



Preventing Perinatal Hepatitis B

Guidelines for Labor and Delivery Units

From the Advisory Committee on Immunization Practices (ACIP) Recommendations, December 2005*

AT THE TIME OF ADMISSION

- Review the hepatitis B surface antigen (HBsAg) status of all pregnant women admitted for labor and delivery.
- Accept only laboratory reports as documentation of hepatitis B status.
- Perform HBsAg testing as soon as possible if there is no documentation of the woman's HBsAg status or if she has clinical hepatitis.
- Retest women who are known to have engaged in behaviors that put them at risk for acquiring hepatitis B infection during pregnancy (e.g., recent intravenous drug use, an HBsAg-positive sex partner, more than one sex partner in the past 6 months, or treatment for a sexually transmitted disease).

AFTER DELIVERY

Infants Born to HBsAg-positive Mothers

- Administer single-antigen hepatitis B vaccine and hepatitis B immune globulin (HBIG) to all infants within 12 hours of birth.
- Allow mothers to begin breastfeeding without delay. Administration of HBIG and the recommended hepatitis B vaccine series should eliminate any theoretical risk of transmission through breastfeeding.

Infants Born to Mothers with Unknown HBsAg Status

- Administer single-antigen hepatitis B vaccine to all infants within 12 hours of birth.
- **Infants weighing <2,000 g at birth:** administer HBIG if mother tests HBsAg positive or if mother's HBsAg result is not available within 12 hours of birth.
- **Infants weighing \geq 2,000 g at birth:** if the mother is found to be HBsAg positive, administer HBIG as soon as possible but within 7 days of birth.
- If the mother is found to be HBsAg positive, notify the infant's health care provider of the need to provide follow up.

Infants Born to Mothers with Negative HBsAg Status

- **Infants weighing <2,000 g at birth:** administer first dose of hepatitis B vaccine at 1-30 days of chronologic age if medically stable or at hospital discharge if before 30 days of chronologic age.
- **Infants weighing \geq 2,000 g at birth:** administer a dose of single-antigen hepatitis B vaccine at hospital discharge.[†]

AT HOSPITAL DISCHARGE

- Give the infant's immunization record to the mother and remind her to take it to the infant's first healthcare provider visit. Birth hospitals are encouraged to use their regional immunization registry to record infant hepatitis B immunizations.
- Notify the local health department of all births to women with positive or unknown HBsAg status.

*www.cdc.gov/ncidod/diseases/hepatitis/b/acip.htm

[†]The first dose may be delayed until after hospital discharge for an infant who weighs \geq 2,000 g and whose mother is HBsAg negative, but only if a physician's order to withhold the birth dose and a copy of the mother's original HBsAg-negative laboratory report are documented in the medical record.