

KANE KESSLER, P.C.
1350 Avenue of the Americas
New York, N.Y. 10019
(212) 541-6222
fax (212) 541-9799
Direct dial (212) 519-5154
drothfeld@kanekessler.com

CONFIDENTIAL ATTORNEY-CLIENT
PRIVILEGED MEMORANDUM

DATE: July 23, 2014

TO: Hotel Association of New York City, Inc.
Labor Relations Members
General Managers, Human Resources Directors and Controllers

FROM: Kane Kessler, P.C.
Labor and Employment Law Department

RE: **OSHA Regulations; Hepatitis B Vaccinations: REMINDER MEMO**

As a result of the responses received to a recent broadcast email inquiry regarding Hepatitis B vaccinations, we felt it would be prudent to remind Hotels of OSHA regulations on the topic of Hepatitis B vaccinations. While OSHA regulations do not explicitly require vaccines for any Hotel employee classification, they nevertheless require employers to provide vaccination if any of their employees have occupational exposure to blood borne pathogens, meaning they have “reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee’s duties.” Instead of listing all operations/worksites where occupational exposure may occur, the regulations leave it to employers to identify which job classifications within their operations have such exposure.

In the context of Hotels, those job classifications may include Room Attendants, Housekeeping Attendants, Linen Chute employees and Security Officers as well as any other classification that might “reasonably anticipate” having occupational exposures. Employees may refuse the vaccinations but are then required to sign a declination statement. We have attached a sample employee consent/refusal form for the Hepatitis B vaccination which you may use for those affected classifications within your Hotel. At the employee’s choice, Hepatitis B vaccinations are also offered and available for eligible employees at the Employee Benefits Funds’ four Health Centers.

If you have any questions, do not hesitate to contact David R. Rothfeld, Judith A. Stoll, Niki J. Franzitta, Lois M. Traub, Alexander Soric or Robert L. Sacks.

cc: Joseph E. Spinnato, Esq.
Geoffrey A. Mills, Chairman

Hepatitis B Immunization Consent/Refusal Form

Please check one:

Yes, I want to receive the Hepatitis B vaccine.

I read the information given to me about Hepatitis B virus and Hepatitis B vaccine and I had the opportunity to ask questions. My questions were answered.

I want to participate in the vaccination program. I understand this includes three injections at prescribed intervals over a 6-month period. I understand that there is no guarantee that I will become immune to Hepatitis B and that I might experience an adverse side effect as the result of the vaccination.

	<u>Date Given</u>	<u>Lot #</u>	<u>Administered By</u>	<u>Next Date Due</u>
1 st Dose				
2 nd Dose				
3 rd Dose				

No, I don't want to receive the Hepatitis B Vaccine.

I understand that due to my occupational exposure to blood or other potentially infectious material, I may be at risk of acquiring Hepatitis B Virus (HBV). I was given the opportunity to be vaccinated with Hepatitis B vaccine at no charge to me. However, I **decline** Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at an increased risk of acquiring Hepatitis B, a serious disease.

If in the future I want to be vaccinated with the Hepatitis B vaccine, I understand that I can receive the vaccine series at no charge to me.

Employee Name

Signature

Date