

Patient Name: MELISSA CRIDER
 Date of Birth: 6/13/74 FastMed Char #: _____
 Clinic Location: Broadway & Tucson Blvd, Tucson



Informed Consent for Tuberculin Skin Test (TST) Administration

NOTE: This form is for patients who present to a FastMed clinic requesting a TST. For FastMed team members, use the form titled FastMed Team Member Tuberculosis Screening Form.

I have had the opportunity to receive written information regarding the use of TST for tuberculosis infection screening and ask questions which have been answered to my satisfaction. **I agree to return within 48-72 hours to have the TST read** and understand that it will need to be repeated if not read within that time period. I understand the benefits and potential risks of receiving a TST and request that the test be administered to me. If I have symptoms that are suspicious for tuberculosis disease or if the TST is positive, I understand that information will be communicated to my healthcare provider or local public health department with whom I will follow up for further evaluation and care.

Patient Signature: [Signature] Date: 3-5-2020

QUESTIONS

Please answer the following questions by marking the appropriate box:

Yes No Have you ever had a positive TST?

If YES, complete the remainder of the questions in this section and in the SYMPTOMS section below, but do not receive a TST today.

Yes No Have you ever been treated for latent TB infection (LTBI)? If yes, when? _____

Yes No Have you had known exposure to a person with TB disease in the past year?

Yes No Have you received any vaccination within the past 4 weeks?*

Yes No Do you have a medical condition or immunocompromising condition that may place you at higher risk for TB disease? Examples include: diabetes, silicosis, chronic kidney disease, leukemia/lymphoma, cancer of the head/neck/lung, unintentional weight loss $\geq 10\%$ of ideal body weight, gastrectomy, or intestinal bypass surgery?

Yes No Do you take any medication to suppress your immune system? Examples include: corticosteroids, TNF- α (tumor necrosis factor - alpha) blockers, biologic response modifiers, transplant anti-rejection drugs, or disease-modifying antirheumatic drugs?

*An injected live vaccine may be given at the same time as a TST, but if any live vaccine (e.g., MMR, MMRV, varicella, rotavirus, yellow fever, zoster) has been given ≥ 1 day ago, you must wait 4-6 weeks before having a TST. These vaccines can cause false-negative TST results in persons with TB infection.

SYMPTOMS

Do you have any of the following symptoms?

- | | |
|--|---|
| <input type="checkbox"/> Yes <input type="checkbox"/> No Cough for 3 or more weeks | <input type="checkbox"/> Yes <input type="checkbox"/> No Poor appetite |
| <input type="checkbox"/> Yes <input type="checkbox"/> No Chest pain | <input type="checkbox"/> Yes <input type="checkbox"/> No Weight loss without dieting |
| <input type="checkbox"/> Yes <input type="checkbox"/> No Coughing up blood or bloody mucus | <input type="checkbox"/> Yes <input type="checkbox"/> No Fever, chills, or night sweats |
| <input type="checkbox"/> Yes <input type="checkbox"/> No Fatigue (unusually tired) | <input type="checkbox"/> Yes <input type="checkbox"/> No Shortness of breath without exercise |

If any of these questions are answered YES, the TST will not be administered today. You have the option of registering at the clinic for evaluation by a FastMed medical provider or going to your primary healthcare provider for further examination.

Reading time: After 0:10 on 3-7-20 but before 5:10 pm on 3-8-20



THE FOLLOWING SECTIONS ARE FOR FASTMED TEAM MEMBER USE ONLY

Administration:

Tuberculin manufacturer: Sanofi Open date: 2/25/20
Lot number: CS711A Expiration date: May 22, 2022
Injection Site: intradermal Right (Left (circle one) forearm) Dose: 0.1ml
Administered by (print name): [Signature] Date/Time: @ 5:10 pm 3/5/20

**Vials expire 30 days after open date

Results:

mm of induration: 0 mm Date/time of reading: 3-7-20 5:20
TST read by (print name): Vladimir Andrusenko Clinic location: Broadway
Negative TST Positive TST

Provider (print name), if reviewed:

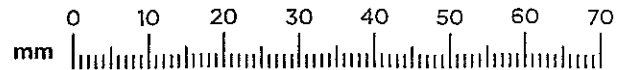
(Provider review is required if any induration is reported)

INTERPRETING TUBERCULIN SKIN TEST (TST) RESULTS

A negative TST has either 1) no redness and no induration, 2) redness but no induration, or 3) induration less than the cutoff for a specific patient's qualifiers (see chart.)



A positive TST has induration (palpable firm raised area), greater than the cutoff for a specific patient's qualifiers (see chart.)



POSITIVE TST PROVIDER PROTOCOL

- 1. A positive TST indicates only that a person has been infected with TB bacteria. It does not differentiate between latent TB infection (LTBI) or active TB disease.
2. If the TST is positive based upon the criteria above, the patient requires further evaluation before they can be cleared from having active TB disease. To clarify: a person with LTBI has been infected with tuberculosis bacteria but is asymptomatic and not infectious. They may be cleared for employment.
3. The FastMed medical provider's role in addressing a positive TST includes confirming the TST measurement and ordering a chest X-ray. The X-ray will be reviewed by the radiologist as per usual protocol. If there are no signs of active TB disease, the provider will clear the patient for employment, inform them that they are not infectious, and advise follow-up with their PCP or local public health department for consideration of any further tests or treatment related to their positive TST.
4. The provider is not expected to order any tests other than a chest X-ray or start any treatment for LTBI.