

TUBERCULOSIS CONTACT/REACTOR		<i>Read Instructions On Reverse Before Completing</i>		NAVMEDCOMINST 6224.1	
I. CONTACT/REACTOR IDENTIFICATION					
NAME <i>(Last, first, middle)</i>			GRADE/RATE	AGE	SEX
DUTY STATION			SSN		
TUBERCULOSIS CONTACT AND/OR REACTOR FOLLOWUP - CHECK ALL BOXES APPLICABLE					
<input type="checkbox"/> CONTACT		<input type="checkbox"/> NEW REACTOR		<input type="checkbox"/> UNTREATED OR TREATED KNOWN PREVIOUS REACTOR <i>(specify which)</i>	
II. EXPOSURE HISTORY <i>(If known)</i>					
NAME OF ORIGINAL CASE			GRADE/RATE	SSN <i>(Or relationship)</i>	
PLACE OF EXPOSURE			DATES OF EXPOSURE		
III. CONTACT/REACTOR PRIOR RECORD					
DATE	SKIN TEST READINGS <i>(Last three readings in mm)</i>		DATE	FILM NO.	CHEST FILM READINGS <i>(Last three readings)</i>
IV. INITIAL EXAMINATION					
SKIN TEST			CHEST X-RAY		
DATE	RESULTS IN MM.	DATE	FILM NO.	RESULTS	TAKEN WHERE
HISTORY AND PHYSICAL FINDS <i>(Including smear and culture results, if done)</i>					
V. FOLLOWUP EXAMINATION-CONTACT STUDY					
PERIOD	DATE SCHEDULED	DATE PERFORMED	SKIN TEST OR X-RAY RESULTS	TEST PERFORMED AT	
3 MONTHS					
6 MONTHS					
ADDITIONAL STUDIES IF PATIENT BECOMES REACTOR DURING CONTACT STUDY					

