

OKLAHOMA DEPARTMENT OF CORRECTIONS

Annual TB Summary Form

Employees and inmates, as well as individual institutions will each be identified on separate forms. Please indicate the population and location being reported on this form.

___ Employees	___ Inmates			
___ Facility	___ Work Center	___ County Jail	___ Halfway house	___ Other (specify)

Date of testing: _____

Institution Name: _____ Form completed by: _____

Total number to evaluate at this facility: _____ Total number not evaluated: _____

Total number evaluated (Tuberculosis Questionnaires + skin tests interpreted) on this date: _____

	Number Administered & Read	Number of skin tests = 5mm to < 10mm of induration on identified high-risk population	Number of skin tests ≥ 10mm of induration	Number with signs and/or symptoms	Number of chest x-rays sent to OSDH
TB Skin Tests					
Past Positive Questionnaire Screening					

Number of Converters: _____

(Definition for data collection: Number of conversions to a positive skin test-any positive TST, excluding any positive TST that is part of the initial 2-step test done on reception, is a conversion and that individual is considered a converter..... New PPD converter is someone who has had a negative skin test in the past and now has a positive skin test)

Submit to the Chief Medical Officer within 10 working days of testing date.