

School Employee/Individual Certificate of Evaluation for Tuberculosis

Name: Last _____ First _____ M.I. _____ Residence Address _____ City _____ County _____

Public or private school, kindergarten, nursery or day care center _____ Date Employed _____
of current employment or other employer or individual

TEST RESULTS	TUBERCULIN SKIN TEST _____ Date Given _____	CHEST X-RAY Date: _____ Interpretation: _____	REMARKS	
	5 TU PPD MANTOUX METHOD _____ mm _____ Date Interpreted _____			
DISPOSITION	<input type="checkbox"/> No tuberculosis infection per 5 TU PPD ¹ <input type="checkbox"/> Tuberculosis infection, no evidence of disease <input type="checkbox"/> Prevention treatment started _____ and completed _____ ¹ <input type="checkbox"/> Prevention treatment started _____ but not completed _____ ² <input type="checkbox"/> Prevention treatment not prescribed/refused ² <input type="checkbox"/> History of tuberculosis disease Treatment started _____ and completed _____ ¹ <input type="checkbox"/> Current tuberculosis disease <input type="checkbox"/> Non contagious as of _____ and medically cleared to start/resume school other employment on _____ ²			
	¹ No further routine screening required ² Remains at lifelong risk of developing tuberculosis			
CERTIFICATION	<input type="checkbox"/> This is to certify that I have examined the school employee named herein for tuberculosis and report my finding as indicated above pursuant to the Code of Laws of South Carolina, 1976, as amended April 24, 1979 <input type="checkbox"/> This is to certify that I have examined the individual named herein for tuberculosis and report my findings as indicated above.			
	_____ Physician's Signature		_____ Date	

DHEC 1420 (08/1998) DISPOSITION: This form shall be retained in the files of the current employer or individual following evaluation and certification.

SCHOOL EMPLOYEE/INDIVIDUAL CERTIFICATE OF EVALUATION FOR TUBERCULOSIS: this form may be used for school employees or other individuals who need documentation of tuberculosis evaluation. It should be maintained in the current employer's file for school employees and by employer or individual for other needs.

CODE OF LAWS OF SOUTH CAROLINA, 1976, AS AMENDED APRIL 1979, SECTION 44-29-150. No person will be initially hired to work in any public or private school, kindergarten, nursery or day care center for infants and children until appropriately evaluated for tuberculosis according to guidelines approved by the south Carolina department of Health and Environmental Control. Reevaluation will not be required for employment in consecutive years unless otherwise indicated by such guidelines.

SECTION 44-29-160. Any person applying for a position in any of the public or private schools, kindergartens, nurseries, or day care centers for infants and children of the State shall, as a prerequisite to employment, secure a health certificate from a licensed physician certifying that such person does not have tuberculosis in an active state.

SECTION 44-29-170. the physician shall make the aforesaid certificate on a form supplied by the Department of Health and Environmental control, whose duty it shall be to provide such forms upon request of the applicant.

SUMMARY OF GUIDELINES OF THE DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL. (Regulation 61-22) Each employee shall have, prior to employment, and unless so previously tested, as a condition for further employment, a tuberculin skin test performed by intradermal injection of 5 tuberculin units of purified protein derivative of tuberculin (Mantoux test with 5 TU of PPD). Employees with test reactions measuring less than 10mm or more shall have a chest x-ray, shall be recorded on the DHEC for 1420 which shall be kept in the files of the school principal/designee. These forms shall be subject to review by DHEC. If the chest x-ray (and examination of sputum, if necessary) shows evidence of current tuberculosis disease, the employee shall not be allowed to work until she/she receives written certification for DHEC that he/she is not contagious. Employees whose skin text reactions measure 10mm or more and who have a normal chest x-ray shall be evaluated for preventive therapy for their tuberculous infection. If preventive therapy is not prescribed, or is prescribed, but refused, a notation shall be made on the employee's certificate that he/she is considered to be infected with tubercle bacilli and remains at lifelong risk, of developing tuberculosis disease. Testing other than the described above, shall be required only if there is epidemiological evidence that employees, attendees, or students in the school, nursery, day care center, or kindergarten have become infected with tuberculosis.