I. PURPOSE

To provide a sustainable, healthy and safe working environment for UCSF research laboratory staff, and animal research care staff and to prevent illness when conducting research on Hepatitis B and Hepatitis C.

II. REFERENCES

UCSF Communicable Disease Surveillance and Vaccination Policy

III. DEFINITIONS

Staff: All UCSF employees, faculty, temporary workers, trainees, volunteers, students, and vendors, regardless of employer. This includes staff that provide services to or work in a UCSF Research Laboratory or Animal Research Center.

Risk Category 1: applies to staff performing activities with the highest risk of transmission of an infectious agent. These activities usually involve direct and/or prolonged contact with the infectious agent, or have prolonged contact with an animal capable of spreading the infection.

Risk Category 2: applies to staff performing activities with a probable risk of transmission of an infectious agent as a result of the geographic location of their work in a research laboratory or in an animal research center.

IV. POLICY

It is the policy of UCSF that staff in risk category 1 who work with or are exposed to Hepatitis B virus (HBV) and/or Hepatitis C virus (HCV) in a research laboratory, or to animals infected with HBV and/or HCV to participate in the mandatory HBV immunization and HCV Medical Surveillance Program respectively.

It is the policy of UCSF that staff in risk category 2 who work in research laboratory, or in an animal research center where there is probable exposure to HBV, or to animals infected with HBV and/or HCV to participate in an elective HBV immunization.
V. PROCEDURES

1. The Public Health Officer in conjunction with the Biosafety Officer will identify all staff who performs either risk category 1 or risk category 2 activities with respect to HBV or HCV.

2. All research and LARC personnel who are risk category 1 for HBV, working directly with HBV or HBV infected animals, MUST be vaccinated for HBV or provide proof of HBV before starting to work. Any necessary HBV screening will be provided by Occupational Health Services. Information about clinic hours and location can be found on the UCSF Occupational Health Program website: http://www.occupationalhealthprogram.ucsf.edu/.

3. Risk Category 2 will include other laboratory personnel sharing the same ABSL 2 housing and procedural rooms with HBV labs will be offered the HBV vaccination by Occupational Health Services at no cost to the employee. The HBV declination form MUST be completed for those who do not want the vaccine. (Appendix A).

4. Risk category 2 for HBV will also include all non-laboratory personnel entering or working in areas where HBV is used or where HBV infected animals are housed, including LARC, IACUC, EHS and Facilities Management staff, will be offered the HBV vaccination by Occupational Health at no cost to the employee. The HBV declination form MUST be completed for those who do not want the vaccine (Appendix A).

5. All HBV lab and animal housing areas will post a notice informing individuals that HBV and/or HBV infected animals are being used (HBV Work Area Signage).

6. Personnel working in laboratory spaces or animal rooms where HBV is used MUST follow personal protective equipment (PPE) requirements posted for entry into that specified laboratory area.

7. All research laboratory personnel and animal care staff who are risk category 1 for HCV, working directly with HCV or HCV infected animals, MUST obtain a one-time baseline HCV titer test through UCSF Occupational Health Services before starting of work. There is currently no vaccination available for HCV. Any positive HCV antibody test will be followed up with viral load testing, and with advice to seek an assessment with the primary care provider.

8. The Public Health Office can assist with arranging the HBV screening and will be the record of compliance.

9. The Public Health Office will monitor compliance for this policy. It will prepare an annual report to be submitted to the Institutional Biosafety Committee (IBC), the Occupational and Wellness Committee, and the Institutional Animal Care and Use Committee (IACUC).
VI. RESPONSIBILITY

Direct any questions about this policy are to be directed to the Public Health Officer, the Biosafety Officer, or Occupational Health Services.

The contact information for the Public Health Office is as follows:

Stephanie Mar  
Public Health Analyst  
Office of Environmental Health and Safety  
Stephanie.Mar@ucsf.edu  
(415) 514-3531

Krista Lindstrom, DVM, MPH  
Public Health Officer  
Office of Environmental Health and Safety  
Krista.Lindstrom@ucsf.edu  
(415) 476-1722

VII. HISTORY OF POLICY

This policy has been approved by the Institutional Biosafety Committee (IBC) in August 2013. The next date for review will be 2 years from the original approval date.

It has been reviewed by the following:

Biosafety Officer  
Public Health Officer  
Office of Environment Health and Safety  
Occupational Health Services
Appendix A

INFORMATION REGARDING HEPATITIS B EXPOSURE RISKS

HEPATITIS B: Hepatitis B is a viral infection of the liver caused by the hepatitis B virus (HBV). Each year approximately 40,000 new infections occur. Most people who become infected with hepatitis B recover completely, but 5% to 10% will become chronic carriers of the virus. Although many chronic carriers do not have symptoms of the disease, they are capable of transmitting the virus to other persons, primarily through blood exposures and sexual contact. Each year 3,000 persons die from chronic liver disease, cirrhosis or liver cancer.

OCCUPATIONAL EXPOSURE: In the hospital and university setting, health care workers with direct patient contact, laboratory workers and researchers with blood or body fluid contact are at increased risk for acquiring the hepatitis B virus. An unvaccinated individual who receives an accidental blood or body fluid exposure from an infected source has up to a 30% chance of becoming infected with hepatitis B. Each year in the U.S. several hundred health care workers contract hepatitis B and of those, some will die from liver-related disease.

VACCINATION: Becoming infected with hepatitis B is preventable. The hepatitis B vaccine, a synthetic vaccine made from a yeast base, is currently being offered to health care workers and other exposed staff at UCSF at no cost to the employee. Full immunization requires completion of a series of three vaccinations given over a six-month period. Eighty to 90% of healthy people who receive the vaccine develop antibodies that protect them from getting hepatitis B. There is no evidence that the vaccine has ever caused hepatitis B. At this time, it is believed that immunity produced by the vaccine should last at least 20 years; the need for additional vaccinations has not been determined. Health care workers who are immunocompromised or on dialysis might require increased doses of the vaccine in order to convert to positive antibodies. The incidence of side effects from vaccination is very low. A few persons experience tenderness and redness at the injection site. A low-grade fever may occur. Rash, nausea, joint pain and mild fatigue have also been reported.

TREATMENT OF EXPOSURE: If an individual has received the hepatitis B vaccine and has documented antibodies to HBV, no further treatment is necessary at the time of exposure. However, someone who is not protected by the vaccine and does not have antibodies to HBV needs to receive HBIG (Hepatitis B Immunoglobulin) as soon as possible after the exposure. These persons are also encouraged to receive the hepatitis B vaccine at this time.

REPORTING AN EXPOSURE: UCSF has a 24 hour Needlestick Exposure Hotline for anyone who has a blood or body fluid exposure. Anyone with an exposure should call the Needlestick Exposure Hotline (415) 353-7842 (STIC).
If you have any questions about hepatitis B or the hepatitis B vaccine, call UCSF Occupational Health Services at (415) 885-7580.
UCSF OCCUPATIONAL HEALTH SERVICES HEPATITIS B VACCINE VACCINATION OR DECLINATION CONFIRMATION FORM

Last Name: __________________________ First Name: ______________________________

Date of Birth: ____/____/_______ SSN (last four digits) _______________________

Home Phone #: __________________________ Work Phone #: _________________________

Job Title: __________________________ Department: ____________

PLEASE CONSENT TO OPTION 1, 2 OR 3 ONLY

Option 1 Consent to be vaccinated
- I have read the information sheet about hepatitis B and the hepatitis B vaccine.
- I have had an opportunity to ask questions and understand the benefits and risks of hepatitis B vaccination.
- I understand that I must have three doses of vaccine to confer immunity.
- However, as with all medical treatment, there is no guarantee that I will become immune or that I will not experience an adverse side effect from the vaccine. I request that it be given to me.

Signature: __________________________ Date: __________________________

Option 2 History of Vaccination / Immunity
- I have received the hepatitis B vaccine. What year: ______
- Positive blood titer confirmed. Date if known: ____________

Signature: __________________________ Date: __________________________

Option 3 Declination to be vaccinated
I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring hepatitis B (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine at no charge to myself. However, I decline hepatitis B vaccine at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future, I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Please check one of the following:
- I am declining the vaccination for personal reasons.
- I am declining the vaccination due for medical reasons. I have a medical contraindication.

Signature: __________________________ Date: __________________________

Please return completed form to the Public Health Office via email at stephanie.mar@ucsf.edu or by fax at (415) 476 – 0581.