City of Amarillo Public Health

The Epi Link

Monthly Update and Newsletter

Perinatal Hepatitis B

Infants born to a Hepatitis B Surface Antigen-positive (HBsAg+) mother can get Hepatitis B during delivery, and sometimes in utero. These are quick guidelines for testing and treatment.

About 40% of infants mothers in the US

Hepatitis B infection

Prenatal Provider / OBGYN

- •TEST all pregnant women at first prenatal visit of EACH pregnancy
- Test even if tested before or had hepatitis B vaccine series
- SEND copy of lab reports with the HBsAg results to the planned delivery hospital
- •REPORT to Local Health

 Department all HBsAg-positive

 pregnant women within 1 week of identification
- REFER all HBsAg-positive women for medical management

Of those children infected as early as age 10

Labor and Delivery/Newborn Nursery

- •REVIEW HBsAg status of ALL pregnant women
- •TEST all pregnant women for HBsAg status at delivery
- DOCUMENT maternal HBsAg results in labor/delivery record, delivery summary and infant's medical record.
- •REPORT all HBSAg positive and women of unknown HBsAg status to the Local Health Department
- ADMINISTER HBIG and HBV1
 within 12 hours of birth if
 mother is HBsAg positive or
 unknown

Post-exposure
given within the prophylaxis
of high-risk infants from
eveloping Hep B

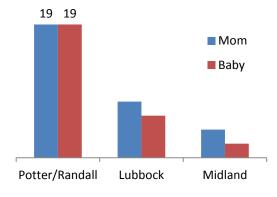
Pediatrician

- +HBIG Administer within 7 days of birth (if not administered at the hospital)
- •3 dose series of Hep B vaccine
- First within 12 hours of birth
- •Second at 1-2 months of age
- •Third at 6-18 months of age
- •Fourth Hep B vaccine needed if preterm infant <2,000g (4.4 lbs)
- •Refer to ACIP guidelines
- Post Vaccine Serologic Testing (PVST) - 2 labs
- •To be done 1-2 months after completion of Hep B series but not earlier than 9 months of age
- •Order a HBsAg (Hepatitis B Surface ANTIGEN) lab
- •Order an anti-HBs (Hepatitis B Surface ANTIBODY) lab

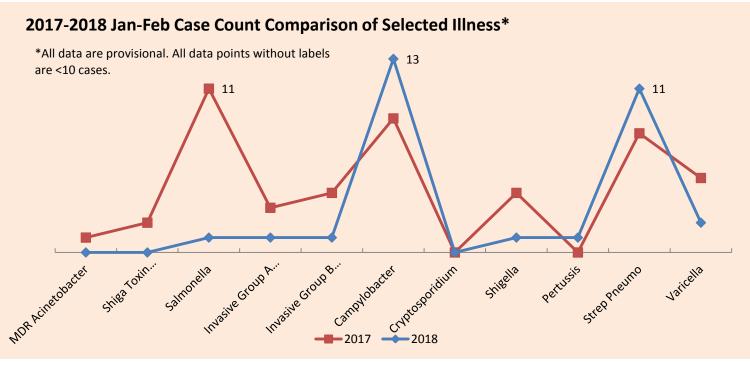
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2015 Perinatal Hepatitis B Prevention Program Cases from Selected Counties

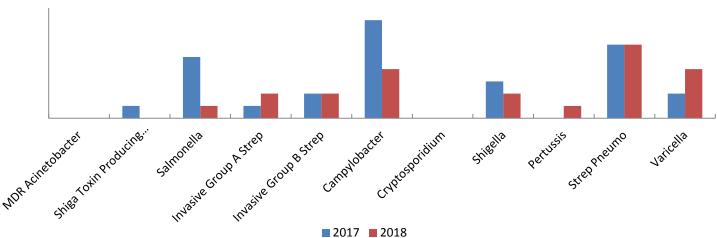
Includes all mothers and infants who qualified to be case managed for Hep B prevention.



Public Health



February Case Comparison 2017 and 2018* *All data are provisional. All data points without labels are <10 cases.



In the past, the Health Department has used a fax system to disseminate health alerts and advisories. In order to convert to an email based system, please email Mark.Price@amarillo.gov

> Communicable Disease Reporting Gather patient demographics, relevant labs, and office notes Fax all information with a coversheet to 806-378-6306, attn: Communicable Disease For more information call: Laurie Burton - 806-378-6321 or Kirstin Williams - 806-378-6353 List: http://www.dshs.texas.gov/idcu/investigation/conditions/