

Port Jeff Medical Care



The Harbor of Good Health

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PATIENT NAME: _____

SS#: _____

HEPATITIS B VACCINE

WHAT YOU NEED TO KNOW

1. Why get vaccinated?

Hepatitis B is a serious disease. The hepatitis B virus (HBV) can cause short-term (acute) illness that leads to: • loss of appetite • diarrhea and vomiting • tiredness • jaundice (yellow skin or eyes)

• pain in muscles, joints, and stomach.

It can also cause long-term (chronic) illness that leads to:

• liver damage (cirrhosis) • liver cancer • death

About 1.25 million people in the U.S. have chronic HBV infection. Each year it is estimated that: 80,000 people, mostly young adults, get infected with HBV. More than 11,000 people have to stay in the hospital because of hepatitis B. About 4,000 to 5,000 people die from chronic hepatitis B.

Hepatitis B vaccine can prevent hepatitis B. It is the first anti-cancer vaccine because it can prevent a form of liver cancer.

2. How is hepatitis B virus spread

Hepatitis B virus is spread through contact with the blood and body fluids of an infected person. A person can get infected in several ways, such as having unprotected sex with an infected person, by sharing needles when injecting illegal drugs, by being stuck with a used needle on the job, during birth when the virus passes from an infected mother to her baby. About 1/3 of people who are infected with hepatitis B in the United States don't know how they got it..

3. Who should get hepatitis B vaccine and when?

1) Everyone 18 years of age and younger

2) Adults over 18 who are at risk

Adults at risk for HBV infection include:

- people who have more than one sex partner in 6 months

- men who have sex with other men

- sex contacts of infected people

- people who inject illegal drugs

- health care and public safety workers who might be exposed to infected blood or body fluids

- household contacts of persons with chronic HBV infection
- hemodialysis patients

If you are not sure whether you are at risk, ask your doctor or nurse.

People should get 3 doses of hepatitis B vaccine according to the following schedule. *If you miss a dose or get behind schedule, get the next dose as soon as you can. There is no need to start over.*

WHO

HEPATITIS B VACCINATION SCHEDULE	Infants whose mother is infected with HBV	Infants whose mother <i>is not</i> infected with HBV	Older child, adolescent or adult
First Dose	Within 12 hrs of birth	Birth to 2 months	Any time
Second Dose	1-2 months of age	1-4 months of age (at least 1 month after first dose)	1-2 months after first dose
Third Dose	6 months of age	6-18 months of age	4-6 months after first dose

- The second dose must be given at least 1 month after the first dose.

- The third dose must be given at least 2 months after the second dose and at least 4 months after the first.

- The third dose should *not* be given to infants under 6 months of age, because this could reduce long-term protection.

Adolescents 11 to 15 years of age may need only two doses of hepatitis B vaccine, separated by 4-6 months. Ask your health care provider for details. Hepatitis B vaccine may be given at the same time as other vaccines.

4. *Some people should not get hepatitis B vaccine or should wait.*

People should not get hepatitis B vaccine if they have ever had a life-threatening allergic reaction to **baker's yeast** (the kind used for making bread) or to **a previous dose of hepatitis B vaccine**. People who are moderately or severely ill at the time the shot is scheduled should usually wait until they recover before getting hepatitis B vaccine. Ask your doctor or nurse for more information.

5. *What are the risks from hepatitis B vaccine?*

A vaccine, like any medicine, is capable of causing serious problems, such as severe allergic reactions. The risk of hepatitis B vaccine causing serious harm, or death, is extremely small. Getting hepatitis B vaccine is much safer than getting hepatitis B disease. Most people who get hepatitis B vaccine do not have any problems with it.

Mild problems

- soreness where the shot was given, lasting a day or two (up to 1 out of 11 children and adolescents, and about 1 out of 4 adults)
- mild to moderate fever (up to 1 out of 14 children and adolescents and 1 out of 100 adults)

Severe problems

- serious allergic reaction (very rare) reactions are extremely rare with any vaccine. If one were to occur, it would be within a few minutes to a few hours after the shot. Signs can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

6. *What if there is a moderate or severe reaction?*

What should I look for?

Any unusual condition, such as a serious allergic reaction, high fever or unusual behavior. Serious allergic.

What should I do?

- Call a doctor or get the person to a doctor right away.
- Tell your doctor what happened, the date and time it happened, and when the vaccination was given.
- Ask your doctor, nurse, or health department to file a Vaccine Adverse Event Reporting System (VAERS) form. Or call VAERS yourself at **1-800-822-7967** or visit their website at **<http://www.vaers.org>**.

7. The National Vaccine Injury Compensation Program

In the rare event that you or your child has a serious reaction to a vaccine, a federal program has been created to help you pay for the care of those who have been harmed. For details about the National Vaccine Injury Compensation Program, call **1-800-338-2382** or visit the program's website at **<http://www.hrsa.gov/osp/vicp>**.

8 How can I learn more?

- Ask your doctor or nurse. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department's immunization program.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call **1-800-232-2522** or **1-888-443-7232** (English)
 - Call **1-800-232-0233** (Español)
 - Visit the National Immunization Program's website at **<http://www.cdc.gov/nip>** or CDC's Division of Viral Hepatitis website at **<http://www.cdc.gov/hepatitis>**

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Disease Control and Prevention

National Immunization Program

Vaccine Information Statement

Hepatitis B (7/11/01) 42 U.S.C. § 300aa-26

CONSENT

I have reviewed the information above with the patient. If there are any questions or problems, the patient can call us at (631) 642-1100 Monday-Friday from 9AM-5PM.

LeeAnn Terranova, LPN

Nancy Diaz, LPN

Christina Foster, LPN

Dr. _____

Vaccine Given: Rt Lt Deltoid Thigh Buttock

Date: