

Cumberland Regional School District

Hepatitis B Vaccine Consent/ Declination

Hepatitis B is a serious disease that affects the liver. It is caused by the Hepatitis B virus. Hepatitis B can cause mild illness lasting a few weeks, or it can lead to a serious lifelong illness.

In accordance with the Bloodborne Pathogens Standards, the Cumberland Regional Board of Education has adopted a policy to address the potential risk to employees. The policy states that the Hepatitis B Vaccine will be offered at no charge to any employee who is at high risk of exposure to the blood and body fluids. The vaccine is given as an intramuscular injection into the deltoid muscle of the arm. It is a series of 3 injections given over a six-month period at Inspira Occupational Health.

You have an option of receiving the vaccine now or at a later date. If you should ever have an "exposure" the series can be given at that time- also at Board expense.

Please complete below:

I understand that the Hepatitis B virus is spread by contact with blood and other body fluids. I understand that I am being offered the Hepatitis B Vaccination series at no charge to myself. I further understand that if I decline now, I may decide at a later date to receive the series, still at no charge to me.

I elect to receive the Hepatitis B Vaccination series and release from any liability associated with its administration by the personnel responsible for administering the vaccination.

I have already received the Hepatitis B Vaccination series.

I decline the Hepatitis B Vaccination series at this time. I understand that due to exposure to blood or other potentially infectious body fluids, I may be at risk of acquiring the Hepatitis B virus/infection. I have been given the opportunity to be vaccinated at this time. If in the future I would like to be vaccinated with the Hepatitis B Vaccine, I can receive the vaccination series at no charge to me.

Print Name

Signature

Date

Vaccine Administration Record

Date #1 ____/____/____

Date #2 ____/____/____

Date #3 ____/____/____

Lot # _____

Lot # _____

Lot # _____

Exp ____/____/____

Exp ____/____/____

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By _____

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By _____

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