

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES

TUBERCULIN SKIN TEST RECORD

NAME
DATE OF BIRTH
ADDRESS
CITY, STATE, ZIP CODE
SEE BACK OF CARD FOR SKIN TEST RESULTS

MO 580-0840 (02-12)

TBC-18

DATE		TEST TYPE	PROVIDER & AGENCY SIGNATURE	RESULTS
GIVEN MO/DAY/YR	READ MO/DAY/YR			
				mm
				mm
				mm
				mm
				mm
				mm
				mm
COMMENTS				
RETAIN THIS DOCUMENT AS PROOF OF TUBERCULIN SKIN TESTING				

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER
services provided on a nondiscriminatory basis