



HEALTHCARE
LICENSED
PERSONNEL, LLC
est. 2004

Employee Name: _____ DOB: _____

TWO STEP TUBERCULOSIS SCREENING

IF THE FIRST STEP IS NEGATIVE, THE SECOND INJECTION SHOULD BE ADMINISTERED NO EARLIER THAN 7 DAYS AND NO LATER THAN 21 DAYS AFTER THE FIRST READ DATE (NOT ADMINISTERED DATE) OF THE FIRST INJECTION. BOTH STEPS MUST BE READ BY AN LPN/RN OR MD.

1st STEP TB

Serum Lot # _____ Expiration Date: _____

Date Administered: _____

Site Administered : LEFT FOREARM _____ RIGHT FOREARM _____

Administered by: _____

Print: _____ Title: _____

(Must not be an MA)

Date READ: _____ RESULTS: _____ mm (mm ONLY ex. 0.0 mm)

Read by: _____

Print: _____ Title: _____

(Must not be an MA)



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2nd STEP TB

Serum Lot # _____ Expiration Date: _____

Date Administered: _____

Site Administered : LEFT FOREARM _____ RIGHT FOREARM _____

Administered by: _____

Print: _____ Title: _____

(Must not be an MA)

Date READ: _____ RESULTS: _____ **mm** (**mm ONLY ex. 0.0 mm**)

Read by: _____

Print: _____ Title: _____

(Must not be an MA)

Address of the location & phone number where the tests have been completed:
