

Hepatitis B Vaccination Declination

Fast Response and its externship sites require students who decline to receive the full Hepatitis B vaccination series and a positive titer to sign the following statement.

I understand that due to my occupational exposure to blood I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been informed that I should be vaccinated with hepatitis B; however, I voluntarily choose to decline the vaccine and proof of immunity at this time. I understand that by declining this vaccine and blood test, I may be at risk of acquiring hepatitis B, a serious disease. I understand that I can obtain the vaccination series at a later time.

| Student Name | |
|-------------------|--|
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| Student Signature | |