

University Health Center

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International Student, Faculty, and Staff Tuberculosis Testing Form

All students, faculty, and staff who originate from countries with a tuberculosis incidence of greater than or equal to 2
cases per 100,000 population (see page 2) are required to complete this form.

Last na	me: First name:
	DOB: Telephone number:
Interna	tional students, faculty and staff requiring testing must provide evidence of one of the following:
Ne	gative Interferon Gamma Released Assay (IGRA) tests and date tested:
	 QuantiFERON-TB Gold Wantai TB-IGRA T-SPOT.TB
OR:	
	Documents from a physician declaring absence of active tuberculosis infection. Must have documentation of IGRA testing and, if positive, a negative Chest X-ray report with dates.
OR:	
	Documentation of successful completion of previous treatment for tuberculosis infection and dates. Tuberculosis treatment must be approved by the WHO or CDC.
	ts, faculty, and staff requiring testing for tuberculosis may obtain testing at Idaho State University Health Center

Students, faculty, and staff requiring testing for tuberculosis may obtain testing at Idaho State University Health Center or other certified medical labs, clinics, or hospitals. ISU Health Center provides testing at no cost to international students.

Tuberculosis testing should be done no sooner than 6 months prior to the start of the first semester and no later than 2 weeks after the start of the first semester.

This form and documentation must be provided to **Idaho State University Health Center** within 2 weeks of the start of school. Students failing to complete required testing for tuberculosis may be dis-enrollment from classes, and will not be allowed to register for the following semester of school. Faculty and staff who fail to complete required testing may face disciplinary action.

If you have questions, please call or visit, Idaho State University Health Center.

Romania

Vanuatu

Appendix 2: 2025 High-Incidence Country List

Countries with a 3-year average incidence >= 20 cases per 100k population, 2021-2023, n=129²⁴

Countries added in 2025: None; Countries subtracted in 2025: None

Belize

El Salvador

Afghanistan Ghana Northern Mariana Islands

Algeria Greenland Pakistan
Angola Guam Palau
Anguilla Guatemala Panama

Argentina Guinea Papua New Guinea
Armenia Guinea-Bissau Paraguay
Azerbaijan Guyana Peru
Bangladesh Haiti Philippines
Belarus Honduras Qatar

Benin Indonesia Russian Federation

Bhutan Iraq Rwanda

India

Bolivia (Plurinational State of) Kazakhstan Sao Tome and Principe

Kenya Bosnia and Herzegovina Senegal Botswana Kiribati Sierra Leone Brazil Korea (Democratic People's Republic of) Singapore Brunei Darussalam Korea (Republic of) Solomon Islands Burkina Faso Kyrgyzstan Somalia Burundi South Africa Lao People's Democratic Republic

Cabo VerdeLesothoSouth SudanCambodiaLiberiaSri LankaCameroonLibyaSudanCentral African RepublicLithuaniaSurinameChadMadagascarTajikistan

China Malawi Tanzania (United Republic of)

China, Hong Kong SAR Malaysia Thailand China, Macao SAR Maldives Timor-Leste Colombia Mali Togo Marshall Islands Tunisia Comoros Congo Mauritania Turkmenistan Congo (Democratic Republic of) Mexico Tuvalu Cote d'Ivoire Micronesia (Federated States of) Uganda Djibouti Moldova (Republic of) Ukraine Dominican Republic Mongolia Uruguay Ecuador Uzbekistan Morocco

Equatorial Guinea Myanmar Venezuela (Bolivarian Republic of)

Eritrea Namibia Viet Nam
Eswatini Nauru Yemen
Ethiopia Nepal Zambia
Fiji Nicaragua Zimbabwe

Mozambique

Gabon Niger
Gambia Nigeria
Georgia Niue

National Society of Tuberculosis Clinicians. Testing and treatment of latent tuberculosis infection in the United States: clinical recommendations. Smyrna, GA: National Tuberculosis Controllers Association, February 2021.