UC Merced TB Screening Requirement: How to submit your TB Clearance

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Click here to download TB Medical Clearance Form

DOWNLOAD HERE

• Print Form

• Take to Provider to complete

(Must be signed and dated)

TB Medical Clearance Form



Tuberculosis (TB) Medical Clearance Form University of California, Merced To be completed by licensed healthcare provider Name: _____ Date of Birth: _____ Student ID:

A) Symptom Review and Health History

Yes	No	Does student have signs/symptoms of active TB disease (e.g. cough greater than 3 weeks, hemoptysis, unexplained weight loss or fevers, night sweats, etc.)? If yes, evaluate as clinically appropriate.		
		Has student ever been treated for No further testing required at this t below. <u>Medication:</u>	latent tuberculosis infection? If yes, c ime. If no documentation is available, <u>Start Date:</u>	locumentation of treatment must be attached. proceed to Box #2 under Diagnostic Testing <u>End Date:</u>
		Has student ever been treated for chest x-ray report. No further testin Diagnostic Testing below.	active TB disease? If yes, must attach Ig required at this time. If no documen	summary of treatment letter and most recent tation is available, proceed to Box #2 under

B) Diagnostic Testing

All testing must be done within 12 months prior to enrollment.

#1 TUBERCULOSIS TEST : Choose one of the following testing methods. Skip if student has already had positive 78 test in the past	#2 CHEST X-RAY: Required if TST or IGRA is positive or if patient had treatment of T8 in the past but no documentation available. Must attach written radiology report (not film/CD) completed within past 12 months	
TB Blood Test (IGRA/T-spot/Quantiferon) Recommended if history of BCG vaccine; if not available, may do a TST or chest x-ray Date Obtained:	Date of Chest X-ray: Normal Abnormal – r/o active TB (proceed to #3) Abnormal – other Specify:	
Tuberculin Skin Test (TST) • ≥5 mm is positive if:	#3 SPUTUM RESULTS: AF8 smear and cultures x3 are required if the chest x-ray is read as concerning for T8.	
Recent close contact with someone with active infectious TB disease Immunosuppressed (splenectomy, HIV, chemotherapy, transplant patient) History of an abnormal chest x-ray suggestive of TB Otherwise_210 mm is positive	#1 Date AFB Culture #2 Date AFB Culture #3 Date AFB Culture	
Date Placed: Date Read: Result: mm in duration (if none, write Ø) Negative Positive (proceed to #2)		
C) Certification of Clearance ertify the student is free of infectious tuberculosis Signature of Licensed Healthcare Provider	Date Office Stamp	
Printed Name of Healthcare Provider	MD/NP/PA/RN	

Once you have a signed form and any additional documentation of TB clearance (chest x-ray, TB blood or skin test, etc.), log back into the Patient Portal.



To log into the myHealth patient portal. https://myhealth.ucmerced.edu

You will need to use your UCM ID to authenticate into the portal.



From the left side navigation menu, click on Immunization/TB File Upload.

UC Merced myHealth				
Home	Home			
Profile				
Appointments	You last logged in: 6/29/2017 3:07:13 PM			
Messages	You have 6 Forms awaiting completion.			
Forms	Immunizations Form (Required for All Incoming Students) Health History Form			
Survey Forms	Medical Treatment Consent Notice of Privacy CAPS Informed Consent			
Immunization History	Authorization To Disclose Mental Health Information (Optional)			
Immunization/TB File Upload	You Can Receive Text Message Appointment Reminders and Other Alerts: Enable Text Messages Welcome to the UC Merced Student Health Portal (myHealth)			

Click 'Add TB Documents' button.

When asked to name your form, title it "TB form" to facilitate the fastest response.

Immunization/TB File Upload Please upload your scanned immunization records. We accept the following file types: PDF, PNG, JPEG, GIF. If necessary, add any TB related forms/records using the 'Add TB Documents' button. (only upload forms/records here if you received a message asking you to do so.) Add Immunization Record Add TB Documents Cancel

- 1. Browse to the documents on your computer or camera roll on your smartphone. The page will immediately show your scanned imagery. You can click on any item that you uploaded if you want to verify the quality. Click SAVE.
- 2. Once uploaded, our nursing staff will evaluate the material that you have uploaded and will correspond through myHealth secure messaging if there are any further questions or concerns.
- 3. Remember, you can always look at your Immunization Record online in the patient portal (see next slide) to determine compliance.

Checking for compliance

In your Immunization History you can check your compliance status.

When you are compliant with a requirement, you will see that item with a green check next to it. Items that are non-compliant have a red x.

**IMPORTANT NOTE - It can take up to 2 weeks to process your requirements. If it has been *longer* than 2 weeks, you can open an inquiry by sending a secure message to the immunization nurse here:



https://myhealth.ucmerced.edu