

NON-RESPONDER WAIVER - HEPATITIS B

A vaccine non-responder is someone who does not build an adequate immune response after receiving two complete Hepatitis B series, and 2 negative titers. If you are a non-responder, please complete this form with your provider and submit to Medcat for compliance.

STUDENT NAME: _____ **PROGRAM:** _____

DATE OF BIRTH: _____ **STUDENT ID:** _____

Dates of **first** Hepatitis B vaccination series:

1ST dose: _____

2nd dose: _____

3rd dose: _____

Quantitative results of 1st Hepatitis B antibody titer _____ mIU/mL

Date: _____

Dates of **second** Hepatitis B vaccination series:

1ST dose: _____

2nd dose: _____

3rd dose: _____

Quantitative results of 2nd Hepatitis B antibody titer _____ mIU/mL

Date: _____

Visit with licensed healthcare provider for counseling and the need to obtain Hepatitis B Immunoglobulin in the event of exposure.

PROVIDER SIGNATURE: _____ **DATE:** _____