

## Your Role in the Perinatal Hepatitis B Prevention Program (PHBPP)

### If you work in a laboratory:

- Report all hepatitis B surface antigen-positive (HBsAg-positive) results to the local health department (LHD) in the county where the patient resides within 24 hours of discovery
- Report all HBsAg results to the ordering physician

### If you provide prenatal care:

- Test every pregnant woman during each pregnancy for HBsAg
- Inform pregnant women of their HBsAg status
- Send copy of HBsAg test result for current pregnancy with prenatal records to delivery hospital
- Report all HBsAg-positive pregnant women to the LHD within 24 hours
- Counsel HBsAg-positive pregnant women about their status and refer for appropriate care
- Contact the pediatric provider to communicate the woman's HBsAg-positive status and the need for hepatitis B (hepB) vaccination and hepatitis B immune globulin (HBIG) for the infant
- Assess HBsAg-negative pregnant woman's risk for hepatitis B virus (HBV) infection
- Counsel HBsAg-negative pregnant woman on methods to prevent HBV transmission
- Vaccinate pregnant HBsAg-negative women if high risk
- Retest high risk pregnant HBsAg-negative women in their last trimester

### If you work in the hospital labor and delivery unit or in the nursery unit:

- Review and record the maternal HBsAg test result for the current pregnancy on both labor and delivery record and on infant's delivery summary sheet
  - If a woman presents with an unknown HBsAg status or with risk factors, test STAT
  - If STAT test is HBsAg-positive, report to the LHD within 24 hours
- Give all infants single-antigen hepB vaccine at birth
- Give all infants born to HBsAg-positive women single-antigen hepB vaccine and HBIG within 12 hours of birth
- Report administration of HBIG and hepB on the electronic birth certificate (EBC) worksheet
- Record the maternal HBsAg testing date and result on all newborn screening (NBS) cards
- Report all HBsAg-positive women and the HBIG and hepB administration to the PHBPP

### If you provide pediatric care:

- Know the maternal HBsAg status for all infants to whom you provide care
- Complete the recommended hepB vaccine series and post-vaccination serology for all infants born to HBsAg-positive women
  - If infant is HBsAg and anti-HBs negative, repeat three doses of hepB vaccine and retest one month later
  - If the infant is HBsAg-positive, counsel the family and refer the infant for appropriate care
- Record vaccine administration in the Michigan Care Improvement Registry (MCIR)
- Report hepB administration and post-vaccination serology results to the PHBPP

### If you provide health care to a contact of an HBsAg-positive woman:

- Identify, test and treat all household and sexual contacts of women who are HBsAg-positive
- Counsel HBsAg-positive contacts and refer them for appropriate care
- Give susceptible contacts three doses of hepB vaccine and complete post-vaccination serology
- Record vaccine administration in MCIR
- Report hepB administration and post-vaccination serology results to the PHBPP