



# AMR TB EXPOSURE PREVENTION & SKIN TESTING POLICY

Version 1.2 <> Effective 07/1/2008

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## Mantoux Skin Test Intermediate Tuberculin Purified Protein Derivative (PPD)

**Print Name** \_\_\_\_\_

**Social Security #** \_\_\_\_\_

OSHA requires social security numbers on this medical record.

Tuberculosis (TB) poses an occupational health threat. While TB is usually treatable, some forms are multi-drug resistant (MDR-TB). As you know, this disease is an airborne pathogen and is spread from one person to another through the air.

To protect your self, use an N-95 respirator that you were fit tested for. Also, get a Mantoux skin test for early detection of the disease. Paramedics, EMTs and Transportation Service Personnel should receive a Mantoux test, every year.

According to OSHA’s Standard Interpretation Letter dated September 23, 1997, “OSHA does not require that employees participate in TB skin testing”. If you decline the offer, you must sign the declination statement below.

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### ACCEPTANCE STATEMENT

I accept the offer for free Mantoux Skin Test. The Mantoux is administered using intermediate tuberculin purified protein derivative (PPD). I understand that the test occurs in two visits. During the first visit, a small injection is made in the arm. A second visit is scheduled for 48 to 72 hours later. During the second visit, the PPD plant is examined and interpreted, and the results are documented.

I consent to having the PPD planted during the first visit. I agree that I’m responsible for attending the second visit, as scheduled. I recognize that failure to attend the second visit precludes the opportunity to document test results.

**Employee Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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PPD Manufacturer \_\_\_\_\_ Lot Number \_\_\_\_\_

1<sup>st</sup> Visit- DATE Planted: \_\_\_\_\_ Site: \_\_\_\_\_

**Planted by:** \_\_\_\_\_

2<sup>nd</sup> Visit - DATE Examined and Interpreted: \_\_\_\_\_

Interpretation and mm induration: \_\_\_\_\_

**Interpreted by:** \_\_\_\_\_

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### DECLINATION STATEMENT

Thank you for offering me a free Mantoux Skin (PPD) test. However, I decline the offer at this time. I will notify a supervisor if I decide to change my mind at a later date.

**Employee Signature** \_\_\_\_\_ **Date** \_\_\_\_\_