



National Viral Hepatitis Information Center Patient/Professional Education Materials Order Form

You will receive requested materials in approximately 4 weeks.

Patient Education Pamphlets

For Health Professionals ONLY

P1	"Hepatitis C Prevention" (limit 100)	English # _____	H1	Recommendations for Prevention and Control of Hepatitis C Virus (HCV) Infection and HCV-related Chronic Disease (MMWR) (limit 5)	
		Spanish # _____ Russian # _____	H2	Prevention of Hepatitis A Through Active or Passive Immunization (MMWR) (limit 5)	
P2	"Living with Chronic Hepatitis C" (limit 100)	English # _____ Spanish # _____ Russian # _____	H3	Hepatitis C Poster (English limit 20/Spanish limit 3)	English # _____ Spanish # _____
P3	"You may be at risk for hepatitis C if you had a blood transfusion before July 1992" (limit 100 each)	English # _____ Spanish # _____	H4	Recommendations for Preventing Transmission of Infections Among Chronic Hemodialysis Patients (MMWR) (limit 5)	
P4	Prevent Hepatitis A (limit 100)	English # _____ Russian # _____ Spanish # _____	H5	Recommended Infection Control Practices for Hemodialysis Units (poster) (limit 3)	
P5	"Prevent Hepatitis B: Get Vaccinated" (limit 100)	Spanish # _____ English # _____ Russian # _____	H6	National Hepatitis C Prevention Strategy: A Comprehensive Strategy for the Prevention and Control of Hepatitis C Virus and its Consequences (limit 1)	
			H7	Guidelines for Laboratory Testing and Result Reporting of Antibody to Hepatitis C Virus (MMWR) (limit 5)	
			H8	Guidelines for Prevention and Control of Infections with Hepatitis Viruses in Correctional Settings (MMWR) (limit 5)	
P6	"Living with Chronic Hepatitis B" (limit 100)	Spanish # _____ Russian # _____ English # _____	H9	Hepatitis C Patient Info Card (limit 50)	
P7	Hepatitis B and You - Created for pregnant women and new mothers (limit English 250/Spanish 10)	English # _____ Spanish # _____	H10	Prevent STDs Among MSM Poster (limit 10)	
P8	Prevent STDs Poster (limit 5)		H11	Prevent STDs Among MSM Flyer (limit 50)	
			H12	Prevent STDs Among MSM Pocket Card (limit 10)	

There is **no charge** for these materials. Please **PRINT** your address information and fax/mail this form to:

Centers for Disease Control and Prevention - Division of Viral Hepatitis
1600 Clifton Road, NE Mailstop G-37 Atlanta, GA 30333

FAX: (404) 371-5488

Name: _____

Company/Office: _____

Address 1: (e.g. Street/P.O. Box) _____

Address 2: (e.g. Bldg., Apt. #, Suite) _____

City, State, and Zip: _____ Country: _____

Phone Number _____ Fax Number _____ **rev. 10/6/04**

You can also order materials online at: <http://www.cdc.gov/ncidod/diseases/hepatitis/resource/materials.htm>