Hepatitis B vaccine declination (mandatory)

Required wording from OSHA's Bloodborne Pathogens Standard, 29 CFR 1910.1030, Appendix A.

I understand that due to my 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.

Employee name (print)

Job title

Employee signature

Date

For the office

Date vaccine was offered

Date of initial assignment to tasks with exposure

Witnessed by (name and title)

Witness signature and date

Keep the signed form with the employee's confidential hepatitis B vaccination records. OSHA requires that medical record, including vaccination status, to be kept for the duration of employment plus 30 years (29 CFR 1910.1030(h)(1)). An employee who declines can still get the vaccine later at no cost while their exposure continues.