Rice University Hepatitis B Vaccination Declaration

A safe and effective vaccine is available for protection from Hepatitis B. While Rice University strongly encourages employees to be vaccinated, accepting vaccination is not a condition of employment. This vaccine is available at no cost to the employee. Immunization requires three injections over a six-month period.

Please check the appropriate box:

□ I have already received the Hepatitis B vaccine. Approximate date of vaccine:_____ I received the vaccine at:

□ I wish to receive the Hepatitis B vaccine.

□ I do not wish to receive the Hepatitis B vaccine at this time.

If you wish to **decline** the Hepatitis B vaccine at this time, please read and sign the statement below.

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 this opportunity to be vaccinated with hepatitis B vaccine at no charge to myself. However, I decline the hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serous 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:_____

Department:

Submit the completed form to your supervisor, who will either file the form (if vaccination is declined) or make arrangements for vaccination through the Environmental Health and Safety Department.

If you have any questions contact Kathryn Cavender in Environmental Health and Safety at X4444.