

HEPATITIS RECORD SHEET

Patient label



Hepatitis A

Date	Vaccination	Initials	Date	IgG	IgM

Hepatitis B

Date	Vaccination	Initials	Date	HBsAg *	HBsAb	HBcAb

* If HBsAg positive complete Hepatitis Clinic Sheet

Hepatitis C

Date	HCV Ab	HCV RNA *

* If HCV RNA positive complete Hepatitis Clinic Sheet

ANNUAL CHECK
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