

A1 ALLIED HEALTH TRAINING INSTITUTE PPD Recording Form

2-step Mantoux Tuberculin skin test (PPD) must be done in the USA within 3 months prior to registration and **MUST** be read by a health care provider within 48-72 hours of administration to be valid. This is a NJ State requirement for the CNA Program.

Name of Student: _____

Date of Birth (MM/DD/YYYY): _____

1st PPD Date: _____

Site: Left arm _____ Right arm _____

Administered by: _____

Result read by: _____ Date: _____

Result:-----mm ___ Neg./No reaction ___ Pos.

2nd PPD Date: _____

Site: Left arm _____ Right arm _____

Administered by: _____

Result read by: _____ Date: _____

Result:-----mm ___ Neg./No reaction ___ Pos.

Lot#: _____ Expiration Date _____

Name of health care provider (printed): _____

HealthCare Provider Stamp:

If reading is 10mm or greater: or if student has had previous positive TB skin test.
Student must provide a report of a chest x-ray done in the USA within one year prior to registration.

Date completed: _____

Reading/Results of X-ray: _____

Signature of Radiologist: _____