

	Lower Providence Emergency Medical Service Standard Operating Guidelines	
	Subject: <i>Infection Control</i> – Informed Consent Waiver (HAV) Vaccination	SOG #300-001E
	Approved: Chief Christopher J. Reynolds	Initiated: January 2022 Revised: N/A

Informed Consent for Hepatitis A (HAV) Vaccination

I have attended an education session on Hepatitis A. The session included information regarding the Hepatitis A vaccine, and I understand the risks and the benefits associated with receiving the series of three injections. I furthermore understand that after the initial dose, I need to return to the designated Occupational Health Office to receive my second and third dose. I understand that after my final dose I will need to have a blood test to confirm that my body has developed immunity to the virus.

Member Name : _____

Date: _____

Member Signature: _____

