**Hepatitis B Consent/ Declination Statement**

The following statement of declination of Hepatitis B vaccination must be signed by any employee who chooses not to accept the vaccine. The statement can only be signed by the employee who has received information regarding HBV, the Hepatitis B vaccination, the efficacy, safety, method of administration, and benefits of vaccination, and that **the vaccine and vaccination are provided free of charge to the employee**. The statement is not a waiver; employees can request and receive the Hepatitis B vaccination later if they remain occupationally at risk for HBV.

Hepatitis B is a serious liver infection caused by HBV. For some people, HBV infection becomes chronic, meaning it lasts more than six months. Most people infected with Hepatitis B as adults recover fully, even if their signs and symptoms are severe. Infants and children are more likely to develop a chronic HBV infection. A vaccine can prevent hepatitis B, but there is no cure if you have it. HBV is a very hardy virus and can survive in dried blood on a surface for up to seven days.

Hepatitis B can spread from mother to child at birth or soon after, through sexual contact, contaminated blood transfusions, needles, or exposure to HBV containing infectious materials through an open sore. Having a chronic HBV infection can lead to serious complications, such as:

**Scarring of the liver (cirrhosis).** The inflammation associated with a HBV infection can lead to extensive liver scarring (cirrhosis), which may impair the liver's ability to function.

**Liver cancer.** People with chronic HBV infection have an increased risk of liver cancer.

**Liver failure.** Acute liver failure is a condition in which the vital functions of the liver shut down.

When that occurs, a liver transplant is necessary to sustain life.

**Other conditions.** People with chronic Hepatitis B may have kidney disease, inflammation of blood vessels or anemia.

Hepatitis B vaccine is an injectable vaccine that prevents HBV. In healthy people, routine immunization results in more than 95% of people being protected. The Hepatitis B vaccine is a three-four shot series over a six-month period. The vaccine is given by injection into a muscle.

Additional doses may be needed in people with poor immune function but are not necessary for most people. In those who have been exposed to HBV but not immunized, HBV immune globulin should be given in addition to the vaccine. Serious side effects from the Hepatitis B vaccine are very uncommon. Pain may occur at the site of injection. It is safe for use during pregnancy or while breastfeeding.

*Hepatitis B Statement Acknowledgement*

**PLEASE CHECK ONE:**

 I have previously completed the Hepatitis B Series of vaccinations or I decline to receive the Hepatitis B vaccine. Please read, sign and date the declination statement page in addition to this Hepatitis B Consent/Declination Statement.

 I wish to receive the Hepatitis B vaccine.

Employee Name:

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

*This record will be kept at the respective HR office for the employee.*

*Hepatitis B Vaccine Declination Form (Mandatory)*

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.

Name (Print):

Signature:

Date: