

State of California—Health and Human Services Agency California Department of Public Health

PERINATAL HEPATITIS B POSTEXPOSURE PROPHYLAXIS RECOMMENDATIONS - April 2011

The California Department of Public Health (CDPH) recommends that delivery hospitals implement the following policies and procedures as stated by the Advisory Committee on Immunization Practices (ACIP)¹. Hospitals that do not provide appropriate postexposure prophylaxis (PEP) to infants will be reported to the CDPH Licensing and Certification Division and Joint Commission.

Review mother's HBsAg laboratory report at the time of admission

Review a copy of the mother's HBsAg lab report at the time of hospital admission to ensure
that the correct test was performed during the current pregnancy and that the interpretation of
the results is correct. 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
misinterpretation errors can occur. File a copy of the lab report in both the infant's and the
mother's medical records.

Test mothers with unknown HBsAg status at the time of admission

- Perform HBsAg testing immediately upon admission if there is no documentation of the mother's HBsAg status for the current pregnancy. Instruct the lab to call the labor and delivery unit as soon as results are obtained.
- Women at risk for acquiring hepatitis B infection during pregnancy (more than one sex partner
 in the previous 6 months, evaluation or treatment for a sexually transmitted disease, recent or
 current injection-drug use, or an HBsAg-positive sex partner) should be retested close to the
 time of delivery.

Ensure appropriate administration of hepatitis B vaccine and HBIG

- HBsAg <u>positive</u> mothers: Administer hepatitis B vaccine and HBIG within 12 hours of birth to all infants of HBsAg positive mothers.
- HBsAg unknown status mothers:
 - o Infants weighing **<2 kg** Administer hepatitis B vaccine and HBIG within 12 hours of birth if the mother's HBsAg status is unknown.
 - o Infants weighing ≥2 kg Administer hepatitis B vaccine within 12 hours of birth if the mother's HBsAg status is unknown. If the mother is found to be HBsAg positive, administer HBIG as soon as possible and no later than 7 days after birth. If infant has been discharged when HBsAg positive results are obtained, it is the responsibility of the hospital to recall the infant and to administer HBIG.
- HBsAg <u>negative</u> mothers: Administer hepatitis B vaccine before discharge to all infants weighing **>2 kg** if the mother is HBsAg negative.
- Document administration of hepatitis B vaccine in the infant's immunization record and provide this record to parents.
- Federal law requires providers to give parents a Hepatitis B Vaccine Information Statement (VIS) before vaccine administration. To obtain a VIS, download it from the CDPH website at http://www.cdph.ca.gov/programs/immunize/Pages/VaccineInformationStatements.aspx

Thank you for your efforts to prevent perinatal hepatitis B transmission.

¹CDC. A comprehensive immunization strategy to eliminate transmission of hepatitis B virus infection in the United States: recommendations of the Advisory Committee on Immunization Practices (ACIP). Part 1: immunization of infants, children, and adolescents. *MMWR* 2005:54(RR16). http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5416a1.htm