## **Local Public Health Agency - Case Management of Infants Born to HBsAg Positive Mothers**

<u>Birth</u>: Review infant immunization records (IRIS) and/or hospital medical records to verify receipt of <u>HBIG</u> and <u>1st</u> <u>dose HepB vaccine</u> within 12 hours of birth. Record dates and times of HBIG and vaccine administration in IDSS and/or on Perinatal Hepatitis B Follow-Up Form.

Age 1-2 months: 2<sup>nd</sup> dose HepB vaccine. Verify receipt of 2<sup>nd</sup> dose of HepB vaccine in infant immunization record (IRIS) and/or follow-up with medical provider. Document in IDSS and/or on Perinatal Hepatitis B Follow-Up Form. \*If infant weighed less than 2,000 grams at birth, do not count birth dose of HepB vaccines as part of the 3-dose series. Infant should receive a dose of HepB vaccine at 1-2 months of age followed by 2 additional doses for a total of 4 doses.)

<u>Age 6 months</u>: 3<sup>rd</sup> dose HepB vaccine received no sooner than 24 weeks of age. Verify receipt of 3<sup>rd</sup> dose of HepB vaccine in infant immunization record (IRIS) and/or follow-up with child's medical provider. Document in IDSS and/or on Perinatal Hepatitis B Follow-Up Form.

\*Infant may have also received a dose of HepB vaccine at age 4 months of age. The 6 month dose is still required.

Age 9-12 months: PVST- HBsAg and Quantitative anti-HBs at least 1-2 months after the final dose of HepB vaccine and not before the age of 9 months. Contact child's healthcare provider to verify completion and document results in IDSS and/or Perinatal Hepatitis B Follow-Up Form.

## **PVST Results**

**HBsAg negative AND anti-HBs positive** (≥10mIU/mL): Close case as immune. No further action required.

HBsAg negative, anti-HBs negative (<10mIU/mL): Advise provider to administer 1 additional dose HepB vaccine and redraw PVST 1-2 months later. If repeat HBsAg and anti-HBs is still negative, finish the second HepB vaccine series and redraw PVST 1-2 months following the final dose. If anti-HBs now ≥10mIU/mL, close case. If anti-HBs remain <10mIU/mL, no further doses of HepB vaccine are recommended. Infant considered non-responder.

**HBsAg positive:** refer for appropriate medical follow up with physician.

Document all results in IDSS and/or Perinatal Hepatitis B Follow-Up Form.