Virginia Appalachian Tricologne Nursing Program

Information About Hepatitis B Vaccine

The Disease
Hepatitis B is a viral infection caused by Hepatitis B virus (HBV), which causes death in 1-2% of patients. Most people with Hepatitis B recover completely, but approximately 5-10% become chronic carriers of the virus. Most of these people have no symptoms, but can continue to transmit the disease to others. HBV also appears to be a causative factor in the development of liver cancer. Thus, immunization against Hepatitis B can prevent acute hepatitis and also reduce sickness and death from chronic active hepatitis, cirrhosis and liver cancer.

The Vaccine
Recombivax (Hepatitis B vaccine) is a non-infectious subunit viral vaccine derived from Hepatitis B surface antigen (HBSAG) produced from yeast cells. The vaccine is purified by a series of physical and chemical methods and is free of association with human blood or blood products.

The vaccine stimulates active immunity against HB and provides over 90% protection against Hepatitis B for seven (7) or more years following vaccination. Persons with immune-system abnormalities, such as dialysis patients, have less response to the vaccine, but over half of those receiving it develop antibodies.

Full immunization requires 3 doses of the vaccine over a 6 month period although some people may not develop immunity even after 3 doses. There is no evidence that the vaccine has ever cause Hepatitis B. However, persons who have been infected prior to receiving the vaccine may go on to develop clinical hepatitis in spite of immunization. The duration of immunity is unknown at this time. A booster dose may be recommended in 5 years.

Possible Vaccine Side Effects
The incidence of side effects is low. No serious side effects have been reported with the vaccine. A few persons experience tenderness and redness at the site of the injections. Low grade fever may occur. Rash, nausea, joint pain and mild fatigue have also been reported. The possibility exists that more serious side effects may be identified with more extensive use.

If you have any questions about Hepatitis B or the Hepatitis B vaccine, please ask.

HEPATITIS B VACCINE DECLINATION
The Virginia Tricologne Nursing Program requires that all students either be inoculated with the Hepatitis B vaccine or sign a waiver stating their refusal to have this inoculation, prior to participating in clinical nursing courses. I have read and understand information provided about the Hepatitis B vaccine.

I understand that due to my potential exposure to blood or other potentially infectious materials I may be at risk of acquiring Hepatitis B virus (HBV) infection. 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. I also realize in declining, that I relieve Virginia Appalachian Tricologne Nursing Program and each clinical facility to which I may be assigned of all responsibility should I acquire Hepatitis B while I am enrolled in the Nursing Program.

I hereby consent to release of this document to any clinical agency that may request it in connection with my nursing training. No further release will be made without my comment. I certify that I am at least eighteen years of age (if less than eighteen years of age, Parent or Guardian must sign).

Please Return Form To:
Virginia Appalachian Tricologne Nursing Program
Virginia Highlands Community College
PO Box 828
Abingdon, VA 24212

Student/Parent/Guardian Signature  Date

Witness  Date