

Perinatal Hepatitis B Prevention

Public Health staff will utilize the current edition of the Georgia Department of Public Health Immunization Program (GIP) Manual's Perinatal Hepatitis B Prevention Program Guidelines as their policy to provide required management of infants born to hepatitis B surface antigen (HBsAg) positive women.

The goals of the Georgia Perinatal Hepatitis B Prevention Program are to:

- Ensure that all pregnant women are screened for HBsAg as part of the initial prenatal screening panel.
- Assure that all local health departments perform case investigations on all positive HBsAg-pregnant women reported to their jurisdiction.
- Confirm that infants born to HBsAg-positive women receive HBIG and the first dose of hepatitis B vaccine within twelve (12) hours of birth.
- Ensure that infants born to HBsAg-positive women receive the second dose of vaccine at 1-2 months of age and the third dose of vaccine at six (6) months of age.
- Ensure that infants born to HBsAg-positive women in the U.S. and residing in Georgia are tested at nine (9) months to eighteen (18) months of age for HBsAg and hepatitis B surface antibody (anti-HBs) after completing the hepatitis B vaccination series. **It is the responsibility of each health district to establish a process to ensure that required lab tests are available to infants born to HBsAg-positive women.**

Go to <https://dph.georgia.gov/immunization-publications> for the GIP Manual.

District 2 Public Health Procedure for Perinatal Hepatitis B Follow Up

If a pregnant woman between 10 and 50 is found to have a positive lab result (HBsAg), their information is to be forwarded to the district Perinatal Hepatitis B Case Manager (Sandy Moore) so tracking of the pregnancy can begin.

Send current contact information (address and phone) as a will be opened in SENDSS.

Case manager will contact the female and identify household and sexual contacts.

The contacts are referred for testing and vaccination if found to be at risk. They will be referred to the health department for testing and vaccination if they do not have a PCP.

Case management follows the infant from birth until all HepB vaccines are complete and post vaccination testing is completed.