Hepatitis B is a virus that can be spread by contact with infected blood and other body fluids. Students who are in health occupation programs that have direct patient contact are at risk of getting infected with Hepatitis B. People who are infected with the Hepatitis B virus can become very sick, develop liver disease, liver cancer, and die from Hepatitis B infection. Some people become chronic carriers, meaning they can pass the virus to others forever.

Additional information about Hepatitis B can be found at [www.tdh.state.tx.us](http://www.tdh.state.tx.us).

If you are not already infected with the Hepatitis B virus, becoming infected is completely preventable. Completing a series of three (3) Hepatitis B immunizations may prevent you from getting the virus from an infected person. The injections may be obtained from your physician’s office, the local health department, or Texas Department of Health regional clinics.

Failure to obtain the immunizations prior to contact with patients who may have Hepatitis B may result in you getting infected with Hepatitis B. You are strongly advised to complete the series of Hepatitis B immunizations prior to direct patient contact as now required by the health occupation program. The series of injections will require 4 to 6 months. If you have not completed the series of Hepatitis B immunizations and will not complete them prior to direct patient care, you may withdraw from the health occupations program within the next five calendar days and receive a refund.

**WE STRONGLY RECOMMEND THAT YOU CONSULT WITH YOUR PHYSICIAN OR HEALTH CARE PROVIDER FOR ADVICE ON HEPATITIS B RISKS AND HEPATITIS B IMMUNIZATIONS.**

Initial Each Below

I understand that direct patient contact is part of this clinical health occupations program and I may be exposed to blood or other potentially infectious materials and I am at risk of Hepatitis B virus (HBV) infection.

I understand if infected, I can become very sick, develop liver disease, liver cancer, and die from Hepatitis B infection. I also may become a chronic carrier, meaning I can pass the Hepatitis B virus to others forever.

I understand that a completed series of Hepatitis B immunizations is required by the health occupation program that includes direct patient care, unless I meet an exception under the law.

I, on behalf of myself, my heirs and assigns hereby voluntarily agree to release, discharge, indemnify and hold harmless Lone Star College System, its colleges, affiliates, directors, officers, faculty, employees, and agents from any and all costs, liabilities, expenses, claims, demands, or causes of action on account of any loss or personal injury that might directly or indirectly result from me, my family, and friends being infected or exposed to Hepatitis B.

Printed name

Signature  Date