



Please answer the questions and follow directions. Ask the PPD administrator to fill in all areas of the form including the clinic address, stamp and providers signature. Attach form C if this is your 1st PPD at Touro.

Name _____ Program & Grad Yr. _____ DOB: _____
Please Print

PPD/TST (Tuberculin Skin Test)

A 2 step PPD is two PPD's completed within 21 days. PPD #1 is placed in the forearm then read within 48 to 72 hours. PPD# 2 is placed 7-18 days later in the opposite forearm then read within 48 to 72 hours. Both PPD's must be documented in mm of induration. A 2 step PPD is required before matriculation then annually according to your program requirements.

Please check: **2- step PPD** **1- step PPD**

Yes No **1.** Have you completed an initial TB Screen and History form? If not, please include it with this PPD.

Yes No **2.** Have you traveled outside the US in the past 6 months for a month or longer?
If yes, where & when _____.

Yes No **3.** Have you lived with anyone who had active TB in the past year?

Yes No **4.** Have you worked or volunteered in a hospital, clinic, shelter or residential setting during the past year? If yes, what setting? _____.

Yes No **5.** Have you received **any live vaccines within the last 6 weeks** such as MMR, Varicella, Oral Typhoid or Yellow Fever? A PPD can be given the same day or 6 weeks after receiving a live vaccine.

PPD # 1

Manufacturer:		Lot:		Exp. Date	
Clinic stamp				Clinic stamp	
Date Placed _____		Date Read _____			
Time Placed _____		Time Read _____			
RFA _____		LFA _____		mm induration	
Placed by _____		Read by: _____			

PPD # 2

Manufacturer:		Lot:		Exp. Date	
Clinic stamp				Clinic stamp	
Date Placed _____		Date Read _____			
Time Placed _____		Time Read _____			
RFA _____		LFA _____		mm induration	
Placed by _____		Read by: _____			

Comments:

Providers Signature: _____ Date: _____