Name NGUYEN HOAI NAM

TUBERCULOSIS SCREENING

QUESTION	YES	NO
Have you had tuberculosis or had a positive screening test (PPD,TB quantiferon, or t-spot)		✓
Have you had chest radiographs suggesting inactive or past TB?		✓
Have you had HIV, AIDS, diabetes, leukemia, lymphoma, an organ transplant or chronic immune disorder?		✓
Have you had a recent close contact with someone with TB?		✓
Have you had immunosuppression due to medication?		✓
Are you an injection drug (recreational not medical) user?		✓
Have you worked or volunteered in a high risk setting (prison, long term care facility, hospital, shelter)		✓
Do you have end stage renal disease, malabsorption syndrome, low body weight or have you had a gastrectomy?		✓
Do you have symptoms of TB (persistent cough, fever, night sweats, loss of appetite, weight loss)		✓
Were you BORN IN, LIVED IN or VISITED FOR MORE THAN 1 MONTH – *countries listed at bottom of page	✓	

If you answered **NO to all of the above questions, then you are finished.** If you answered **YES** to any of the above questions, **then your physician must complete the TB testing below.**

ATTENTION HEALTH CARE PROVIDER – If the patient answered YES to any of the above, then testing is required. Testing must be done within the past 6 months. If a student has a history of positive testing, then a chest x-ray is required. History of BCG vaccination does not prevent testing.

PPD	Date placed _____	mm of induration _____
Or Quantiferon-TB or T-spot	Date of testing May, 23rd 2019	Result (attach) Negative

PPD Measurements:

≥ 5 mm	Positive for recent contacts with TB patients, abnormal chest x-rays suggesting TB, HIV/AIDS, Organ transplant patients, and immunosuppressed patients
≥ 10 mm	Positive for recent US immigrants (<5 years) from the areas listed above, injection drug users, employees/volunteers in high risk settings, or those with medical conditions associated with risk of progressing to TB disease if infected
≥ 15 mm	Positive for persons with no known risk factors for tuberculosis

If the PPD or Quantiferon/T spot testing is POSITIVE then a chest x-ray is REQUIRED. Please attach the chest x-ray REPORT and the management plan including medication.

SIGNATURE OF MEDICAL PROFESSIONAL _____ DATE May, 31st 2019

TRÁCH NHIỆM HỮU HẠN COLUMBIA ASIA (VIỆT NAM)

TS.BS. HÀ TUẤN KHÁNH

*Countries with a high incidence of active TB disease –

Afghanistan, Algeria, Angola, Argentina, Armenia, Azerbaijan, Bahrain, Bangladesh, Belarus, Belize, Benin, Bhutan, Bolivia, Bosnia and Herzegovina, Botswana, Brazil, Brunei Darussalam, Bulgaria, Burkina Faso, Burundi, Cabo Verde, Cambodia, Cameroon, Central African Republic, Chad, China, Colombia, Comoros, Congo, Cote D'Ivoire, Democratic People's Republic of Korea, Democratic Republic of the Congo, Djibouti, Dominican Republic, Ecuador, El Salvador, Equatorial Guinea, Eritrea, Estonia, Ethiopia, Fiji, Gabon, Gambia, Georgia, Ghana, Guatemala, Guinea, Guinea-Bissau, Guyana, Haiti, Honduras, India, Indonesia, Iran, Iraq, Kazakhstan, Kenya, Kiribati, Korea, Kuwait, Kyrgyzstan, Lao People's Democratic Republic, Latvia, Lesotho, Liberia, Libya, Lithuania, Madagascar, Malawi, Malaysia, Maldives, Mali, Marshall Islands, Mauritania, Mauritius, Mexico, Micronesia, Mongolia, Morocco, Mozambique, Myanmar, Namibia, Nauru, Nepal, Nicaragua, Niger, Nigeria, Niue, Pakistan, Palau, Panama, Papua New Guinea, Paraguay, Peru, Philippines, Poland, Portugal, Qatar, Republic of Korea, Republic of Moldova, Romania, Russian Federation, Rwanda, Saint Vincent and the Grenadines, Sao Tome and Principe, Senegal, Serbia, Seychelles, Sierra Leone, Singapore, Solomon Islands, Somalia, South Africa, South Sudan, Sri Lanka, Sudan, Suriname, Swaziland, Tajikistan, Thailand, Timor-Leste, Togo, Trinidad and Tobago, Tunisia, Turkey, Turkmenistan, Tuvalu, Uganda, Ukraine, United Republic of Tanzania, Uruguay, Uzbekistan, Vanuatu, Venezuela (Bolivarian Republic of), Vietnam, Yemen, Zambia, Zimbabwe

CÔNG TY TNHH LAB GROUP INTERNATIONAL VIỆT NAM
MEDICAL DIAG CENTER
LABORATOIRE D'ANALYSES MEDICALES

*** BIOLOGISTES RÉSIDENTS**
Bs. VŨ THỦY YÊN Bs. DƯƠNG THỊ PHƯỚC NINH
Bs. PHẠM THỊ NHIÊN Bs. NGUYỄN THỊ HIẾU HÒA
*** BIOLOGISTES INTERVENANTS**
Dr. B. COQUELET Dr. J.M. DAMIEN Dr. J.C. LOISON

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Email: info@diag-center.com .:. **Web:** www.diag-center.com

DIAG 3

NGUYỄN Hoài Nam

Q2
0981 335953

Ngày nhập sổ sơ: 23/05/2019-09H35M
Ngày lấy mẫu : 23/05/19-09H35M

Ngày sinh: 06/07/1994- M
Ref: 9050135984/1

	Kết quả	Đơn vị	Thang đối chiếu.	Tiền sử
VI KHUẨN,VI RUT/HUYẾT THANH				
IGRA	ÂM TíNH			

BS Vũ Thủy Yên BS Phạm Thị Nhiên BS Ng.T Hiếu Hòa BS Dương T.Phước Ninh

Pat03 TpHCM, ngày in KQ 30/05/19 14H40M

** Bản in cuối **

** : Mẫu gửi phòng XN tham chiếu

***: XN đã được công nhận ISO 15189 : 2012

135984

cellestis

Version 2.62

QuantiFERON®-TB Gold In-Tube Results

Run Date: Thứ Năm 30 Tháng Năm 2019
Operator: Dr Yen
Run Number: 295
Kit Batch Number: 56009013

Valid ELISA test run.

Results (IU/mL)

Subject ID	Nil	TB Ag	Mitogen	TB Ag-Nil	Mitogen-Nil	Result
135984	0.04	0.04	9.60	0.00	9.56	NEGATIVE

Signature _____ Date _____

Std	Conc	Mean	% CV	QC Result
S1	4.00	1.648	0.8	PASS
S2	1.00	0.441	2.2	PASS
S3	0.25	0.139	N/A	PASS
S4	0.00	0.023	N/A	PASS

Intercept: -0.7642 Slope: 0.8918 Correlation Coefficient: 1.00 (PASS)

Raw Data (OD)

Nil	TB Ag	Mitogen
0.025	0.028	3.500

QuantiFERON®-TB Gold In-Tube results are interpreted as follows:
NOTE: Diagnosing or excluding tuberculosis disease, and assessing the probability of LTBI, requires a combination of epidemiological, historical, medical, and diagnostic findings that should be taken into account when interpreting QuantiFERON®-TB Gold IT results.

Nil[1] (IU/mL)	TB Antigen minus Nil (IU/mL)	Mitogen minus Nil (IU/mL)	QuantiFERON®-TB Gold IT Result	Report/Interpretation
<= 8.0	< 0.35	>= 0.5	**Negative**	*M.tuberculosis* infection NOT likely
	>= 0.35 and < 25% of Nil value	>= 0.5		
	>= 0.35 and >= 25% of Nil value	Any	**Positive**	*M.tuberculosis* infection likely
	< 0.35	< 0.5	**Indeterminate**	Result are indeterminate for TB Antigen responsiveness
	>= 0.35 and < 25% of Nil value	< 0.5		
> 8.0	Any	Any		

[1]Nil control must be <= 8.0 IU/mL and Mitogen - Nil must be >= 0.5 IU/mL OR TB Antigen - Nil must be >= 0.35 IU/mL for a subject to have a valid QuantiFERON®-TB Gold In-Tube result.

The Mitogen control generally elicits the greatest IFN-gamma response of the 3 samples from each subject. In some cases, the Mitogen control OD value will be above the limit of the microplate reader; this has no impact on the test interpretation. The IFN-gamma level of the Nil control is considered background and is subtracted from the TB Antigen and Mitogen results for that blood specimen. In clinical studies, less than 0.25% of subjects had IFN-gamma levels of > 8.0 IU/mL for the Nil control.

The cut-off for the QuantiFERON®-TB Gold In-Tube test is 0.35 IU/mL above the Nil control (and TB Antigen minus Nil is >=25% of the Nil control) for the TB Antigen stimulated plasma sample. Individuals displaying a response to the TB Antigen above this cut-off are likely to be infected with *M. tuberculosis.*

The magnitude of the measured IFN-gamma level cannot be correlated with stage or degree of infection, level of immune responsiveness, or likelihood for progression to active disease. A positive QuantiFERON®-TB Gold In-Tube result does not necessarily indicate the presence of active tuberculosis disease. Other diagnostic procedures, such as X-ray examination of the chest and microbiological examination of sputum, should be used when TB disease is suspected.

More detailed information can be found in the "Interpretation of Results' section of the QuantiFERON®-TB Gold In-Tube Package Insert.