Korea Democratic Republic of the Congo Djibouti Dominican Republic Ecuador El Salvador Equatorial Guinea Eritrea Eswatin (formerly Swaziland) Ethiopia French Polynesia Fiji Gabon Gambia Georgia Ghana Greenland Guam Guatemala Guinea Guinea-Bissau Guyana Haiti Honduras	India Indonesia Iraq Kazakhstan Kenya Kiribati Kuwait Kyrgyzstan Lao People's Democratic Republic Latvia Lesotho Liberia Libya Lithuania Madagascar Malawi Malaysia Maldives Mali Marshall Islands Mauritania Mexico Micronesia (Federal States of) Moldova (Republic of) Mongolia Morocco Mozambique Myanmar Nambia	Nauru Nepal Nicaragua Niger Nigeria Niue Northern Mariana Islands Pakistan Palau Panama Papua New Guinea Paraguay Peru Philippines Portugal Qatar Republic of Korea Republic of Moldova Romania Russian Federation Rwanda Sao Tome and Principe Senegal Serbia Somalia South Africa Sierra Leone Singapore Soloman Islands South Africa South Sudan Sri Lanka	Sudan Suriname Tajikistan Tanzania Thailand Timor-Leste Tokelau Togo Tunisia Turkmenistan Tuvalu Uganda Ukraine United Republic of Tanzania Uruguay Uzbekistan Vanuatu Venezuela (Bolivarian Republic of) Vietnam Yemen Zambia Zimbabwe
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