UNIVERSITY OF LOUISVILLE

Hepatitis B Vaccine Offer

In compliance with federal and state regulations, UofL offers Hepatitis B vaccine to all employees potentially exposed to bloodborne pathogens. **The Principal Investigator or appropriate department is responsible for bearing the cost of the vaccine for all identified employees.** See the Exposure Control Plan for details.

Please Print

Name:	**Dept:**
UofL ID #:	**Supervisor:**
Date of Birth:	**Job Title:**
E-mail:	**Work Phone:**

Choose Option A, B or C

Option A: If choosing to receive vaccine, sign request and return to supervisor.

VACCINE REQUEST
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 elect to receive the hepatitis B vaccine at this time at no cost to myself.

Signature: **Date:**

Option B: If choosing not to receive vaccine, sign waiver and return to supervisor.

WAIVER
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 myself. 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 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 at no charge to me.

Signature: **Date:**

Option C:

☐ If you have been previously vaccinated; check here, sign and return to supervisor.

If you are unsure of your vaccination status, you have not completed the entire series or cannot provide proof of titer, evaluation of immunity is provided by Campus Health Services at no charge to you.

☐ EVALUATION of IMMUNE STATUS

Signature: **Date:**

If you have questions about the Hepatitis B vaccine or your immune status please call
Campus Health Services
Telephone: 852-6446 Fax: 852-6649

If you have any other questions about the UofL Bloodborne Pathogens Program call
Dept. of Environmental Health & Safety
Telephone: 852-6670 Fax: 852-0880