

**PATIENT NAME (First and Last)** Jane Smith

By signing this form, I give GrapeTree Medical Staffing, LLC the authorization to contact the healthcare provider noted on this form to verify authenticity of the information listed. **I understand that the cost of the test is my responsibility.**

**Patient Signature:** Jane Smith

## TEST 1

### Administration

**Date Given:** 8/17/2019

**Location:** X Left: \_\_\_\_\_ Right Forearm

**Given By: (Print)** Nancy Nurse

**Signature/Title:** Nancy Nurse RN

**Phone:** 712-336-0800

**MUST BE  
READ 48 to  
72 HOURS  
LATER**

## TEST 1

### Read

**Date Read:** 8/20/2019

**Results:** 0 mm of induration

**Interpretation:** X Negative \_\_\_\_\_ Positive

**Read By: (Print)** Nancy Nurse

**Signature/Title:** Nancy Nurse RN

**Phone:** 712-336-0800

## TEST 2

### Administration

**Date Given:** 8/24/2019

**Location:** \_\_\_\_\_ Left: X Right Forearm

**Given By: (Print)** Nancy Nurse

**Signature/Title:** Nancy Nurse RN

**Phone:** 712-336-0800

**MUST BE  
READ 48 to  
72 HOURS  
LATER**

## TEST 2

### Read

**Date Read:** 8/26/2019

**Results:** 0 mm of induration

**Interpretation:** X Negative \_\_\_\_\_ Positive

**Read By: (Print)** Nancy Nurse

**Signature/Title:** Nancy Nurse RN

**Phone:** 712-336-0800

**\*Tests must be read 48-72 hours after being given to meet CDC requirements. Tests read before 48 hours or after 72 hours will be considered invalid.**

### \*\*ALL FIELDS ARE REQUIRED

It is very unlikely that a side effect to the test will occur. If such an event does happen, the most common reaction is pain or redness at the test site. In very rare cases, a person who is hypersensitive to the solution could have a severe allergic reaction near the injection site. Such rare reactions may include blistering, or a skin wound.