

## PARTICIPATION IN HEPATITIS-B VACCINATION PROGRAM

The USA College of Medicine offers a voluntary Hepatitis-B immunization program for all personnel handling animals. This program includes three (3) injections over a 7 month period. The immunization is available through the USA Urgent Care Clinic. There will be no charge to the employee for these appointments.

Hepatitis-B is a viral disease of humans that affects the liver and other organs. Some people with the disease develop a long-lasting form that can lead to severe liver dysfunction or liver cancer. Those infected with the virus can become carriers--infesting others without becoming sick themselves. Hepatitis is primarily transmitted through human blood and body fluids.

Hepatitis-B has a prevalence in this part of the U.S. sufficient to warrant vaccination of health workers. Employees may be assigned to areas where human blood and body fluids are sometimes handled. It is for these reasons that Hepatitis-B immunization is offered, without charge, to all employees.

Although the Hepatitis-B immunization program is considered safe, possible side effects may occur. Pain, redness, swelling, or itching at the injection site are the most common side effects. More serious side effects are possible, but are very rare. Possible adverse reactions to Hepatitis-B vaccine can be discussed with the nurse administering the vaccination.

Employee's Name (printed) \_\_\_\_\_

- I accept the free combination vaccines against **Hepatitis A and Hepatitis B** (HA/BV) virus provided by my employer. I understand that this immunization will, in all likelihood, only protect me only against Hepatitis A and Hepatitis B virus infection and not against other Hepatitis viruses or other bloodborne pathogens (e.g. Hepatitis C, HIV, etc.). Efficacy of the Hepatitis A and Hepatitis B vaccine and vaccination series is not guaranteed by the employer, but by the vaccine manufacturer. The U.S. Public Health Service recommends the combination Hepatitis A/B vaccines against Hepatitis A and Hepatitis B virus is for individuals 18 years of age or older whose occupation puts them at high risk of acquiring Hepatitis A/B virus.
- I accept the free immunizations against **Hepatitis B** virus provided by my employer. I understand that this immunization will, in all likelihood, protect me only against Hepatitis B virus infection and not against other Hepatitis infections or other blood borne pathogens (e.g. Hepatitis C, HIV, etc). Efficacy of the HBV vaccine is not guaranteed by the employer, but by the HBV vaccine manufacturer. The U.S. Public Health Service recommends the HBV immunization for health care workers.
- I refuse the Hepatitis B immunization. I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring Hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself. However, I decline Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me.
- I have already been vaccinated against hepatitis B virus on or about \_\_\_\_\_.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

