



Mantoux Tuberculin Skin Test Record Form
(Tuberculosis Test Report: 2-Step Skin Test)

Name: _____

Step 1 Skin Test

Date Given: _____

Body area where test administered: _____

PPD Strength: _____

Lot Number: _____

Manufacturer: _____

Administered by: _____

Date Read: _____

Result in Millimeter (mm): _____

Read by: _____

Step 2 Skin Test

Date Given: _____

Body area where test administered: _____

PPD Strength: _____

Lot Number: _____

Manufacturer: _____

Administered by: _____

Date Read: _____

Result in Millimeter (mm): _____

Read by: _____

* Step 1 Skin Test and Step 2 Skin Test must be separated by 2 weeks per CDC.