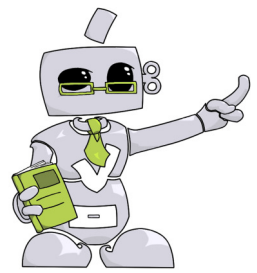


Complio Review Standards



WARNING: Please make sure to review this document carefully. Failure to submit documentation that meets the required criteria may result in rejection and delay your overall compliance.

ADB Standardized Information/Documentation:

- Typeset/Stamped name of provider (Not required on Institution-specific forms)
- Student name
- Service/Immunization name
- Service date
- Provider signature/stamp if document has a signature Field

| Item Type | Must Include |
|--|--|
| PPD | <ul style="list-style-type: none">- ADB Standardized Information/Documentation (See box above)• Read Date• Document lists positive/negative result |
| TB Clearance Note or TB Questionnaire | <ul style="list-style-type: none">• Student Name• Date• Statement which references TB symptoms OR TB Clearance OR TB Screening |
| Chest X-Ray | <ul style="list-style-type: none">- ADB Standardized Information/Documentation (See box above)• Document indicates normal OR no evidence/no active disease |
| Quantiferon TB Gold Test or other IGRA | <ul style="list-style-type: none">- ADB Standardized Information/Documentation (See box above)• Document lists positive/negative result |