

Prince George County Virginia Fire & EMS

Tuberculosis Screening Test

Informed Declination

I have attended an educational session on Tuberculosis (TB). This session included information regarding the TB test, which is used to determine whether the bacteria causing TB is residing in my body.

I understand that I may be occupationally exposed to TB and that I may be at risk for acquiring TB. I understand that the Centers for Disease Control and Prevention (CDC) and the Occupational Safety & Health Administration (OSHA) recommend that I be tested to determine whether I have contracted TB infection.

I have been given the opportunity to be tested using the Mantoux skin test at no cost to myself. However, I decline TB screening at this time. I understand that by declining this screening, I am at risk of having TB without my knowledge. I understand that I will be able to obtain testing for TB in the future if I choose to change my mind.

Name (Printed): _____

Signature: _____ Date: _____