

Preventing Perinatal Hepatitis B

Guidelines for Delivery Hospitals



AT THE TIME OF ADMISSION

- Review the hepatitis B surface antigen (HBsAg) status of all pregnant women.
- Refer to laboratory report for documentation of hepatitis B status. Accepting results that were not issued by the lab performing the test (e.g. results written on prenatal records) **is not acceptable** because transcription and interpretation errors can occur.
- Perform HBsAg testing immediately upon admission if there is no documentation of HBsAg status.
 Note: Ensure tests ordered include HBsAg. Anti-HBs may also be ordered to check immune status, but is not sufficient to determine if patient is infected.
- Women who test negative in early pregnancy (>6 months before delivery) may need retesting if clinical hepatitis is noted or if they have engaged in behaviors that place them at risk for acquiring hepatitis B infection during pregnancy (e.g. recent intravenous drug use, HBsAg positive sex partner, multiple sex partners, recent treatment for a sexually transmitted disease).

AFTER DELIVERY

Recommended Administration of Birth Dose Hepatitis B Vaccine and Hepatitis B Immunoglobulin (HBIG) to be given within 12 Hours of Birth

Maternal HBsAg [§] status	RECOMMENDATION			
	Infants ≥2,000 grams		Preterm infants <2,000 grams	
	Birth Dose HBV vaccine	HBIG	Birth Dose HBV Vaccine [†]	HBIG
HBsAg positive	✓	✓	✓	✓
HBsAg status unknown or pending	✓	Wait for HBsAg result*	✓	✓
HBsAg negative	✓		✓ at 1 month	

[§] Hepatitis B surface antigen

* May given up to 7 days after birth

[†] Because of potentially decreased immunogenicity of vaccine in preterm infants weighing <2,000 grams, the birth dose vaccine should not be counted as part of the 3 doses received to complete the HBV vaccine series. A total of 4 doses should be given.

- Contact the Santa Clara County Perinatal Hepatitis B Prevention Program **immediately** if hepatitis B vaccination or HBIG are not given within 12 hours of birth for infant born to a HBsAg positive mother for any reason (e.g. family refuses, communication error, etc.).
- Note: If maternal HBsAg status is unknown at time of delivery, HBIG should not be given to infants >2,000 grams until HBsAg result is available and may be given up to 7 days after birth.
- Notify the Santa Clara County Perinatal Hepatitis B Prevention Program of all births to women with positive or unknown HBsAg status by faxing the “Hospital Report” form within 24 hours of delivery to (408) 792-1304.
 Hospital Report form: <https://www.sccgov.org/sites/phd-p/Diseases/hep-b/Pages/delivery.aspx>
- Advise HBsAg positive women that their infants who receive post exposure prophylaxis may be breastfed beginning immediately after birth.

AT HOSPITAL DISCHARGE

- Give infant’s immunization record to mother and remind her to take it to infant’s first pediatrician visit.
- Encourage mother to make sure her infant completes 3 shot hepatitis B vaccination series within 6 months.