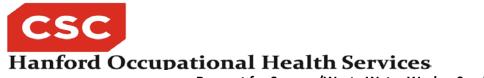


**Definition:** This service provides a voluntary hepatitis A vaccine to workers who are identified by their management, industrial hygiene or safety departments as having the potential of coming into contact with sewage through failure of transmission lines or equipment repairs in pits or in shop areas. Participation by the worker is voluntary.

**Process for Scheduling:** The employee's industrial hygienist/manager completes and signs the "Request for Sewage/Waste Water Worker Services" form (attached) and obtains the employee's signature on the form. The IH mails or faxes the form to CSC HOHS medical scheduling. After receiving the signed form CSC HOHS scheduling will schedule the worker for the Sewage worker service and the letter from the employer will be maintained in the worker's medical chart.

This is not a medical surveillance program and there is no exam or medical clearance associated with this service. Workers receive only the Hepatitis A vaccine. Workers will not receive a Hepatitis B vaccine. Hepatitis B vaccine is offered to workers who have completed Bloodborne Pathogen Training and are enrolled via the EJTA into the Bloodborne Pathogen medical program. The employer must obtain the employee's signature that they want the Hepatitis A vaccine before sending the form to CSC HOHS.



## Request for Sewage/Waste Water Worker Services

## Complete this form, obtain signatures and send Attention: Medical Scheduling via plant mail to G3-70, or fax to 376-4021

Employee Name:	HID:	
	Prime	
Employer:	Contractor:	

The employee named above is a sewage/waste water worker who has the potential of coming into contact with sewage through failure of transmission lines or equipment repairs in pits or in shop areas. I have explained to the worker that the Hepatitis A vaccine for sewage/waste water workers is voluntary.				
Authorizing IH/Mgr Name:	Ca	omp Id:		
Authorizing IH/Mgr Signature:	n	ate:		

I am a sewage/waste water worker and wish to receive the Hepatitis A vaccine. I have read and understand the Sewage/*Waste Water Worker Informational Guide*. I understand the Hepatitis A vaccination is voluntary. I understand that this only authorizes the Hepatitis A vaccination.

Worker		
Signature:	Date:	

Mail or Fax to CSC HOHS Medical Scheduling MSIN: G3-70 Fax: (509)376-4021