

# PREVENTION OF PERINATAL HEPATITIS B TRANSMISSION

TEST ALL PREGNANT WOMEN

HBsAg **POSITIVE** or Unknown Status<sup>1</sup>

Document, report and counsel.<sup>2</sup>

**MOTHER**

**INFANT<sup>1</sup>**

- Positive test results must be referred to Perinatal Hepatitis B Prevention Coordinator at the Vermont Department of Health.
- Birth hospital must also be notified of mother's HBsAg status.

HBsAg **NEGATIVE**

Retest if symptoms of hepatitis appear.

Retest in third trimester if have known exposure to hepatitis B or if engage in high risk behaviors such as multiple sex partners or injection drug use.

- Administer hepatitis B immune globulin (HBIG) and HepB vaccine within 12 hours of birth.
- Complete HepB vaccine series as recommended. Combination vaccines may be used to complete the vaccine series.<sup>3</sup>

Screen infant for HBsAg and anti-HBs at 9-12 months of age. This should be 1-2 months after completing HepB vaccine series.<sup>4</sup>

HBsAg Negative w/  
anti-HBs Positive

Immune

HBsAg Positive w/  
anti-HBs Negative

Infant infected and likely a chronic carrier. Retest in 6 months. Refer to Perinatal Hepatitis B Prevention Coordinator.

Refer infant to pediatric specialist for periodic medical monitoring.

HBsAg Negative w/  
anti-HBs Negative

Not immune

Revaccinate w/ 3 dose series of HepB vaccine.

Test for anti-HBs 1-2 months following revaccination series.

Anti-HBs positive indicates immunity

If anti-HBs negative, document as non-responder

\*Footnotes on reverse side

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## Report All Suspected Hepatitis B to Public Health

Call: 802-863-7240

## Contact the Perinatal Hepatitis B Prevention Coordinator

Call: 802-863-7240

## If you have questions regarding the Perinatal Hepatitis B Prevention Program, please email:

AHS.vdhimmunizationprogram@vermont.gov

## For more information, please visit:

[www.healthvermont.gov](http://www.healthvermont.gov)

<http://www.cdc.gov/hepatitis/hbv/perinatalxmtn.htm>

## FOOTNOTES

1. Infants born to mothers with unknown hepatitis B surface antigen (HBsAg) status should be treated as if the mother is positive.
2. Health care providers are required by law to report diseases of public health importance to the Vermont Department of Health, including Hepatitis B and Hepatitis B, positive surface antigen in a pregnant woman. To report a case, call: 802-863-7240
3. Only the monovalent Hepatitis B vaccine can be given as the birth dose. Prior to 6 weeks of age the use of combination vaccines (Pediarix) for the birth dose can cause the suppression of the immune response of the other vaccine components. Combination vaccines can be used for dose two and dose three of the series.
4. For infants born to HBsAg-positive mothers, post vaccination serology is recommended 1 to 2 months after completion of at least 3 doses of the HepB vaccine series. For a child who received vaccines on schedule, test between age 9 to 12 months. Testing should not be performed before age 9 months, as HBIG might still be present for 6 to 8 months, or within 1 month of the most recent vaccine dose, as a transient false positive HBsAg might occur.