

# Great Oaks Health Professions Academy 2024 -2025 Admission Packet

## Great Oaks Health Professions Academy T.B. Form

Documentation of a TWO-STEP TB TEST (TST) FORM

**A Two-Step T.B. skin test, QuantiFERON TB Gold, or chest x-ray is REQUIRED for this program. Please include the results below or attach the results to this form.**

Documentation of a Two-Step T.B. (Tuberculosis) Skin Test consists of an initial T.B. skin test and a boosted T.B. Skin test 1-3 weeks after the first TST result is read. If you have a positive skin test, provide documentation of a negative chest x-ray within the last five years (Please attach the chest X-ray documentation to this paper if there is a positive reading).

Print Student Name: \_\_\_\_\_

**Two-Step: Must be completed prior to handing in this form.**

<b>First Visit Step #1 :</b>		
<b>Date Given:</b>	Site: Right F.A. or Left F.A.	Health Care Provider Signature:
48-72 hours later Date Read:	Results/Circle One: Negative or Positive	Health Care Provider Signature:
<b>Second Visit Step #2 - (1-3 weeks after the first Step result is Read):</b>		
<b>Date Given:</b>	Site: Right F.A. or Left F.A.	Health Care Provider Signature:
48-72 hours later Date Read:	Results/Circle One: Negative or Positive	Health Care Provider Signature:

Results of QuantiFERON \_\_\_\_\_ Attach Report

If Positive, Chest X-ray Results \_\_\_\_\_ Attach Report

Office Stamp

**Or** Print Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Zip Code: \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_