Dear Staff:

In this packet you will find information regarding the Hepatitis B Vaccination Series that is offered to you upon hire by the Tomahawk School District. Please read over the information regarding the vaccination series. If you have, any questions please call me at 715-453-2126 ext 106. Also note that I do need the Acceptance/Declination sheet returned to me if you are declining the vaccination series or if you have had the series in the past. Please include the dates of your vaccination series on the following form if they are available to you.

If you would like to receive the series please notify your local pharmacy or care provider and the cost of the vaccinations will either be covered by your insurance or the Tomahawk School District.

If you have declined the series for any reason in the past and change your mind at a later date, the attached information can be found on our Tomahawk School District Webpage. Select District<Human Resources<Staff Hep B Info.

Thank you,
Trina Armstrong RN BSN
Tomahawk School District Nurse



SCHOOL DISTRICT OF TOMAHAWK

HEPATITIS B IMMUNIZATION ACCEPTANCE / DECLINATION RECORD

I have been trained and understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring infection by the Hepatitis B Virus (HBV). The Xxxx and/or its appointed Program Administrator has offered me the Hepatitis B vaccination series at no charge.

(please	check one of the options listed below)
	I do not wish to receive the Hepatitis B Vaccination Series. I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring the Hepatitis B Virus (HBV). I have been given the opportunity to be vaccinated with the Hepatitis B vaccine, at no charge to myself. I understand that by declining this vaccine, I may continue to be at risk of acquiring Hepatitis B. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and want to be vaccinated with Hepatitis B vaccine, I can receive that vaccination at no charge to me.
	I have already received the Hepatitis B Vaccination.
	I do wish to receive the Hepatitis B Vaccination Series. The Program Administrator will contact me regarding the time and place to receive the vaccinations.
NAME:	
	(Please Print)
BUILDI	NG/LOCATION:
HOME !	PHONE NUMBER:
CICNAT	TIDE .

Hepatitis B & C Fact Sheet

Hepatitis B						
	Attacks the liver (Hepatitis means "inflammation of the liver") Symptoms can be none to flu-like 300,000 new cases each year Can take 2-6 months for the virus to develop after exposure 6-10% can become carriers of the disease HBV can survive outside the body for a minimum of 7-14 days under ideal circumstances (Documented cases of up to 6 months) Not food borne Vaccine is available (up to 96% effective) Vaccine taken in a 3-shot series					
	□ 1 st shot right away					
	2 2nd shot 1 month later					
	□ 3 rd shot 6 months later					
	As far as research shows once a person has accepted the vaccine into their immune system it is good for life (no boosters)					
	A post-exposure shot does exist (HBIG) and it is up to 90% effective if received					
355-45	within 24 hours of exposure					
Н	epatitis C					
	Also attacks the liver					
	No vaccine, only prevention					
	Discovered in 1989					
	Symptoms same as Hepatitis B					
	3.9 million cases in U.S. making it the most common chronic bloodborne pathogen infection in the U.S.					
	HCV can be detected within 1-2 weeks after being infected with the virus					
	hose at risk include anyone who had a blood transfusion prior to 1992,					
1-10-000	intravenous drug users, those performing unprotected sexual practices, and in					
	some cases recipients of kidney transplants.					
	is not spread by food or water					
	Accounts for 40-60% of liver disease					
	Out of every 100 persons infected with HCV about:					
	85 persons may develop long-term infection					
	70 persons may develop chronic liver disease					
	15 persons may develop cirrhosis over a period of 20-30 years and					
	5 persons may die from the consequences of long term infection (cirrhosis)					
	Experimental treatments do exist Interferon (Effective in 10-20% of those treated)					
	□ Interferon (Effective in 10-20% of those treated) □ Interferon with Ribavirin (Effective in 30-40% of those treated)					
	Ribavirin alone is not effective in treating HCV					
	NOTE: Many side effects exist in conjunction with both of these treatments					

HEPATITIS B VACCINE

WHAT YOU NEED TO KNOW

3

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
- 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.

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:

- · by 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.

Hepatitis B

7/11/2001

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.

Hepatitis B Vaccination Schedule		WHO?			
		Infant whose mother is infected with HBV	Infant whose mother is <i>not</i> infected with HBV	Older child, adolescent, or adult	
W	First Dose	Within 12 hours of birth	Birth - 2 months of age	Any time	
ZHH	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.



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.



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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)



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

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.

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.

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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/bhpr/vicp

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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

Policy Manual

Section

3000 Professional Staff

Title

PHYSICAL EXAMINATION

Code

po3160

Status

Active

Adopted

December 8, 2015

Last Revised

December 11, 2018

3160 - PHYSICAL EXAMINATION

The Board requires any candidate who has been offered employment, as a condition of employment, to submit to an examination, including a test for tuberculosis, in order to determine the physical capacity to perform assigned duties. Such examinations shall be done in accordance with 118.25 Wis. Stats., the District Administrator's guidelines, and applicable law./or the terms of the collective bargaining agreement.

The Board shall also require the candidate, based on a contingent job offer, to submit to a test for controlled substances the results of which must indicate there is no evidence of unlawful non-prescribed drug use. Such examinations shall be done in accordance with the District Administrator's guidelines and applicable law.

Employees will be notified of the results of the medical examination upon receipt. Any and all reports of such examination will be maintained in a separate confidential personnel file in accordance with the Americans with Disabilities Act, as amended ("ADA") and the Genetic Information Nondiscrimination Act (GINA).

In the event of a report of a condition that could influence job performance of the District Administrator the Board President shall base a nonemployment recommendation to the Board upon a conference with the examining physician and substantiation that the condition is directly correlated to defined job responsibilities and reasonable accommodation will not allow the employee or prospective employee to adequately fulfill those responsibilities. Freedom from tuberculosis in a communicable form is a condition of employment.

In the event of a report of a condition that could influence job performance of an employee other than the District Administrator, the District Administrator shall base a non-employment recommendation to the Board upon a conference with the examining physician and substantiation that the condition is directly correlated to defined job responsibilities and reasonable accommodation will not allow the employee or prospective employee to adequately fulfill those responsibilities.

Freedom from tuberculosis in a communicable form is a condition of employment.

The Board shall assume the fees for examinations.

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118.25, Wis. Stats.

118.25(2)(a), Wis. Stats.

121.52(b), Wis. Stats.

29 C.F.R., Part 1630

29 C.F.R. Part 1635

42 U.S.C. 12101 et seq. Americans with Disabilities Act of 1990, as amended

42 U.S.C. 2000ff et seq., The Genetic Information Nondiscrimination Act

Policy Manual

Section 4000 Support Staff

Title PHYSICAL EXAMINATION

Code po4160

Status Active

Adopted December 8, 2015

Last Revised December 11, 2018

4160 - PHYSICAL EXAMINATION

The Board requires any candidate for positions in which the employee will come in contact with children or prepare food, as a condition of employment, to submit to an examination, including a tuberculosis screening questionnaire, subject to further tests, in order to determine the physical capacity to perform assigned duties. Such examinations shall be done in accordance with 118.25 Wis. Stats., the District Administrator's guidelines, and/or the terms of the collective bargaining agreement.

Employees will be required to execute a release that complies with the requirements of the Health Insurance Portability and Accountability Act in order to allow the report of the medical examination to be released to the Board/District Administrator and to allow the District Administrator or his/her designee to speak to the health care provider who conducted the medical examination in order to get clarification

Reports of all such examinations or evaluations shall be delivered to the District Administrator, who shall protect their confidentiality. Reports will be discussed with the employee or candidate. In compliance with the Genetic Information Nondiscrimination Act (GINA) and Board Policy 4122.02, the successful candidate who is required to submit to a medical examination, as well as the medical health care provider that is designated by the Board to conduct the examination, are directed not to collect genetic information or provide any genetic information, including the candidate's family medical history, in the report of the medical examination.

Employees will be notified of the results of the medical examination upon receipt. Any and all reports of such examination will be maintained in a separate confidential personnel file in accordance with the Americans with Disabilities Act, as amended ("ADA") and the Genetic Information Nondiscrimination Act (GINA).

In the event of a report of a condition that could influence job performance of the the District Administrator , the Board President shall base a nonemployment recommendation to the Board upon a conference with the examining physician and substantiation that the condition is directly correlated to defined job responsibilities and reasonable accommodation will not allow the employee or prospective employee to adequately fulfill those responsibilities. Freedom from tuberculosis in a communicable form is a condition of employment.

In the event of a report of a condition that could influence job performance of an employee other than the District Administrator, the District Administrator shall base a non-employment recommendation to the Board upon a conference with the examining physician and substantiation that the condition is directly correlated to defined job responsibilities and reasonable accommodation will not allow the employee or prospective employee to adequately fulfill those responsibilities.

Freedom from tuberculosis in a communicable form is a condition of employment.

The Board shall assume any fees for required examinations.

Revised 2/13/18

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Policy Manual

Section

8000 Operations

Title

PREPAREDNESS FOR TOXIC HAZARDS

Code

po8431

Status

Active

Adopted

December 8, 2015

8431 - PREPAREDNESS FOR TOXIC HAZARDS

The Board of Education is concerned for the safety of the students and staff members and will attempt to comply with all Federal and State statutes and regulations to protect them from hazards that may result from industrial accidents beyond the control of school officials.

TOXIC HAZARDS

These hazards exist in chemicals, pesticides, and other substances used in the school setting such as in laboratories, science classrooms, kitchens, and in the cleaning of rooms and equipment.

The Board will appoint an employee to serve as Toxic Hazard Preparedness (THP) Officer.

In fulfilling these responsibilities, the THP Officer may enlist the aid of county and municipal authorities and, if possible, the owners or operators of identified potential sources of toxic hazard.

Nothing in this policy should be construed in any way as an assumption of liability by the Board for any death, injury, or illness that is the consequence of an accident or equipment failure or negligent or deliberate act beyond the control of the Board or its officers and employees.

The District will comply with any lead-screening requirements promulgated by the Department of Health and Social Services.

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101.58 et seq, 254.162, 254.20, Wis. Stats.

15 U.S.C. 2601 20 U.S.C. 4022 20 U.S.C. 4014 20 U.S.C. 4011

20 U.S.C. 4011 et seq.

Last Modified by Robin Dosser on December 20, 2016

Book Policy Manual

Section 8000 Operations

Title CONTROL OF CASUAL-CONTACT COMMUNICABLE DISEASES

Code po8450

Status Active

Adopted December 8, 2015

8450 - CONTROL OF CASUAL-CONTACT COMMUNICABLE DISEASES

The Board of Education recognizes that control of the spread of communicable disease spread through casual-contact is essential to the well-being of the school community and to the efficient District operation.

For purposes of this policy, "casual-contact communicable disease" shall include diphtheria, scarlet fever and other strep infections, whooping cough, mumps, measles, rubella, and others designated by the Wisconsin Department of Health Services (hereinafter referred to as DHS).

In order to protect the health and safety of the students, District personnel, and the community at large, the Board shall follow all State statutes and Health Department regulations which pertain to immunization and other means for controlling casual-contact communicable disease spread through normal interaction in the school setting.

If a student exhibits symptoms of a communicable disease, the principal will isolate the student in the building and contact the parents/guardians. Protocols established by the Wisconsin Department of Health Services (hereinafter referred to as DHS) shall be followed.

The District Administrator shall develop administrative guidelines for the control of communicable disease that shall include:

- A. instruction of professional staff members in the detection of these common diseases and measures for their prevention and control;
- B. removal of students from District property to the care of a responsible adult;
- C. preparation of standards for the readmission of students who have recovered from casual-contact communicable diseases;
- D. filing of reports as required by statute and the DHS.

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Legal 252.19, 252.21, Wis. Stats.

Last Modified by Robin Dosser on December 20, 2016

Policy Manual

Section

8000 Operations

Title

DIRECT CONTACT COMMUNICABLE DISEASES

Code

po8453

Status

Active

Adopted

December 8, 2015

8453 - DIRECT CONTACT COMMUNICABLE DISEASES

The Board of Education seeks to provide a safe educational environment for students and staff. To this end, students and staff should understand the method of transmission and prevention of diseases that are contracted through direct contact with body fluids and excretions, especially blood, vomit, feces, or urine. The Board is also committed to assuring, to the extent permitted by State communicable disease reporting requirements, the confidential status of individuals who may have been diagnosed with a contact communicable disease.

For purposes of this policy, these diseases shall include:

- A. HIV (human immunodeficiency virus);
- B. AIDS (acquired immune deficiency syndrome);
- C. AIDS related complex (condition);
- D. HAV, HBV, HCV (Hepatitis A, B, C);
- E. other diseases that may be specified by the Wisconsin Department of Health Services (DHS) as contact communicable diseases.

The Board recognizes that individuals who have contracted these diseases may not exhibit symptoms for many years after exposure and may, in fact, not be aware that they have contracted the disease. They are, however, able to transmit the disease to other individuals.

With this in mind, the Board directs the District Administrator to develop programs for students and staff for the purpose of understanding the manner in which these diseases may be prevented and how they are transmitted. These programs should specify the risk factors involved, how to deal with those risks, and emphasize the fact that these diseases are preventable if basic precautions are taken.

The Board further directs the District Administrator to assure that students or staff who reveal the fact they have contracted one of these diseases will have their status safeguarded in accordance with Federal and State statutes dealing with confidentiality, their right to privacy and that their civil rights will be respected. Staff members will have access to District leave policies in accordance with Board policy and any applicable collective bargaining agreement, such individuals will also be provided reasonable accommodation as required by the Wisconsin Fair Employment Act and the Americans with Disabilities Act. Should a student be unable to attend school as a result of illness, an alternative education program shall be provided in accordance with the Board's policy and administrative guidelines dealing with Homebound Instruction.

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252.21, Wis. Stats.

Policy Manual

Section

8000 Operations

Title

CONTROL OF BLOOD-BORNE PATHOGENS

Code

po8453.01

Status

Active

Adopted

December 8, 2015

8453,01 - CONTROL OF BLOOD-BORNE PATHOGENS

The Board of Education seeks to protect those staff members who may be exposed to blood pathogens and other potentially infectious materials in their performance of assigned duties.

The District Administrator shall implement administrative guidelines which will:

- A. identify those categories of employees whose duties create a reasonable anticipation of exposure to blood and other infectious materials;
- B. provide for inoculation of the Hepatitis B vaccine at no cost to the staff member and in accordance with Federally-mandated scheduling;
- C. ensure proper training in the universal precautions against exposure and/or contamination including the provision of appropriate protective supplies and equipment;
- D. establish appropriate procedures for the reporting, evaluation, and follow- up to any and all incidents of exposure;
- E. provide for record-keeping of all of the above which complies with both Federal and State laws;
- F. develop an exposure control plan.

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29 C.F.R. 1910.1030

Last Modified by Robin Dosser on December 20, 2016