



healthcenter.unt.edu // (940) 565-2333

f @ untSHWC

Tuberculosis Screening Process

Why is UNT testing for tuberculosis (TB)?

TB is an infectious disease that usually occurs in the lungs. It is found in many countries around the world. TB can be either active, with obvious symptoms, or latent, with no obvious symptoms. Latent TB cannot be passed to other people, but it can turn into active TB. Thus, both active and latent TB must be treated, and both can be treated effectively when found early. Persons are only infectious when they have active TB.

New International students at the University of North Texas must be screened or tested for TB within 3 weeks after the 12th class day of their first term of study on this campus. Students cannot register for the next term's classes until the screening has been completed. Please call the Student Health and Wellness Center at 940-565-2333 and make an appointment for TB screening, beginning after the 12th class day.

How does the testing process work?

Required Steps:

- Fill out the Tuberculosis (TB) Screening Form within 3 weeks after the 12th class day of your first term at UNT/IELI. If you need help, go to the IELI main office, the IELI Student Counselor, IELI Lab, or the Welcome Center.
- Make an appointment for TB screening by calling 940-565-2333. Take the completed forms with you for your appointment.
- At the Student Health and Wellness Center, a nurse will look at your form and decide if you need to have a blood
 test that will determine if you have had past exposure to TB. <u>Additional steps must be completed if a test is
 positive or unclear.</u>
- It is the responsibility of all International students to ensure that the required paperwork (screening and/or test results) is on file with the Student Health and Wellness Center by the first 3 weeks of the first term of study. IF the required paperwork is not on file, the student may remain in classes for the current term, but the registration block will remain in effect and a student will be barred from future registration until this process is complete. Once the screening process is complete, the block will be removed.

<u>All</u> new International students must complete the UNT Tuberculosis (TB) Screening Form and bring it with them to their appointment at:

UNT Student Health and Wellness Center
Chestnut Hall, Second Floor
1800 Chestnut Street
940-565-2333

During the hours:

Monday-Thursday, 8:00 AM-11:15 AM, 1:00 PM-2:30 PM



When submitting the Screening Form, the Student Health and Wellness Center nurse will determine if further testing is required.





healthcenter.unt.edu // (940) 565-2333

(740) 565-2555

Tuberculosis (TB) Screening Record

Please read the screening requirements prior to completing this form. All applicable sections should be completed prior to printing.

Student Information			
UNT Student ID #	Enrollment Term: Year:	□ Fall □ Spring	
Date of Birth (MM/DD/YYYY):	Summer: 3Week	x/5Week1/10Week □ Summer: 5Week2	
Last Name:	First Name:	MI:	
Mailing Address:			
Age: Email Address:			
Select Option 1 or 2			
□ Option 1: Select type of attachment			
	ord stating the date test was administered and da ompleted in the United States within six months	• •	
Date of Immunization (MM	//DD/YYYY):		
☐ Medical Exemption affidavit or co	ertificate		
☐ Texas Department of State Health	Services Conscientious Exemption Form		
☐ Option 2: To be completed by a Health Car	re Provider (Use Black Ink)		
Date of TB Screening Administration (MM/DD/YYYY):		□ Negative Reading	
Date of TB Screening Reading (MM/DD/YYYY):		□ Positive Reading	
Health Care Provider's Name, Addr	ess, and Phone Number:		
Signature of Health Care Provider:		Date:	
	osis screening/testing requirements. I certify the documentation) is true and correct. I also give electronic student record.	•	
Student's Signature:		Date:	
Signature of Parent/Guardian (student is under	er 18 years of age):		
Full name of parent or legal guardian:		Relationship:	
Office Use Only:			
•	ved Denied Incomplete Date Completed:	Completed by:	

University of North Texas Student Health and Wellness Center

Tuberculosis (TB) Screening Form

Complete form within first 3 weeks of first term of study

Student Name:		Select one:	□ Male □ Female	□ Other
UNT ID Number:		Select one:	□ UNT □ IELI	
Address (US):				
Telephone Number: _		Email Address:		
Please answer the fol	lowing questions:			
	er had a positive tuberculin s	skin test in the past?	□ Yes □ No	
2. Have you ever had close contact with anyone who was sick with			□ Yes □ No	
•		sted below and arrived in the	2.00 2.00	
-		stea below and arrived in the	□ Yes □ No	
U.S. within the past 5 years? 4. Have you ever traveled to one of the countries listed below?				
-	ase circle the country/countries.	intries listed below?	□ Yes □ No	
Afghanistan	Cote d'Ivoire	Kyrgyzstan	Palau	Togo
Algeria	Djibouti	Lao PDR	Panama	Trinidad & Tobago
Angola	Dominican Republic	Latvia	Papua New Guinea	Tunisia
Anguilla	Ecuador	Lesotho	Paraguay	Turkey
Argentina	El Salvador	Liberia	Peru	Turks & Caicos
Armenia	Equatorial Guinea	Libyan Arab	Philippines	Islands
Azerbaijan	Eritrea	Jamahiriya	Poland	Turkmenistan
Bahrain	Estonia	Lithuania	Portugal	Tuvalu
Bangladesh	Ethiopia	Macao China	Qatar	Uganda
Belarus	Fiji	Madagascar	Romania	Ukraine
Belize	French Polynesia	Malawi	Russian Federation	Tanzania – United
Benin	Gabon	Malaysia	Rwanda	Republic
Bhutan	Gambia	Maldives	St. Vincent &	Uruguay
Bolivia	Georgia	Mali	The Grenadines	Uzbekistan
Bosnia &	Ghana	Marshall Islands	Sao Tome & Principe	Vanuatu
Herzegovina	Greenland	Mauritania	Senegal	Venezuela –
Botswana	Guam	Mexico	Serbia	Bolivarian
Brazil	Guatemala	Micronesia	Seychelles	Republic
Brunei Darussalam	Guinea	Moldova – Republic	Sierra Leone	Viet Nam
Bulgaria	Guinea-Bissau	Mongolia	Singapore	Wallis & Futuna
Burkina Faso	Guyana	Montenegro	Solomon Islands	Islands
Burundi	Haiti	Morocco	Somalia	Yemen
Cambodia	Honduras	Mozambique	South Africa	Zambia
Cameroon	Hong Kong	Myanmar	South Sudan	Zimbabwe
Cape Verde	India	Namibia	Sri Lanka	
Central African	Indonesia	Nauru	Sudan	
Republic	Iran	Nepal	Suriname	
Chad	Iraq	New Caledonia	Swaziland	
China	Kazakhstan	Nicaragua	Tajikistan	
Colombia	Kenya	Niger	Tanzania – United	
Comoros	Kiribati	Nigeria	Republic	
Congo	Korea – DPR	Northern Mariana	Taiwan	
Congo DR	Korea – Republic	Islands	Thailand	

Source: World Health Organization Global Tuberculosis Control, WHO Report 2012, Countries with Tuberculosis incidence rates of \geq 20 cases per 100,000. For future updates, refer to www.who./int/globalatlas/dataQuery/default.asp

Pakistan

Cook Islands

Kuwait

A block will be placed on your account until you complete the TB screening process.

Timor-Leste

Complete form and bring to: UNT Student Health and Wellness Center, 2nd floor of Chestnut Hall, 1800 Chestnut Street. (940) 565-2333 For more information, please visit www.healthcenter.unt.edu