

**New Jersey Department of Health
Tuberculosis Program**

TUBERCULOSIS (TB) TESTING SURVEY RESULTS

Name of Agency		County	Date(s) of Testing
Street Address		Category Tested <input type="checkbox"/> Employees <input type="checkbox"/> Clients <input type="checkbox"/> Other (Specify): _____	Type of Program <input type="checkbox"/> Initial <input type="checkbox"/> Annual <input type="checkbox"/> Other (Specify): _____
City, State, Zip Code			
Group Tested			
Type of Test Used	Total Tested		

Age Group	TB Testing Results		X-Ray Results			Number of Positive Reactors Prescribed INH
	Number Tested and Read	Number of Positive Reactors *	Compatible with TB	Not Compatible with TB	Not Done	
Under 5 Years						
5 - 14 Years						
15 - 34 Years						
35 - 44 Years						
45 - 64 Years						
65 and Over						
Not Stated						
TOTAL						

* a. A reaction of 5 mm or more of induration is classified as positive in the following groups:
 (1) Persons who have close contact with TB.
 (2) Persons who have previously had TB disease.
 (3) Persons with organ transplants and other immunosuppressed persons (including persons taking a prolonged course of oral or IV corticosteroids or TNF antagonists).
 (4) Persons with fibrotic changes on chest x-ray.

b. A reaction of 10 mm or more of induration is classified as positive in the following groups:
 (1) Persons who inject illegal drugs.
 (2) All others.

Prepared By	Telephone Number
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