|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Child’s Forename:** | | | **Family Name:** | | **Gender:** |
| **Address:** | | | | | |
| **Tel no/mobile:** | | | | **GP:** | |
| **DOB:** | **Place/Hospital of Birth (will be returned to referrer if left blank)** | | |  | |
| **Severe Combined Immune Deficiency \*SCID Result: Babies born on or after 01.09.21- (Will only be allocated appointment if result recorded)** | | | | **Print name:**  **Designation:**  **Telephone no:** | |
|  | | | |
| **Referral - This child has been assessed as meeting the NHS criteria for BCG vaccination by:** | | | |
|  | | | |
| **Reason for referral:** | | **Criteria** | | | **COUNTRY** |
| Infants and older children (29 days - 16 years old) | | * Born in an area with a TB notification rate >40 per 100,000 **or** * One or more parents or grandparents born in high-incidence country (list overleaf) x * Family history of TB in previous 5 years. * Travelling to an area of high risk for 3 months (12 weeks) or longer, and living with the indigenous population. | | | Please write at risk  country from list overleaf |
|  | |  | | |  |
| Has the individual if younger than 6 years old, been visiting (and living with the indigenous population) for longer than 12 weeks in a high risk country?  Details: | | | | | Yes / No/ NOT KNOWN |
| Are there any known contra-indications to BCG that you are aware of? i.e. immunosuppressive disease, HIV, steroid therapy.  If yes, please list details and provide 2 letters of negative HIV result. | | | | | Yes / No/ NOT KNOWN |
| **Contacts of people with active TB should be referred to a Chest Physician or acute Paediatrician**  **PLEASE POST THIS FORM TO:**  **THE IMMUNISATION TEAM-**  **FORUM HOUSE**  **41-51 BRIGHTON ROAD**  **REDHILL**  **RH1 6YS**  **Or email to**  [**fchc.immunisation.team@nhs.net**](mailto:fchc.immunisation.team@nhs.net) | | | | | |

**BCG Referral for Health Professionals Only**

**Incomplete referrals will be returned**

|  |  |  |
| --- | --- | --- |
| **A**  **Afghanistan**  **Algeria**  **Angola**  **Azerbaijan**  **B**  **Bangladesh**  **Benin**  **Bhutan**  **Bolivia**  **Botswana**  **Brazil**  **Brunei**  **Burkina Faso**  **Burundi**  **C**  **Cabo Verde**  **Cambodia**  **Cameroon**  **Central African republic**  **Chad**  **China**  **China, Hong Kong SAR**  **China Macao SAR**  **Congo**  **Côte d'Ivoire**  **D**  **Democratic People’s Republic of Korea**  **Democratic People’s Republic of Congo**  **Djibouti**  **Dominican Republic**  **E**  **Ecuador**  **El Salvador**  **Equatorial Guinea**  **Eritrea**  **Eswatini**  **Ethiopia**  **U**  **Uganda**  **Ukraine**  **United Republic of Tanzania**  **Uzbekistan**  **V**  **Vanuatu**  **Venezuela**  **Viet Nam** | **F**  **Fiji**  **G**  **Gabon**  **Gambia**  **Georgia**  **Ghana**  **Greenland**  **Guam**  **Guinea**  **Guinea-Bissau**  **Guyana**  **H**  **Haiti**  **I**  **India**  **Indonesia**  **Iraq**  **K**  **Kazakhstan**  **Kenya**  **Kiribati**  **Kyrgyzstan**  **L**  **Lao People’s Democratic Republic**  **Lesotho**  **Liberia**  **Libya**  **Lithuania**  **M**  **Madagascar**  **Malawi**  **Malaysia**  **Mali**  **Marshall Islands**  **Mauritania**  **Micronesia**  **Mongolia**  **Morocco**  **Mozambique**  **Myanmar** | **N**  **Namibia**  **Nauru**  **Nicaragua**  **Niger**  **Northern Mariana Islands**  **P**  **Pakistan**  **Papua New Guinea**  **Paraguay**  **Peru**  **Philippines**  **R**  **Republic of Korea**  **Republic of Moldova**  **Romania**  **Russian Federation**  **Rwanda**  **S**  **Sao Tome and Principe**  **Senegal**  **Sierra Leone**  **Singapore**  **Solomon Islands**  **Somalia**  **South Africa**  **South Sudan**  **Sri Lanka**  **Sudan**  **T**  **Tajikistan**  **Thailand**  **Timor-Leste**  **Turkmenistan**  **Tuvalu**  **Y**  **Yemen**  **Z**  **Zambia**  **Zimbabwe** |