## **Hepatitis B Vaccination Consent Form**

**INSTRUCTIONS:** Every employee covered by the OSHA Bloodborne Pathogens Standard must complete **EITHER** this consent form **OR** the Hepatitis B Vaccination declination form and submit it to the Safety and Risk Management Office.

I have read and understand the HEPATITIS B INFORMATION SHEET, which describes the clinical course of the disease, the vaccination, and its most frequent risks and hazards. I have discussed any questions or concerns with campus Health Services.

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 agree to be vaccinated with hepatitis B vaccine, at no charge to myself. I understand that I will receive the complete series of injections (3 injections over a 6-month period) required for full immunization to HBV. If my employment terminates before finishing all three injections, I understand that the University is not responsible for providing the remaining injections.

I understand that I need to have written authorization from my physician before receiving the vaccine if any of the following statements is true: I am pregnant, I have cardio-pulmonary compromise, I am allergic to formalin (formaldehyde), I am allergic to thimerosal (a mercury derivative), or I am allergic to yeast. I understand that there are possible contraindications to HBV vaccination which include, but are not limited to, hypersensitivity to any component of the vaccine, and hypersensitivity to yeast when recombinant HBV vaccine is used. Patients experiencing hypersensitivity after the Hepatitis B vaccine injection should NOT receive further injections of the vaccine.

Employee Name (Print)	
Employee ID Number (92#)	
Employee Signature	
Department	
Date	

Please return this form to the Safety and Risk Management Office via intercampus mail (Facilities Management – Safety Office) or by email <a href="mailto:safety@wcu.edu">safety@wcu.edu</a>.

For questions or assistance with this form contact Safety and Risk Management at 828-227-7443

For medical related questions contact WCU Health Services at 828-227-7640.