KELTY MEDICAL PRACTICE 80 Main Street KELTY Fife, KY4 0AE Tel. (01383) 831281

| Date: | |
|---|--|
| Dear Employer | |
| Your Employee | Hepatitis B Risk Assessment |
| The above named person presented at my sur they have been advised by you to seek protec nature of his/her employment. | . , |
| Under Health and Safety Regulations, employ working environment. Employers should under protection for employees, including, where need. If an assessment reveals a risk, the employers arrangements with a suitably qualified medical obligations. | rtake a risk assessment and arrange cessary, immunisation against Hepatitis eyer has a duty to act and should make |
| This practice is not aware of the situation and does not have occupational expertise to a therefore, inappropriate for us to proceed we employee to return to you so that you can deathe NHS does not fund Hepatitis immunisation. | advise on the risks involved. It is, ith vaccination and I have asked your all with this appropriately. I should add |
| We would be happy to discuss with you the pronce you have arranged the appropriate risk of | |
| Please do not hesitate to contact us if you ha | ve any questions about this letter. |
| Yours faithfully | |

Kelty Medical Practice