



Tuberculosis Screening

Dear Prospective Employee,

The rules and regulations of the State of Rhode Island require that a physician certify that you are free of communicable tuberculosis. This certification must be based on a skin test and a physical examination. If your skin test is positive, you will probably need an x-ray.

Please have your physician complete the form below.

Name of Prospective Employee: _____

Mantoux (PPD) skin test performed: _____; Lot # _____

Mantoux (PPD) skin test results: _____

I certify that the above-named:

() is free of TB in its communicable form.

() has a history of adequate treatment for tuberculosis.

 Please specify: _____

() is currently under my care for this infection and is not now communicable, or

() shows no indications of present disease on a chest x-ray taken in the past 6 months.

Signed: _____ Date: _____

Title: _____ Printed Name: _____