



***Thank you for volunteering at the Oklahoma Mission of Mercy!
Please check one of the below and complete and sign the bottom portion.***

I understand that due to my occupational exposure to blood or other potentially infectious materials during my participation in the Oklahoma Mission of Mercy, I may be at risk of acquiring hepatitis B virus (HBV) infection.

_____ I certify that I have received the series of three (3) hepatitis B vaccination shots (copy of vaccination record attached).

_____ I certify that I have received the series of three (3) hepatitis B vaccination shots but do not have a copy of my vaccination record with me. Since I have no written proof of receiving the hepatitis B vaccination shots to give to the Oklahoma Mission of Mercy, I consent to help with patient treatment during this event and understand that there is a potential for me to be exposed to blood or other potentially infectious materials and that I may be at risk of acquiring hepatitis B virus (HBV) infection during this event and waive any rights or claims against the Oklahoma Mission of Mercy should I acquire hepatitis B virus (HBV) during this event.

_____ I have not had the hepatitis B vaccination and I decline hepatitis B vaccination. I understand that by not receiving this vaccine, I am at risk of acquiring hepatitis B, a serious disease. I consent to help with patient treatment during this event and understand that there is a potential for me to be exposed to blood or other potentially infectious materials and that I may be at risk of acquiring hepatitis B virus (HBV) infection during this event and waive any rights or claims against the Oklahoma Mission of Mercy should I acquire hepatitis B virus (HBV) during this event.

Full Name: _____

Signature: _____ Date: _____

PLEASE BE INFORMED

PLEASE CONSULT YOUR PHYSICIAN CONCERNING YOUR HBV TITER LEVELS. RESEARCH HAS SHOWN THAT AFTER EXTENDED TIME PERIOD, THE TITER LEVELS FOR THE EFFECTIVENES OF YOUR HBV VACCINE MAY NEED TO BE TOO LOW AND THE VACCINE MAY NEED TO BE READMINISTERED.

HBV Consent Form

January 15, 2014