

HEPATITIS VACCINATION REQUEST

Certain employees of the University of Idaho (UI) may be at risk of exposure to Hepatitis A and/or B virus, due to the nature of their job. In compliance with the UI Medical Surveillance and/or Bloodborne Pathogen policies, vaccination is offered to the employee at departmental expense.

Please complete this form and provide a copy to UI Environmental Health & Safety (EHS) at the beginning of the process to discuss which vaccination series is recommended. Upon completing the vaccination series, please forward this completed form to EHS.

To initiate the process, call North Central District Health Department (NCDHD) at 882-7506 to schedule the first appointment. Take this form with you to all vaccination series appointments. NCDHD will contact you by mailing a "reminder card" for you to call them to schedule an appointment for the next shot due.

Employee Name (print): _____

Employee Signature: _____ Date: _____

Mailing address: _____

Contact Phone: _____ Birth Date: _____

Department: _____ Job Title: _____

Budget # or person to ask: _____

Hep A (2 series)

1st Date: _____ Clinic Signature: _____

2nd Date: _____ Clinic Signature: _____

Hep B (3 series)

1st Date: _____ Clinic Signature: _____

2nd Date: _____ Clinic Signature: _____

3rd Date: _____ Clinic Signature: _____

Hep A/B Combo (3 series)

1st Date: _____ Clinic Signature: _____

2nd Date: _____ Clinic Signature: _____

3rd Date: _____ Clinic Signature: _____

EHS Reviewed by: _____ Date: _____