

REPORT OF TUBERCULOSIS SCREENING

Name: _____ Date of Birth: _____

TO WHOM IT MAY CONCERN:

The above-named individual was evaluated by Arlington County Public Health Division.

_____ Tuberculin Skin Test (TST) testing date: _____

Result: _____mm ☐ Positive ☐ Negative

_____ Interferon Gamma Release Assay (IGRA) testing date: _____

Result: ☐ Positive ☐ Negative

_____ A TST or IGRA is not indicated at this time due to the absence of symptoms suggestive of active tuberculosis, risk factors for developing active tuberculosis, or known recent contact exposure.

_____ The individual has a history of a positive TST or IGRA. Follow-up chest x-ray is not indicated at this time due to the absence of symptoms suggestive of active tuberculosis.

_____ The individual either is currently receiving OR has completed adequate medication for a positive TST or IGRA, and a chest x-ray is not indicated at this time. The individual does not have symptoms suggestive of active tuberculosis.

_____ The individual had a chest x-ray on _____ that showed no evidence of active tuberculosis. A repeat film is not indicated at this time.

Based on the available information, the individual is free of infectious tuberculosis.

Signature _____ Date _____
(MD or Health Department Official)

Print Name _____

Title _____

Arlington Public Schools Adult Tuberculosis Screening for Employment

As a condition of employment, Arlington Public Schools employees must submit a *TB Screening Certificate* signed by a licensed physician or nurse stating that the employee appears free of active tuberculosis (TB). The TB screening must have been performed within the 12-month period immediately preceding submission of the certificate.

Screening should be based on the following assessments, alone or in combination, as determined by a licensed physician or nurse:

- Symptoms assessment
- Risk assessment
- TB skin test or TB blood test
- Chest x-ray and other exams

Locations to get a TB screening or test include:

1) CVS Minute Clinic or primary care provider

A certificate from the provider must properly document:

- Screening/testing results
- Facility's address and phone number
- Licensed provider's name/signature
- Date

The individual is responsible for all fees and charges.

2) Arlington County Occupational Health Unit

Services are by appointment only. To schedule: call 703-228-4815 or email the Occupational Health Nurse Sharon Ying Liu at syingliu@arlingtonva.us

Services are provided at no cost to the individual, but appointments are very limited.

3) Arlington County Immunization Clinic

Services are by appointment only. To schedule: call 703-228-1200

Clinic location: 2100 Washington Blvd., 2nd Floor, Arlington, VA 22204

The individual is responsible for all fees and charges.

If an employee is less than 18 years of age, they must be accompanied by a parent/legal guardian for TB screening/testing.