The next questions are about being tested for tuberculosis or TB. The tests could be a skin test with a needle just under your skin, a blood test, or a plastic button with metal prongs pressed on your arm called a tine test. Here are pictures of what the skin test and tine test look like.

(Have you/Has SP) ever been tested for TB?

HAND CARD TBQ1

YES ...............................................................  1 (TBQ.015)
NO .................................................................  2 (TBQ.040)
REFUSED .....................................................  7 (TBQ.040)
DON'T KNOW ............................  9 (TBQ.040)

Which test or tests did (you/SP) receive—the needle just under the skin, a blood test or the tine test?

CHECK ALL THAT APPLY

SKIN TEST ....................................................  1
BLOOD TEST ................................................  2
TINE TEST ....................................................  3
REFUSED .....................................................  7 (TBQ.040)
DON'T KNOW ...............................................  9 (TBQ.040)

BOX 1

CHECK ITEM TBQ.016:
IF TBQ.015 = 1, CONTINUE.
ELSE, GO TO BOX 2.

 Were you/Was SP told that (your/his/her) skin test was positive for TB?

YES ...............................................................  1
NO .................................................................  2
REFUSED .....................................................  7
DON'T KNOW ...............................................  9

BOX 2

CHECK ITEM TBQ.023:
IF TBQ.015 = 2, CONTINUE.
ELSE, GO TO BOX 3.
TBQ.025  {Were you/Was SP} told that {your/his/her} **blood** test was positive for TB?

YES ...............................................................  1
NO .................................................................  2
REFUSED .....................................................  7
DON'T KNOW ...............................................  9

**BOX 3**

CHECK ITEM TBQ.026:
 IF TBQ.015 = 3, CONTINUE.
 ELSE, GO TO BOX 4.

TBQ.028  {Were you/Was SP} told that {your/his/her} **tine** test was positive for TB?

YES ...............................................................  1
NO .................................................................  2
REFUSED .....................................................  7
DON'T KNOW ...............................................  9

**BOX 4**

CHECK ITEM TBQ.029:
 IF TBQ.022 OR TBQ.025 OR TBQ.028 = 1, GO TO TBQ.030.
 ELSE, GO TO TBQ.040.

TBQ.030 After getting a positive TB test, {were you/was SP} prescribed any medicine to keep {you/him/her} from getting sick with TB?

YES ...............................................................  1
NO .................................................................  2
REFUSED .....................................................  7
DON'T KNOW ...............................................  9

TBQ.035 Did (you/SP) complete this treatment?

YES ...............................................................  1
NO .................................................................  2
REFUSED .....................................................  7
DON'T KNOW ...............................................  9
TBQ.040 {Were you/Was SP} ever told that {you/s/he} had **active** tuberculosis or TB?

CAPI INSTRUCTION: IF SP AGE < 12, DISPLAY "WERE YOU" FOR THE FIRST DISPLAY AND SP NAME FOR THE SECOND DISPLAY.

YES ............................................................... 1
NO ................................................................. 2 (TBQ.060)
REFUSED ..................................................... 7 (TBQ.060)
DON'T KNOW ............................................... 9 (TBQ.060)

TBQ.050 {Were you/Was SP} ever prescribed any medicine to treat **active** tuberculosis or TB?

YES ............................................................... 1
NO ................................................................. 2
REFUSED ..................................................... 7
DON'T KNOW ............................................... 9

TBQ.060 {Have you/Has SP} ever lived in the same household with someone while that person was sick with tuberculosis or TB?

YES ............................................................... 1
NO ................................................................. 2
REFUSED ..................................................... 7
DON'T KNOW ............................................... 9