

**Program Guidance on Hepatitis Vaccination Reporting for MAI-CoC Grantees (as of 4/28/15):**

When submitting the SAMHSA MAI Rapid HIV/HEPATITIS Testing Clinical Form for clients who have decided to complete the hepatitis vaccination series (3 Hepatitis vaccination doses), please be guided by the following instructions:

1) Once the client has received the first Hepatitis vaccination dose, send the HIV and hepatitis testing form to the designated secure resource email mailbox at:

[FY14 CoC BH HIV@samhsa.hhs.gov](mailto:FY14_CoC_BH_HIV@samhsa.hhs.gov)

2) Please be sure to retain a copy of the HIV and Hepatitis testing form you have submitted.

3) Once the same client has received their second Hepatitis vaccination dose, provide an update of the HIV and Hepatitis form and submit the updated form to the same designated secure resource email mailbox at (the testing form should now have the dates for when the client received their 1<sup>st</sup> and 2<sup>nd</sup> Hepatitis vaccination doses): [FY14 CoC BH HIV@samhsa.hhs.gov](mailto:FY14_CoC_BH_HIV@samhsa.hhs.gov)

4) Again, be sure to retain a copy of the updated HIV and Hepatitis testing form that you have submitted.

5) Once the same client has received the third Hepatitis vaccination dose, update the HIV and Hepatitis form and submit the updated form to the same designated secure resource email mailbox at (the testing form should now have the three dates for when the client received their 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> Hepatitis vaccination doses): [FY14 CoC BH HIV@samhsa.hhs.gov](mailto:FY14_CoC_BH_HIV@samhsa.hhs.gov)

**IMPORTANT NOTE:** Please be sure to **maintain the same Client Identification number** when updating the HIV and Hepatitis testing form for a particular client.

For any questions regarding these instructions, please contact your Government Project Officer for assistance.

*Note: The standard Twinrix vaccination schedule (vaccination against Hep A and Hep B) consists of three vaccine doses with the following time schedule:*

*1<sup>st</sup> dose [send form, as above]*

*2<sup>nd</sup> dose (given one month after the 1<sup>st</sup> dose) [send updated form, as above]*

*3<sup>rd</sup> dose (given six months after the 1<sup>st</sup> dose) [send updated form, as above]*