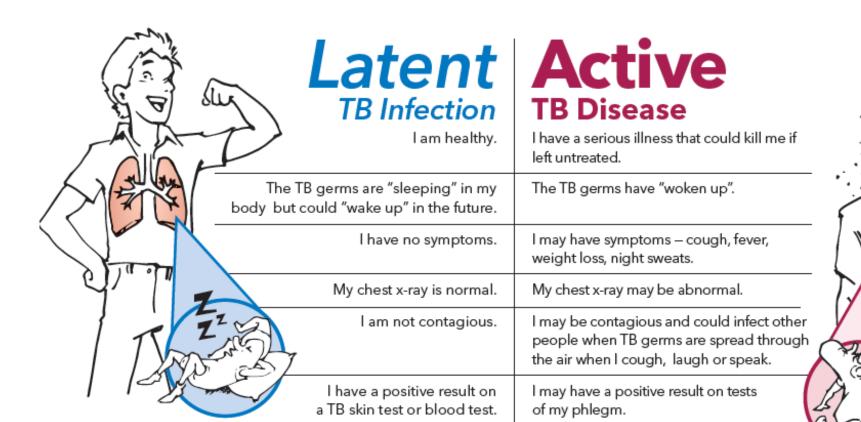
## West Virginia Department of Health and Human Resources Division of Tuberculosis Elimination

## Referral to Local Health Department for State Funded Testing

<u>School Nurse</u>: Fill out the information down to the double line. Instruct parents to take form to their local health department to receive evaluation and/or testing.

Date:		
Patient Name:		
Patients Address:		
County of Patients Resi	dence:	
Patients Phone Number	r:	
Reason for Referral: (pl	<ul> <li>CONTACT HEALTH DEPART</li> <li>of a case</li> </ul>	RTMENT IMMEDIATELY!
Referred By: (nurse's na	ame)	
Local Health Departi	ment Use:	
Risk Assessment comp (TB-104 must be submi	leted? Yes No itted to DTBE along with this	form)
Risk Category:  High Risk Low Risk		
Testing Done:  PPD T-Spot Refused Testing No testing recom	ımended	
Nurse's Signature:		

Please submit this form and all other documentation to support this testing to DTBE at 304-558-1825.



Can my Latent TB Infection (sleeping germs) wake up and make me sick with Active TB Disease?

## Yes, and certain factors increase my risk!

- I arrived recently from another country where TB is common.
- I have HIV.
- · I was in close contact with someone with active TB disease.
- I have diabetes, kidney failure, or cancer.
- I had surgery to remove part of my stomach.
- I live or work in a hospital, jail, drug rehab center or shelter.
- I use injection drugs.
- I have received an organ transplant.
- I take certain medications that affect my immune system, like prednisone (steroids) or other pills or injections to treat certain types of skin, joint and gastrointestinal conditions.

If I have Latent TB Infection, can I reduce my chances of getting sick with Active TB Dise

## getting sick with Active TB Disease? Yes, I can prevent

l can take safe, effective medicines.

tuberculosis!







