



**HIPAA NOTICE OF PRIVACY PRACTICES
ACKNOWLEDGMENT OF RECEIPT**

I have received a copy of the Oxford Immunotec, Inc. *Notice of Privacy Practices*.

(Signature of patient) (Date)

(Print Name)

For Oxford Immunotec, Inc. use only

A written signature of this form was attempted but could not be obtained because:

_____ The individual refused to sign

_____ An emergency or other situation prevented obtaining this acknowledgment

Other: _____



CONSENT FOR TB TEST

This consent form documents my consent to the T-SPOT[®].*TB* test for active and latent (or inactive) tuberculosis (TB) infection. I understand that this test is being requested as part of a TB screening event conducted on behalf of CUTOMER NAME ("Institution").

RISK SUMMARY

The T-SPOT.*TB* test is a blood test requiring a sample of approximately 6mL of blood drawn by needle from my arm. I understand that there is a slight risk of bruising and mild discomfort associated with a blood draw. Another risk of a blood draw is the infrequent occurrence of fainting. The testing presents a risk to my privacy because the results will be shared with Institution.

I understand that I may withdraw my consent at any time; however, I may be requested to undergo alternative TB testing.

My signature below indicates that I have read and understand this consent form, have had an opportunity to ask questions and that all of my questions have been answered.

CONSENT

Signature: _____

Print Name: _____

Date: _____

Student Health Center
THE UNIVERSITY OF TEXAS AT DALLAS
800 W. Campbell Road SSB 43
Richardson, Texas 75080
(TEL) 972-883-2747
(FAX) 972-883-2069

Name (Please Print): _____ Date of Birth: MM/DD/YYYY
 U.S. Address: _____ U.S. Phone #: _____
 U.S. Phone #: _____ Email Address: _____
 Student ID#: _____

Part I: Tuberculosis (TB) Screening Questionnaire (to be completed by incoming students)

Please answer the following questions:

Have you ever had close contact with persons known or suspected to have active TB disease? Yes No
 Were you born in one of the countries or territories listed below that have a high incidence of active TB disease? (If yes, please CIRCLE the country, below) Yes No

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

Source: World Health Organization Global Health Observatory, Tuberculosis Incidence 2015. Countries with incidence rates of ≥ 20 cases per 100,000 population. For future updates, refer to <http://www.who.int/tb/country/en/>.

Have you had frequent or prolonged visits* to one or more of the countries or territories listed above with a high prevalence of TB disease? (If yes, CHECK the countries or territories, above) Yes No

Have you been a resident and/or employee of high-risk congregate settings (e.g., correctional facilities, long-term care facilities, and homeless shelters)? Yes No

Have you been a volunteer or health care worker who served clients who are at increased risk for active TB disease? Yes No

Have you ever been a member of any of the following groups that may have an increased incidence of latent *M. tuberculosis* infection or active TB disease: medically underserved, low-income, or abusing drugs or alcohol? Yes No

Have you ever had a positive TB skin test or IGRA blood test? Yes _____ No _____

Have you ever received the BCG (bacille Calmette-Guerin) vaccination? Yes _____ No _____

Have you had an MMR or Chicken Pox vaccine in the past 6 weeks? Yes _____ No _____

**Do you have any allergies to latex or rubber products? Yes _____ No _____

TB Symptom Check

In the last year have you had any of the following:

- Cough (especially if lasting for 3 weeks or longer) with or without sputum production
- Coughing up blood (hemoptysis)
- Chest pain
- Loss of appetite
- Unexplained weight loss
- Night sweats
- Fever

Please read carefully

The T-Spot TB test is a blood test for tuberculosis (TB) screening, an alternative to the TB skin test. This TB test is performed using blood collection and is not affected by previous BCG vaccination. Also, there are no adverse effects for women who are pregnant since it is a blood draw and not an injection. Your TB hold will be released by 8:00 a.m. the following day after the T-Spot (TB screening) test has been administered. At this time you will be able to register for classes. Results of the T-Spot test will be available 4 business days after the test is administered.. The TB blood test is not always conclusive and may require a follow-up chest x-ray at your own expense. The Student Health Center will contact you if a chest x-ray is required.

The cost of the T-Spot TB test administered by the Student Health Center is \$75. The Student Health Center will file insurance claims directly with Blue Cross Blue Shield on behalf of those students who are covered by the plan. Students not covered by UT SHIP your student account will be charged \$75 and should be paid along with other charges you may owe the University after registering for classes.

Consent for TB Screening

By signing below, you are giving your consent for the Student Health Center to administer the T-Spot TB test, acknowledging that you have read and understand the above information and consent to the test.

Signature: _____ Date: _____

For Student Health Center Only

T-spot TB Blood Test- Standing Order: S. Naheed, MD

Date Collected: _____ **Time Collected:** _____

Phlebotomist/Nurse Signature: _____

Prepared originally by ACHA's Tuberculosis Guidelines Task Force Revised by Emerging Public Health Threats and Emergency Response Coalition

NOTE: Any student submitting false or fraudulent information will be subject to disciplinary action. The University of Texas at Dallas Is an Equal Opportunity/ Affirmative Action University