

Student Health Services

PPD Screening Form

Livia Glana	Q155211153
Name: LIVIA Sharp	TUid:915534603
PPD Given: August 26, 2019 (Date)	Lot #: $\frac{C558bCA}{Expiration: \frac{5/22/2024}{D}}$ (L) R Forearm (Circle)
Vonne Pitts, RN (Name and Title)	(Signature)
Please check one:	
☐ Baseline ☐ Follow Up (2 Step) ☐ Annual ☐ Exposure (Baseline) ☐ ☐ Exposure (12 week)	
PPD MUST BE READ 48-72 HOURS AFTER PLACEMENT. Please return this form to: Student Health Services 1700 N Broad Street, 4th floor Philadelphia, PA 19121 Ph: 215/204/7500 Fax: 215-204-4660	
Results: Date Read: 8/28/19 (MM only) Read By: NICOL Rodn Suz, Bol Merel J	
(Print Name and Title)	(Signature)