THE UNIVERSITY OF TENNESSEE AT CHATTANOOGA
SCHOOL OF NURSING
CLINICAL REQUIREMENT UPDATE FORM

NAME _____ DATE _____

TUBERCULIN SKIN TEST

Annual TB skin test update is on file in UTC Student Health.

Next test needed by _____.

Please notify Dr. Kay Lindgren (425-4646) if student converts to a positive result.

_____ _____
Signature of clinician date

IMMUNIZATION UPDATE

The following forms have been completed and will remain on file in UTC Student Health throughout the student's tenure at UTC.

☐ Hepatitis B Vaccine Series update ☐ Series completion

☐ Varicella Vaccine Series completion

☐ Tetanus vaccine update (expires _____)

☐ Other: _____

_____ _____
Signature of clinician date