


A VitalCheck Wellness service

Physician practice: Ceregenesis Medical Corporation · 2118 Wilshire Blvd #1046, Santa Monica, CA 90403

TUBERCULOSIS EXAMINATION CERTIFICATE

California Health and Safety Code section 1796.45(d) · Affiliated home care aide

CAREGIVER

[Redacted]

Name and date of birth hidden in this example
EMPLOYER OF RECORD
Example Home Care, Inc.

Affiliated home care aide

EXAMINATION PERFORMED

Test	QuantIFERON-TB Gold Plus (TB blood test)
Blood drawn	01 Jul 2026
Laboratory result reported	03 Jul 2026
Result	NEGATIVE

HEALTH SCREEN

Screen completed	02 Jul 2026 · symptoms, higher-risk exposure, prior positive test, immunosuppression
Physician review of the screen	03 Jul 2026 · nothing requiring further evaluation
Chest X-ray	Not indicated · negative test and negative screen

PHYSICIAN ATTESTATION

The individual named above submitted to a tuberculosis examination (QuantIFERON-TB Gold Plus) on 01 Jul 2026, with a negative result, and completed the symptom and exposure screen above on 02 Jul 2026. I have reviewed the laboratory result and that screen. On that basis, the individual was examined and found free from active tuberculosis disease.

[Redacted]

Signature of reviewing and certifying physician

03 Jul 2026

Date signed

[Redacted], MD · California Physician and Surgeon

 CA license no. [Redacted] · NPI [Redacted] *Physician name and license shown on your real file*
RETENTION AND RENEWAL

Next examination due 01 Jul 2028, two years from the examination date.

The agency keeps this signed certificate and the supporting laboratory result in the caregiver's file.

HOW TO VERIFY

The laboratory report identifies the performing site and CLIA number. The signing physician may be checked with the Medical Board of California.

Patient Information	Specimen Information	Client Information
<div>██████████</div> DOB: ████████ AGE: ██████ Gender: F Phone: ████████ Patient ID: ██████████ Health ID: ██████████	Specimen: ████████ Requisition: ██████████ Lab Ref #: ██████████ Collected: 07/01/2026 / 10:00 EDT Received: 07/02/2026 / 10:00 EDT Reported: 07/03/2026 / 10:00 EDT	Client #: ██████████ ████████ ██████████ VITAL CHECK WELLNESS NEW YORK, NY 10001

Test Name	In Range	Out Of Range	Reference Range	Lab
QUANTIFERON(R) -TB GOLD PLUS, 1 TUBE	NEGATIVE		NEGATIVE	Z99
	Negative test result. M. tuberculosis complex infection unlikely.			
NIL	0.03		IU/mL	
MITOGEN-NIL	9.25		IU/mL	
TB1-NIL	0.01		IU/mL	
TB2-NIL	0.00		IU/mL	

The Nil tube value reflects the background interferon gamma immune response of the patient's blood sample. This value has been subtracted from the patient's displayed TB and Mitogen results.

Lower than expected results with the Mitogen tube prevent false-negative Quantiferon readings by detecting a patient with a potential immune suppressive condition and/or suboptimal pre-analytical specimen handling.

The TB1 Antigen tube is coated with the M. tuberculosis-specific antigens designed to elicit responses from TB antigen primed CD4+ helper T-lymphocytes.

The TB2 Antigen tube is coated with the M. tuberculosis-specific antigens designed to elicit responses from TB antigen primed CD4+ helper and CD8+ cytotoxic T-lymphocytes.

For additional information, please refer to <https://education.questdiagnostics.com/faq/FAQ204> (This link is being provided for informational/educational purposes only.)

PERFORMING SITE:

Z99 QUEST DIAGNOSTICS CLIFTON, 1 INSIGHTS DRIVE, CLIFTON, NJ 07012-2355 Laboratory Director: DR. PETER E. FISHER, CLIA: 31D0696246