

CDC's New Hepatitis B Recommendations Synopsis (12/05)

Recommendations for Prenatal Care Providers

Management of all pregnant women:

- Test all pregnant women for hepatitis B surface antigen (HBsAg) during each pregnancy.
- Transfer a copy of the original laboratory report of the pregnant woman's HBsAg test result to the patient medical record in the delivery hospital.
- Inform pregnant women of the importance of newborn hepatitis B vaccination.
- Vaccinate pregnant women who are at risk for HBV infection.

Management of pregnant women with chronic HBV infection:

- Inform HBsAg-positive women of HBV transmission risks and ways to prevent HBV infection, including the importance of post exposure prophylaxis (PEP) for newborn infants and hepatitis B vaccination of household, sexual, and needle-sharing contacts.
- Refer HBsAg-positive women to an appropriate case-management program to ensure that their newborn infants receive post exposure prophylaxis (PEP) and follow-up. New Mexico Perinatal Hepatitis B Program.
- Provide or refer HBsAg-positive women for appropriate medical management of their chronic HBV infection.

Recommendations for Delivery Hospitals

- Implement standing orders to ensure that, except in rare circumstances, all newborns >2,000 G receive hepatitis B vaccine (birth dose) before hospital discharge.
- Implement policies and procedures to ensure that all infants born to HBsAg status are identified and receive appropriate immunoprophylaxis. These policies and procedures should include the following standing orders:
 - Review HBsAg test results for all pregnant women at the time of admission for labor and delivery.
 - Conduct HBsAg testing as soon as possible after admission for pregnant women who do not have a documented HBsAg result and for pregnant women identified as being at risk for HBV infection during pregnancy (e.g. >1 sex partner in last 6 mos., history of STD's, recent injection-drug use, HBsAg partner).
 - All new HBsAg-positive results are to be reported to the health department.
 - Administer hepatitis B vaccine and hepatitis B immune globulin (HBIG) within 12 hours of birth to all infants born to HBsAg-positive mothers.
 - Document on the infant's medical record the maternal HBsAg test results and the infant's hepatitis B immunization.

Universal Infant Vaccination Beginning at Birth <2,000 G

- Delay first hepatitis B vaccine dose to 1 month after birth or hospital discharge. A copy of mother HBsAg negative status report should be in infant's medical record.
- Infants of HBsAg-positive women or women of unknown HBsAg status should receive both single antigen Hepatitis B vaccine and HBIG within 12 hours of birth.
 - This birth dose of vaccine should not be counted as part of the three doses required to complete the vaccine series.

Recommendations for Neonatal and Pediatric Care Providers

- Ensure all infants of HBsAg-positive and of HBsAg-unknown status mothers receive appropriate, timely post exposure prophylaxis (PEP) and complete follow-up. (i.e. case management).
- Vaccinate all newborns before hospital discharge. If hepatitis B vaccine is not provided before hospital discharge, both a physician's order to withhold the birth dose and a copy of the laboratory report indicating that the mother is HBsAg negative should be documented in the infants medical record.
- Complete hepatitis B vaccine series according to recommended schedule.
- Perform post-vaccination testing for antibodies anti-HBs and HBsAg should be performed after completion of the vaccine series at age 9-18 months.
 - HBsAg-negative infants with anti-HBs levels >10mIU/ml are protected and need no further medical management.
 - All HBsAg negative infants with anti-HBs levels <10mIU/ml should be revaccinated with a second series 3-dose vaccine. Then retested 1-2 months after last dose.

Recommendations for Health Departments

- Ensure all pregnant women are tested for HBsAg at each pregnancy.
- Case management of infants born to HBsAg-positive and HBsAg-unknown status women to ensure.
 - Each infant receives the appropriate Post-Exposure Prophylaxis
 - Completion of the Hepatitis B vaccine series
 - Post-vaccination serology testing for infants of HBsAg positive women
 - Follow-up of household members

This is an abbreviated version of the new CDC guidelines released December 23, 2005. You can obtain the more comprehensive version at www.cdc.gov/mmwr/PDF/rr/rr5416.pdf