



Hepatitis B Vaccination / Hepatitis B Vaccine Waiver / Exemption

**Prerequisite for Access to BSL-2 Laboratories where Human Blood or
Other Potentially Infectious Materials are Handled**

Human blood, certain body fluids, and tissues/cells may contain bloodborne pathogens (BBP), including hepatitis B virus (HBV), human immunodeficiency virus (HIV), and other BBP. Hepatitis B is a disease of the liver caused by HBV. Most people can get rid of the virus on their own, but others can develop chronic (or life-long) hepatitis B (HB) infection. HB infection is preventable by vaccination series.

Before accessing any laboratory areas that are biosafety level 2 (BSL-2) entities where above-mentioned potentially infectious materials are worked with or stored, individuals must do one of the following:

- Item 1), below - Be vaccinated for hepatitis B which consists of a 3-dose series; or
- Item 2), below - Refuse the vaccination and sign the Hepatitis B Vaccine Waiver.

Individuals who work in a BSL-2 area where above mentioned potentially infectious materials are worked with or stored, but do not handle any such materials as part of their duties/line of study, please skip items 1) and 2) and proceed directly to item

3) below.

1) Hepatitis B Vaccination

It is highly recommended that all employees with occupational exposure to BBP through handling human blood/other potentially infectious materials (OPIM) receive hepatitis B vaccination. The proof of hepatitis B vaccination needs to be emailed to ehsafety@uta.edu.

2) Hepatitis B Vaccine Waiver

Declination Statement: I understand that due to my occupational exposure to human blood or OPIM, 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 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 serious disease. In the future, if I continue to have occupational exposure to human blood or OPIM and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to myself.

- OR -

☐ I am currently in the process of obtaining the hepatitis B vaccination series. However, I would prefer to begin work before the vaccination series is complete. I understand that until the vaccination series is complete, I am not fully protected, and I am still at risk of acquiring HB infection.

Name:		Department:	
<input type="checkbox"/> Faculty <input type="checkbox"/> Staff <input type="checkbox"/> Student Employee <input type="checkbox"/> Student			
Employee/Student ID#:		Email:	
Laboratory Building/Room:			
Signature:		Date:	
PI Name:		PI Signature:	

Hepatitis B Vaccination / Hepatitis B Vaccine Waiver / Exemption**3) Exemption**

I, _____ by signing this form, declare that I have been informed by training ([Bloodborne Pathogens for Laboratory Research Personnel – BIOL200](#)) about BBP, and I am aware that BBP, including HBV, HIV, and other BBP, can cause e.g., HB infection, a serious liver disease, and acquired immunodeficiency syndrome (AIDS), a disease of the human immune system. However, I am currently exempt from handling any above mentioned materials that could harbor BBP, and exposure to BBP is minimal. If/when my duties or line of study change and there could be anticipated exposure to BBP, I acknowledge that I have the responsibility to inform the Environmental Health & Safety Office (EH&S) about the change before the change takes place.

Name:		Department:	
<input type="checkbox"/> Faculty <input type="checkbox"/> Staff <input type="checkbox"/> Student Employee <input type="checkbox"/> Student			
Employee/Student ID#:		Email:	
Laboratory Building/Room:			
Signature:		Date:	
PI Name:		PI Signature:	

Send completed form to EH&S at Box 19257, fax 817-272-2144, or ehsafety@uta.edu.