



Student ID# _____

Program of Study: _____

The Center for Health, Wellness and
Personal Counseling, Room HS100

400 Paramus Road, Paramus, NJ 07652

email: Healthservices@bergen.edu

To: Nursing, Health Professions Students and Health Professions Staff,

A Mantoux Tuberculin Test or Quantiferon Gold blood test is required of all Nursing and Health Professions students each year.

Please have your Physician complete the form below.

A Mantoux Tuberculin Test has been performed on:

NAME _____

ADDRESS _____

DATE OF IMPLANT _____

DATE OF RESULT _____

RESULTS NEG (_____mm) POS (_____mm). If PPD is positive, submit a chest x-ray report. Chest x-ray must be performed with 6 months of starting program. *A copy of the chest x-ray report must be submitted if PPD result is positive.

If Quantiferon Gold blood test or a Spot blood test has been administered, a copy of blood test lab report must be attached.

Health Care Professional Signature _____

Physician Stamp Address _____

Health Professions student submission link: <https://lf.bergen.edu/forms/hs0001>

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