

# Perinatal Hepatitis B Post-Exposure Prophylaxis Recommendations



## Guidelines for Labor and Delivery Hospitals

February 2024

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### BACKGROUND

The California Department of Public Health (CDPH) recommends that delivery hospitals implement the following policies and procedures, in accordance with Advisory Committee on Immunization Practices (ACIP) guidance<sup>1</sup>. Because failure to provide appropriate hepatitis B post-exposure prophylaxis (PEP) to at-risk infants is a serious error that can result in infant infection with hepatitis B virus (HBV), hospitals failing to provide appropriate PEP may be reported to the CDPH Licensing and Certification Program.

### REVIEW THE PREGNANT PATIENT'S HBSAG LABORATORY REPORT AT THE TIME OF ADMISSION

- Review the pregnant patient's hepatitis B surface antigen (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.
- Results that were not issued by the lab performing the test (e.g., results written on prenatal records) are not acceptable because transcription and misinterpretation errors can occur.
- File a copy of the lab report in both the infant's and the parent's medical records.

### TEST PREGNANT PATIENTS WITH UNKNOWN HBSAG STATUS AT THE TIME OF ADMISSION

- Perform HBsAg testing immediately upon admission if there is no documentation of the patient's HBsAg status for the current pregnancy. Instruct the lab to call the labor and delivery unit as soon as results are obtained.
- Pregnant patients at risk for acquiring hepatitis B infection during pregnancy (more than one sex partner in the previous six 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.
- Pregnant patients with unknown HBsAg status, but with other evidence suggestive of prenatal HBV infection (e.g., HBV DNA or HBeAg-positive laboratory test results, or known to be chronically infected with HBV) should be managed as if HBsAg-positive.

### ENSURE APPROPRIATE ADMINISTRATION OF HEPATITIS B VACCINE AND HBIG

- If a pregnant patient is known to be HBsAg-positive: Administer hepatitis B vaccine and hepatitis B immune globulin (HBIG) within 12 hours of birth to infant.
- If a pregnant patient has unknown HBsAg status (without evidence suggestive of prenatal HBV infection):

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<sup>1</sup> Schillie S, Vellozzi C, Reingold A, et al. Prevention of Hepatitis B Virus Infection in the United States: Recommendations of the Advisory Committee on Immunization Practices. MMWR Recomm Rep 2018;67(No. RR-1):1–31. DOI: <http://dx.doi.org/10.15585/mmwr.rr6701a1>

## Perinatal Hepatitis B Post-Exposure Prophylaxis Recommendations — Guidelines Labor and Delivery Hospitals

- Infants weighing **<2 kg** - Administer hepatitis B vaccine and HBIG within 12 hours of birth
- Infants weighing **≥2 kg** - Administer hepatitis B vaccine within 12 hours. If the birthing parent is found to be HBsAg positive, administer HBIG as soon as possible and no later than 7 days after birth. If infant has already been discharged when HBsAg positive results are obtained, it is the responsibility of the hospital to recall the infant and to administer HBIG.
- If a pregnant patient is HBsAg-negative:
  - Infants weighing **≥2 kg**: Administer hepatitis B vaccine within 24 hours of birth.
  - Infants weighing **<2 kg**: Administer hepatitis B vaccine at chronological age 1 month or hospital discharge (whichever is earlier, even if weight is still <2kg).
- Doses of HBIG and hepatitis B vaccine should be administered at different anatomical sites (e.g., in separate limbs).
- Administration of HBIG and the hepatitis B vaccine should be documented in the infant's immunization record and should be provided to the parents. Hospitals are also required to enter all vaccine doses into the California Immunization Registry. For more information about this requirement, please visit [AB 1797 Immunization Registry FAQs \(ca.gov\)](#).
- Federal law requires providers to give parents a [Hepatitis B Vaccine Information Statement \(VIS\)](#) before vaccine administration. A current version of the Hepatitis B VIS can be downloaded from the [CDC website](#).