

IDENTIFICATION					TB SCREENING								High Risk Group						TB Presumptive Case		Tuberculin Skin Test	Laboratory Result Smear or Genexpert			Observations	
Date	N _a	Names			Age	Sex	BY SYMPTOMS					By Chest X-ray							Yes	No	Inducation in mm	Pos.	Neg.	Not Done		
							COUGH			Fever	Night Sweat	Weight Loss	Done	Not done	< 15 years	≥ 55 years	TB Contact	HIV+							Prisonner	
							Yes	No	Duration (if Yes)																	