Tehama County Department of Education

INFECTIOUS DISEASE (HEPATITIS B)
HOLD HARMLESS & INFORMED CONSENT FORM

The undersigned employee of the Tehama County Department of Education is aware of the following facts: Hepatitis B is a relatively common problem in students with profound mental and/or physical impairments who have previously resided in an institutional setting. The staff which series students with profound mental and/or physical impairments who have previously resided in an institutional setting, especially those students with more aggressive behavior problems, will continue to be at risk for developing a Hepatitis B infection. Although the infection itself may be mild or not apparent, it can also be responsible far severe, occasionally fatal, liver disorders, such as chronic Hepatitis or Cirrhosis. Hepatitis B infection also vastly increases the chance of an individual developing liver cancer later in life. To protect persons who serve students with profound mental and/or physical impairments who have previously resided in an institutional setting, the Tehama County Department of Public Health and the Tehama County Department of Education have recommended and are advising that staff members who work directly with students with profound mental and/or physical impairments who have previously resided in an institutional setting be immunized with Hepatitis B vaccine.

NOTE: Listed below are two available options. You must sign the option you select in the presence of the Personnel Manager or designee, who will witness your selection.

Option No. I: I agree to be vaccinated for Hepatitis B by the Tehama County Department of Public Health. I understand that the Tehama County Department of Education will make arrangements with the Tehama County Department of Public Health for such vaccination.

_____ _____

Signature Date

_____ _____

Witness Date

Option No. 2: I refuse to be immunized with Hepatitis B vaccine. I accept any and all risks which could be protected against by such immunization, whether such risks are known or unknown, expected or unexpected. I hereby waive any claims, causes of action, expenses, or the like, against the Tehama County Department of Education which arise out of or relate to my possible infection with Hepatitis B. I have consulted with persons who are not agents or employees of the Tehama County Department of Education or the Tehama County Department of Public Health regarding my refusal to be immunized with Hepatitis B vaccine and my acceptance of the risks which could be protected against by such immunization.

_____ _____

Signature Date

_____ _____

Witness Date

IMPORTANT INFORMATION ABOUT
HEPATITIS B AND HEPATITIS B VACCINE

**** ***PLEASE READ THIS CAREFULLY*** ****

What is Hepatitis B?

Hepatitis B is an infection of the liver caused by the hepatitis B virus (HBV). The term "viral hepatitis" is often used for and may include hepatitis B and other similar diseases which affect the liver but are caused by different viruses.

Acute hepatitis generally begins with mild symptoms that may or may not become severe. These symptoms may include loss of appetite, a vague feeling of oncoming illness, extreme tiredness, nausea, vomiting, stomach pain, dark urine, and jaundice (yellow eyes and skin). Skin rashes and joint pain can also occur.

In the United States about 300,000 persons, mostly young adults, catch hepatitis each year. About one-fourth will develop jaundice, and more than 10,000 will need to be hospitalized. About 250 people die each year from severe acute hepatitis B. Between 6 and 10 of every 100 young adults who catch hepatitis B become chronic carriers (have HBV in their blood for 6 or more months) and may be able to spread the infection to others for a long period of time. Infants who catch hepatitis B are more likely to become carriers than adults. About one-fourth of these carriers go on to develop a disease called "chronic active hepatitis." Chronic active hepatitis often causes cirrhosis of the liver (liver destruction) and death due to liver failure. In addition, HBV carriers are much more likely than others to get cancer of the liver. An estimated 4,000 persons die from hepatitis B related cirrhosis each year in the United States and more than 800 die from hepatitis B related liver cancer.

The risk of catching hepatitis is higher in certain groups of people because of their occupation, lifestyle, or environment. Because of the risks of serious problems associated with hepatitis B infection, vaccination to help prevent infections is recommended for these groups.

Hepatitis B Vaccine

Hepatitis B vaccine is made two ways. Plasma-derived vaccine is made from HBV particles that have been purified from the blood of carriers. The method used to prepare the plasma-derived hepatitis vaccine kills all types of viruses found in human blood, including the virus that causes Acquired Immunodeficiency Syndrome (AIDS). Recombinant vaccines are made from common baker's yeast cells through genetic engineering. The yeast-derived vaccines do not contain human blood products. The vaccine is given by injection on three separate dates. Usually, the first two doses are given 1 month apart, and the third dose, 5 months after the second. After three doses, the hepatitis B vaccine is 85% - 95% effective in preventing hepatitis B infection in those who received vaccine. Protection for normal, healthy adults and children given vaccine lasts at least 7 years. Booster doses of vaccine are not routinely recommended at the present time.

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Who Should Get Hepatitis B Vaccine?

The vaccine is recommended for persons at high risk of catching HBV infection who are or may be unprotected. These groups include:

1. Persons with occupational risk. Health care and public safety workers who are exposed to blood or blood products or who may get accidental needle sticks should be vaccinated.

2. Clients and staff of institutions for the developmentally disabled. The special behavioral and medical problems of these persons make this a high-risk setting. Risk in institutions is related to contact with blood and also with bites and contact with skin lesions and other body fluids that contain HBV. Clients and staff of group and foster homes where a carrier is known to be present should also be vaccinated.

3. Hemodialysis patients. Although the hepatitis B vaccine is less effective in these patients, it should still be offered to all hemodialysis patients. Higher doses and/or special preparations are required for these persons.

4. Homosexually active men.

5. Users of unlawful injectable drugs. Sharing needles is an extremely high-risk activity for transmitting hepatitis B.

6. Recipients of certain blood products. Persons such as hemophiliacs who receive special products to help their blood clot are at high risk of infection.

7. Household and sexual contacts of HBV carriers. When HBV carriers are identified, household and sexual contacts should be offered vaccine.

8. Adoptees from countries with high rates of HBV infection. Families with orphans or unaccompanied minors from such countries should have the child checked for HBV carriage, and, if positive, family members should be vaccinated.

9. **Other contacts of HBV carriers. Vaccine use should be considered in classroom and other day settings where deinstitutionalized developmentally disabled HBV carriers behave aggressively or have special medical problems that may expose contacts to their blood or body secretions. Teachers and aides have been shown to be at significant risk in these settings. Other persons who have casual contact with carriers at schools and offices are at little risk of catching HBV infection, and vaccine is not recommended for them.**

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10. Special populations from areas with high rates of hepatitis B. These groups include Alaskan natives, native Pacific islanders, immigrants and refugees from eastern Asia and sub-Saharan Africa, and their U. S. born children.

11. Inmates of long-term correctional facilities. The risk of inmates catching HBV infection may be due to use of unlawful injectable drugs and male homosexual practices.

12. Heterosexuals who come in for treatment of other newly acquired sexually transmitted diseases and who have histories of sexual activity with multiple sexual partners in the past 6 months.

13. Persons who plan to travel to areas outside the United States that have high risk rates of hepatitis B, stay in these areas for more than 6 months, and have close contact with the local population; and persons traveling for shorter durations who may have contact with blood from or sexual contact with local persons in areas where HBV infection is common. Persons traveling abroad who will perform medical procedures in areas where HBV infection is common are at very high risk.

Additional Vaccines

Hepatitis B vaccine is also recommended as part of the therapy used to prevent hepatitis B infection after exposure to HBV. Post exposure use of hepatitis B is recommended for the following persons:

1. Infants born to mothers who have a positive blood test for hepatitis B surface antigen (HBsAg);

2. Persons having accidents involving HBsAg positive blood where there is entry through the skin or mucous membrane;

3. Infants less than 12 months old whose mother or primary caregiver has HBV infection; and

4. Persons having sexual contact with someone who has a positive blood test for HBsAg. The hepatitis B vaccine series should be started at the same time as other therapy, primarily treatment with hepatitis B immune globulin (HBIG).

Possible Side Effects from the Vaccine

The most common side effect is soreness at the site of the injection. Illnesses such as neurologic reactions have been reported after vaccine is given, but hepatitis B vaccine is not believed to be the cause of these illnesses. As with any drug or vaccine, there is a rare possibility that allergic or more serious reactions or even

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death could occur. No deaths, however, have been reported in persons who have received this vaccine. Giving hepatitis B vaccine to persons who are already immune or to carriers will not increase the risk of side effects.

Pregnancy

The Centers for Disease Control MMWR (Morbidity and Morality Weekly Report) of November 22, 1991, states,

> "Vaccination during pregnancy --
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> On the basis of limited experience, there is no apparent risk of adverse effects to developing fetuses when hepatitis B vaccine is administered to pregnant women (CDC, unpublished data). The vaccine contains non infectious HBsAg particles and should cause no risk to the fetus. HBV infection affecting a pregnant woman may result in severe disease for the mother and chronic infection for the newborn. Therefore, neither pregnancy nor lactation should be considered a contraindication to vaccination of women."

However, if you are pregnant, breast feeding, or planning pregnancy, please consult your physician prior to giving consent.

Questions

If you have any questions about hepatitis B or hepatitis B vaccine, please ask us now or call your doctor or health department before you sign this form.

Reactions

If you get sick and visit a doctor, hospital or clinic during the 4 weeks after receiving the vaccine, please report it to your school nurse.