

Rare Diamond STNA Training Center

MANTOUX TESTING

Name: _____

Step #1

Date Administered _____ Administered by: _____

Area Given: _____

Lot#: Expiration Date: _____

Date read: _____ Results: _____

Read By: _____

2nd Step

Date Administered: _____ Administered by: _____

Area Given: _____ Lot #/Expiration Date:

Date Read: _____ Results: _____

Read by: _____

If there are any difficulties with taking the Mantoux test, a **current** negative chest x-ray result can be used and attached to this form.