



STATE OF TENNESSEE  
**DEPARTMENT OF HEALTH**  
Communicable and Environmental Disease Services  
Tuberculosis Elimination Program

Date:

Dear:

Welcome to Tennessee!

We have been notified by the Division of Global Migration and Quarantine through the **Bureau of Immigration and Customs Enforcement** that you are now living at \_\_\_\_\_ and you are sponsored by \_\_\_\_\_.  
(Street, City, Zip code) (Sponsor's name, if available)

In order to complete your immigration process, you are required to have a medical check-up for tuberculosis (TB) with the Tennessee Department of Health. The Tennessee Department of Health must complete paperwork about your check-up. The Division of Global Migration and Quarantine must be notified of your check-up results and will also be notified if you do not come into the health department for the check-up.

Please schedule an appointment by calling the following local health department:

Health Department Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Bring this letter and all x-ray films and any medical forms with you to your appointment. If you have moved to another state or are residing at a different location, please contact the health department listed above.

Sincerely,

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Title)