Prenatal HBsAg Testing
• Test ALL pregnant women during an early prenatal visit in EACH pregnancy, even if tested before or previously vaccinated.
• Send copy of lab report with the HBsAg-positive results to the delivery hospital and the infant’s health care provider.
• Report to MDH all HBsAg-positive women within one working day of knowledge of the pregnancy.
• Refer for or provide HBsAg-positive women with counseling and medical management. Give the following information:
  ▪ Modes of hepatitis B transmission.
  ▪ Perinatal concerns (i.e., HBsAg-positive mothers may breastfeed, treatment of newborns for exposure to hepatitis B).
  ▪ Prevention of hepatitis B to contacts, include testing and/or hepatitis B vaccination for household, sexual, and needle-sharing contacts.
  ▪ Substance abuse treatment and/or mental health care if appropriate.

Management of Delivery and Infant
At admission for delivery:
• Review HBsAg status of all pregnant women. Perform STAT testing if HBsAg result for the current pregnancy is unavailable.
• Retest HBsAg-negative women (at time of hospital delivery) if high-risk for infection.
• Place copy of maternal HBsAg results in labor/delivery record, infant’s delivery summary, and nursery medical record.
After delivery:
Infants born to HBsAg-positive mothers:
• Give hep B vaccine and HBIG within 12 hours of birth.
• Complete hep B vaccine series.
• Perform post-vaccination serology at 9-12 months.
Screening and Referral Algorithm for Hepatitis B Virus (HBV) Infection among Pregnant Women*

- Report HBsAg positive pregnant women to Perinatal Hepatitis B Prevention Program.
- Identify all household and sexual contacts and recommend screening by primary care provider.

**Order Additional Tests:**
- HBsAg (hepatitis B e-antigen)
- HBV DNA Concentration
- ALT (alanine aminotransferase)

- Consider vaccination during pregnancy
- or postpartum

*High risk for HBV infection includes: household or sexual contact of HBsAg-positive persons; injection drug user; more than one sex partner during the past 6 months; HIV infection; chronic liver disease, or end-stage renal disease; and international travel to regions with HBsAg prevalence of ≥2%.


- HBsAg HBsAg
- Order Additional Tests:
  - HBeAg (hepatitis B e-antigen)
  - HBV DNA Concentration
  - ALT (alanine aminotransferase)

*No further action needed*

**Assess if at high risk for acquiring HBV infection**

- Refer to specialist immediately during pregnancy
- or postpartum

**Refer for care**

*CDC Algorithm from Perinatal Transmission website (www.cdc.gov/hepatitis/hbv/perinatalxmtn.htm).*

MDH Perinatal Hepatitis B Prevention Program
www.health.state.mn.us/hepatitis
651-201-5414
March 2019
ID#55966