


Section: Medical Exposure Control Plan – Prevention Procedures
Subject: HEPATITIS-B VACCINATION
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Page 1 of 1

Michael Lozano, Jr., M.D., HCFR Medical Director

1. Hepatitis-B vaccine shall be made available to all members within ten (10) days of initial assignment to duties involving occupational exposure to blood or other potential infectious materials unless:
 - a. The employee has previously received the vaccination series – **and** –
 - b. Antibody testing to determine antibody titers (available at the member's option) reveals immunity – **or** –
 - c. The vaccination is medically contraindicated.
2. The vaccine shall be offered at a reasonable time and place and at no charge to the member.
3. The vaccine shall be administered under the supervision of a physician or other licensed health care provider in accordance with current United States Public Health Service standards and recommendations.
4. Members that have occupational exposure to blood or potentially infectious materials and decline the receipt of the Hepatitis-B vaccination shall be required to sign a declination release statement.
5. Members who initially decline the Hepatitis-B vaccination, and continue to have occupational exposure to blood or other potentially infectious materials may decide at a later date to receive the vaccine.
 - a. Such members may receive the vaccine in a reasonable time and place at no cost to the member upon notification to the organization.
6. Example of declination form:

To: _____, Personnel Chief, Hillsborough County Fire Rescue

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 me. 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 want to be vaccinated with the Hepatitis-B vaccine, I can receive the vaccination series at no charge to me.

Member Signature

Date

Witness Signature

Date