

Student's Name: _____

UH ID#: _____

Program: _____

UNIVERSITY OF HAWAII • KAPI'OLANI COMMUNITY COLLEGE

Nursing Department

Waiver of Annual Chest X-ray

(For TB positive skin test)

Students who had a negative chest x-ray and have been symptom-free may request a waiver from the annual chest x-ray. The student must:

- 1) submit a copy of the negative chest x-ray report **AND**
- 2) submit a copy of your positive PPD skin test. Both documents must be given to the Nursing Department at Kap CC.

Please answer the following questions:

- 1) Have you been bothered by a persistent cough? _____ Yes _____ No
- 2) Have you been bothered by persistent fever? _____ Yes _____ No
- 3) Have you been bothered by coughing up blood? _____ Yes _____ No
- 4) Have you been bothered by excessive weight loss? _____ Yes _____ No
or gain? (\pm 20 lbs.)
- 5) Have you been bothered by excessive sweating? _____ Yes _____ No
- 6) Have you been bothered by excessive fatigue? _____ Yes _____ No
- 7) Date/year of positive PPD: _____
- 8) Date of most recent chest x-ray: _____ Results? _____
- 9) Date/year of allergic reaction to PPD: _____
- 10) If pregnant, EDC date: _____

This information is correct to the best of my knowledge: _____

Signature

date

Print Name

Nursing Program

Telephone Number