



## EMPLOYEE HBV VACCINATION CONSENT & LOG FORM

Hepatitis is a viral infection caused by the Hepatitis B Virus (HBV) which can be spread by contact with infected blood and other body fluids. It can also be transmitted through close interpersonal contact. Five to ten percent of people with HBV infection become chronic carriers of the disease which have the greatest potential for long-term complications, including death.

The HBV Vaccine is an inactivated vaccine produced in yeast cells. After a series of three intramuscular injections of the vaccine given in the deltoid muscle over six-month period, greater than 90 percent of healthy adults develop protective antibodies against HBV.

### Contradictions and Precautions:

1. Hypersensitivity to yeast or any component of the vaccine.
2. Previous adverse reactions following an injection of an HBV Vaccine.
3. Any serious active infections.
4. Pregnant or breastfeeding women.
5. Individuals with severely compromised cardiopulmonary status.
6. Immunocompromised individuals.

### Side Effects:

1. The most common side effect is redness and soreness at the injection site.
2. The most frequent systematic complaints include fatigue, weakness, headache, low grade fever, and dizziness.
3. Adverse reactions rarely reported are rash, vomiting, arthralgia, muscle weakness, sweating, chills, light headedness, abdominal cramping, influenza, and neurological disorders.

I have read the above information and have had an opportunity to ask questions about the HBV Vaccine. I understand there is not guarantee that I will become immune or that I will not experience an adverse side effect from the vaccine. I understand that I must have all three doses of the vaccine to ensure immunity. I request that the vaccine be given to me.

**DOSE #1** \_\_\_\_\_  
*Signature* *Date* *Lot #* *Witness*

**DOSE #2** \_\_\_\_\_  
*Signature* *Date* *Lot #* *Witness*

**DOSE #3** \_\_\_\_\_  
*Signature* *Date* *Lot #* *Witness*

### **For Medical Personnel Only:**

Medication: \_\_\_\_\_  
 Manufacturer: \_\_\_\_\_  
 Expiration Date: \_\_\_\_\_