



UNIVERSITY OF
TEXAS
ARLINGTON

HEALTH SERVICES
DIVISION OF STUDENT AFFAIRS

817-272-2771. www.uta.edu/healthservices. 605 S. West St. Arlington, TX 76010

TB HISTORY FOR INTERNATIONAL STUDENTS

Please fax this form to 817-272-3829 once it is completed. Or you may bring this form to the Immunization Clinic in the Student Health Center. **TB Screening must be done in the US in the last 12 months prior to enrollment.**

International students cannot register for classes (even during new student orientation) until Health Services has documentation that they have met Tuberculosis Screening Requirements.

For questions regarding TB Screening requirements, email at hsic@uta.edu or call our Immunization Department at 817-272-4468.

STUDENT INFORMATION: Completed by Student

FIRST AND LAST NAME

DATE OF BIRTH

UTA ID#

EMAIL ADDRESS

HOME ADDRESS, CITY, STATE, COUNTRY

TELEPHONE NUMBER

TB SCREENING: Must be completed by a Healthcare Provider

International students must receive TB test (IGRA). Test must be done in the US in the last 12 months prior to enrollment. Screening can be done at one of the TB Clinic Days at the University.

TB IGRA Blood Test Results (INCLUDE LAB REPORT): Negative Positive

DATE OF TEST
(MM/DD/YYYY)

(If test is positive, a chest x-ray must be performed in the US.)

Chest X-Ray Results: Normal Abnormal

(INCLUDE X-RAY REPORT)

DATE OF X-RAY (MM/DD/YYYY)

History of INH treatment for tuberculosis infection: Yes No

START DATE
(MM/DD/YYYY)

DURATION OF TREATMENT

Licensed Health Care Provider (SIGNATURE REQUIRED)

SIGNATURE (REQUIRED)

NAME

ADDRESS

TELEPHONE NUMBER

DATE

Affix Stamp Here

PLEASE PRINT NAME, ADDRESS, AND TELEPHONE NUMBER OR STAMP

Thank you!