OMB Approved Control No 0920-XXXX Exp Date:

CureTB Transnational Notification

Centers for Disease Control and Prevention Division of Global Migration and Quarantine E-Mail: curetb@cdc.gov Telephone: (619) 542-4013 Fax: (404) 471-8905



¹Re	ferring Jurisdict	tion:						¹ Date sent:	
City ¹Contact person:			· · · · · ·			State	Evt	Fov:	
Referring Agency: E-Mail Address:									
□ Verified TB: □ RVCT#: □ or □ Not reported □ ICE A# □ BOP# □ BOP# □ Suspected TB □ Clinical History request (specify year): □ Immunocompromised (specify): □ Immunocompromised (specify):									
	¹Name:		Paternal	Maternal					
Patient	Alias:			DOB: _		E-Mail:			
Ľ	Check if patient/parent not currently at home. Current location:							Tel.:	
	Numbr	er	Street		Apt				City
U.S.	County		State	Zip code			e:		Cell:
Info. in							Home Phone:		Cell:
=	Relationship):					_		
_									
Destination Country	Number	Number Street		Apt			City		
ion C	County	County State Zip code							
stinat	Contact person at destination: Name:		Home Phone:			e:		Cell:	
	l '	D:		Home Phone:					
	Cell:			1					
	Information for: this referred patient Other, specify:								
ڃ	☐ HIV ☐ Diabetes ☐ No Symptoms			Symptoms, specify:					
natio	² Date of col	lection	² Specimen type	² Smear	Culture	Susceptibility	Date		² Imaging
Information									
ical						-			
Clinical									
		.,,							
Other tests (specify):									
_	For: this referred patient Not started Comments: Drug Dose Start date Stop date								
Medication	·			ys of medication	on.				
Med									
\vdash									
	<u> </u>								

Public reporting burden of this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB Control Number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA 0920-XXXX