



School District of the Chathams
School Health Services
Tuberculosis Testing Documentation

Dear Parent/Guardian:

The New Jersey State Department of Health and Senior Services requires tuberculin skin testing ("Mantoux" test) or Interferon- Gamma Release Assay Test (blood test) for certain students upon entering the district. (Please refer to [this link](#) for additional information)

Please speak with your child's doctor to determine whether they require TB testing.

Then, submit this form, signed by your child's doctor, to the school nurse, along with their Universal Child Health Record within 30 days of their first day of school.

Thank you.

Dear School Nurse,

_____ DOB _____
 Name of Student (please print)

- According to the NJDOH TB Screening Rules, this student does NOT require TB testing
- This student has undergone required TB testing:

Date of test: _____ Result: _____

For significant reactors:

Date of Chest X-Ray _____
Result of Chest X-Ray _____
Treatment regimen: _____

 Signature of Physician Date

Physician's Stamp

