

**LABORATORY - MANTOUX SKIN TEST RESULT  
5TU-PPD-TUBERCULIN**

**FORM L8**

ID LABEL  
HERE --->

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VISIT #:  
\_\_\_\_

FORM COMPLETED BY:  
\_\_\_\_

VERSION DATE: **10/01/99**

**ANY MISSING OR INCOMPLETE TEST RESULTS MUST BE EXPLAINED ON THIS FORM.**

A1. 5TU-PPD-TUBERCULIN WAS:

DONE..... 1 (A2)

NOT DONE..... 2

\_\_\_\_\_ (END)

(SPECIFY REASON)

PARTICIPANT REFUSED ..... 3 (END)

A2. DATE 5TU-PPD-TUBERCULIN PLACED:

\_\_\_ / \_\_\_ / \_\_\_  
M D Y

A3. DATE OF 5TU-PPD-TUBERCULIN READING:

\_\_\_ / \_\_\_ / \_\_\_  
M D Y

A4. RECORD MEASURED INDURATION OF 5TU-PPD-TUBERCULIN:

\_\_\_\_ mm

**NOTE: SERONEGATIVE PARTICIPANTS THAT HAVE A READING BETWEEN 5 MM AND 10 MM OF INDURATION REQUIRE A REFERRAL FOR CLINICAL EVALUATION AND/OR TREATMENT.**