## Mandatory Hepatitis B Vaccine Declination Authorization

MONTGOMERY<br>Maryland<br>CLEAR FORM

## CONFIDENTIAL

Systemwide Safety Programs
MONTGOMERY COUNTY PUBLIC SCHOOLS (MCPS)
Rockville, Maryland 20850

## INSTRUCTIONS

Complete this form and send one copy to Systemwide Safety Programs and one copy to the Employee and Retiree Service Center (ERSC).
Note: All medical records shall be kept confidential and may not be disclosed or reported without the employee's expressed written consent to any person within or without the workplace except as required by law, but may be reviewed and copied by the employee who is the subject of the file. Questions regarding the Bloodborne Pathogens program may be directed to Systemwide Safety Programs, 240-740-7710.

## DECLINATION STATEMENT

I understand that due to my potential 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 series at no charge to me.


DISTRIBUTION: COPY 1/Systemwide Safety Programs; COPY 2/ERSC; COPY 3/Retain by employee

