

Facts about Hepatitis B in Newborns

- Hepatitis B virus (HBV) infection can lead to cirrhosis of the liver, hepatocellular carcinoma, and even death.
- Individuals who acquire HBV early in life have the greatest chance of becoming chronically infected, as illustrated in the chart below.

Age at Infection	Risk of Chronic Infection
Birth	Up to 90%
1 to 5 years	30% to 50%
>5 years	6% to 10%

- HBV transmission can occur even when the carrier is asymptomatic. Therefore, it is important to test all pregnant women for hepatitis B infection during pregnancy.

POST-VACCINATION SEROLOGY TESTING

Post-vaccination serology testing is a critical component of perinatal hepatitis B prevention. Testing should be done one to two months after completion of the HepB vaccine series but not prior to 9 months of age. Testing should include the following markers: HBsAg and anti-HBs. The purpose of post-vaccination serologic testing of infants is to determine if the vaccine was successful in preventing perinatal HBV infection.

INTERPRETATION OF POST-VACCINE SEROLOGY TEST

HBsAg (CPT 7340)	Anti-HBs (CPT 86317)	Interpretation and Necessary Action
-	+	The infant is immune to HBV.
-	-	The infant is NOT immune to HBV (non-responder). In this situation, the infant should receive a second series of hepatitis B vaccine. The first dose should be given as soon as possible after post-vaccination serology results are known and follow the 0, 1, and 6 month schedule for completing the series. The infant should be tested again for HBsAg and anti-HBs 1 to 2 months after completing the second vaccine series.
+	-	The vaccination effort failed. The infant is infected with HBV and is likely to become a chronic carrier. Refer the child for clinical follow-up.

CPT Codes for Hepatitis B Serology Testing

Serology Test	CPT Code
HBsAg	87340
HBsAg – confirmatory test	87341
Anti-HBs	86706
Anti-HBs - preferred	86317
HBeAg	87350
Anti-HBe	86707
HBcAb	86704
Prenatal Profile with HBsAg	80055
Hepatitis B IgM antibody	86705
HBV DNA (Quantitative)	87517

For more information regarding perinatal hepatitis B, please contact your local health department or



TEXAS
Health and Human
Services

Texas Department of State
Health Services

Physical Address:

Texas Department of State Health Services
Immunization Unit
Perinatal Hepatitis B Prevention Program
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Protect Babies from Hepatitis B for Life



PERINATAL HEPATITIS B PREVENTION PROGRAM

GIVE THE BIRTH DOSE

Hepatitis B vaccine at birth saves lives!

The Texas Department of State Health Services recommends that all birthing hospitals implement standing orders to give the birth dose of hepatitis B vaccine to all babies within 24 hours of birth.

What is Your Role?

Health Care Providers:

- Screen all pregnant women for hepatitis B surface antigen (HBsAg) at the first prenatal visit and at delivery for each pregnancy.
- Report all HBsAg-positive pregnant women to your local health department or to the Department of State Health Services (DSHS).

Hospitals:

- Screen all pregnant women for HBsAg at delivery for each pregnancy.
- Report all HBsAg-positive pregnant women to your local health department or to the Department of State Health Services.
- Administer both the birth dose of hepatitis B (HepB) vaccine and hepatitis B immune globulin (HBIG) to babies born to HBsAg-positive mothers and mothers of unknown HBsAg status within 12 hours of birth.
- Administer the HepB vaccine birth dose to babies born to HBsAg-negative mothers within 24 hours of birth.

Pediatric Health Care Providers:

- Complete vaccine series for all babies according to ACIP recommendations.
- For babies born to HBsAg-positive mothers provide post-vaccination serology testing (PVST) one to two months after completion of vaccine series, but no earlier than 9 months of age.
- Repeat vaccine series if infant does not seroconvert.

Texas Administrative Code Requires:

- Providers and hospitals to screen all pregnant women for hepatitis B infection at their first prenatal visit and at delivery for each pregnancy. (Texas Administrative Code Title 25, Part 1 Chapter 97, subchapter A, §97.135)
- Hepatitis B mothers identified prenatally or at delivery must be reported within one week to DSHS. (Texas Administrative Code Title 25, Part 1 Chapter 97, subchapter A, §97.3)

Reporting information and forms are available online at www.TexasPerinatalHepB.org.

Recommended Schedule for Vaccinating Infants with Monovalent Hepatitis B Vaccine by Mother’s HBsAg Status

Infants Born to HBsAg-Positive Women		
Biologic	Dose	Age of Infant
HBIG	0.5 mL	Within 12 hours of birth*
Hepatitis B vaccine– dose 1	0.5 mL	Within 12 hours of birth*
Hepatitis B vaccine– dose 2	0.5 mL	1 to 2 months
Hepatitis B vaccine– dose 3	0.5 mL	6 months**

* The first dose of vaccine should be given at the same time as HBIG but at a separate site. The preferred sites are the anterolateral thighs. If necessary, HBIG can be administered up to seven days after birth.

** The minimum interval between dose 1 and 3 is four months. Infant should not receive the third dose of HepB vaccine prior to 6 months of age.

Infants Born to Women Whose HBsAg Status is Unknown		
Biologic	Dose	Age of Infant
HBIG	0.5 mL	If mother is postnatally found to be HBsAg-positive, administer HBIG to infant as soon as possible, but no later than seven days after birth.
Hepatitis B vaccine– dose 1	0.5 mL	Within 12 hours of birth*
Hepatitis B vaccine– dose 2	0.5 mL	1 to 2 months
Hepatitis B vaccine– dose 3	0.5 mL	6 months**

* The first dose of vaccine should be given at the same time as HBIG but at a separate site. The preferred sites are the anterolateral thighs. If necessary, HBIG can be administered up to seven days after birth.

** The minimum interval between dose 1 and 3 is four months. Infant should not receive the third dose of HepB vaccine prior to 6 months of age.

Recommended Schedule for Vaccinating Infants with Monovalent Dose of Hepatitis B Vaccine at Birth Followed by Subsequent Doses of Combination Vaccine

Combination Vaccine Schedule		
Biologic	Dose	Age of Infant
Hepatitis B vaccine– dose 1	0.5 mL	Birth (MONOVALENT hepatitis B vaccine).
PEDIARIX®		
Hepatitis B vaccine– dose 2	0.5 mL	2 months
Hepatitis B vaccine– dose 3	0.5 mL	4 months
Hepatitis B vaccine– dose 4	0.5 mL	6 months

Recommended Schedule for Vaccinating Preterm Infants Weighing <2000 Grams with Monovalent Hepatitis B Vaccine by Mother’s HBsAg Status

Preterm Infants Born to HBsAg-Positive Women or to Women Whose HBsAg Status is Unknown		
Biologic	Dose	Age of Infant
HBIG	0.5 mL	Within 12 hours of birth*
Hepatitis B vaccine - birth dose	0.5 mL	Within 12 hours of birth* (Do not count birth dose as part of the vaccine series)
Hepatitis B vaccine– dose 1	0.5 mL	1 month
Hepatitis B vaccine– dose 2	0.5 mL	2 months
Hepatitis B vaccine– dose 3	0.5 mL	6 months**

* The first dose of vaccine should be given at the same time as HBIG but at a separate site. The preferred sites are the anterolateral thighs. If necessary, HBIG can be administered up to seven days after birth.

** The minimum interval between dose 1 and 3 is four months. Infant should not receive the third dose of HepB vaccine prior to 6 months of age.