



<p>Team Name: Regional Obstetrical Team</p> <p>Team Lead: Regional Director - Acute Care</p> <p>Approved by: Executive Director - Acute &amp; Chief Nursing Officer</p>	<p>Reference Number: CLI.5810.PL.007</p> <p>Program Area: Obstetrics</p> <p>Policy Section: General</p>
<p>Issue Date: August 12, 2019</p> <p>Review Date:</p> <p>Revision Date:</p>	<p>Subject: Hepatitis B Prophylaxis in Newborns</p>

**POLICY SUBJECT:**

Hepatitis B Prophylaxis in Newborns

**PURPOSE:**

To decrease the risk of maternal to infant hepatitis B transmission.  
 To assist the staff in proper procedure regarding hepatitis B prophylaxis of the newborn.

**BOARD POLICY REFERENCE:**

Executive Limitation (EL-02) – Treatment of Clients  
 Executive Limitation (EL-01) – Global Executive Restraint and Risk Management

**POLICY:**

The highest risk of hepatitis B transmission (90%) and subsequent chronic infection is in infants born to a chronic hepatitis B positive mother. Infants are exposed during the labour and delivery process (including cesarean section); it is uncommon for the infant to be exposed in utero (may occur with antepartum bleeding). Proper administration of biologics at birth is critical to decrease the incidence of exposed infants becoming chronic.

**DEFINITIONS:**

HBIG – hepatitis B immune globulin

**IMPORTANT POINTS TO CONSIDER:**

- The majority of people who contract hepatitis B are able to clear the infection on their own within 4-8 weeks. A small percentage develop a chronic infection, of which there is no cure.
- People with chronic hepatitis B can have a range of symptoms from none to cirrhosis, hepatic decompensation and hepatocellular carcinoma.

- The risk of perinatal infection is also increased when the mother contracts acute hepatitis B in the second or third trimester of pregnancy.
- The newborn will require a total of three doses of vaccine (birth, one month and six months of age).
- The effect of the vaccine may be diminished in the preterm infant (less than 37 weeks) weighing less than 2000grams. These infants will need four doses of the vaccine (birth, one, two and six months of age).
- The infant undergoes post immunization testing between one to four months after the last vaccination date, but no earlier than 9 months of age.

**PROCEDURE:**

**For infants born to hepatitis B positive mothers:**

- 1) Review drug information insert with the hepatitis B vaccine and HBIG
- 2) Review *Manitoba Health Hepatitis B communicable disease control – Fact sheet* with the parents, including rational, side effects and follow up care required.
- 3) Obtain consent for the vaccine using the *Manitoba Health Child Immunization Consent Form MG-7707 (revised June 2016)*.
- 4) Give monovalent hepatitis B pediatric vaccine 0.5 mL IM in the anterolateral thigh within 12 hours of birth.
- 5) Give HBIG 0.5 mL IM in the opposite anterolateral thigh within 12 hours of birth.
- 6) Remind the parents of the required follow up doses of vaccine.
- 7) Complete the *Manitoba Health Hepatitis B-Prophylaxis record sheet for infants*
- 8) Complete the *Manitoba Health Immunization Inputting Form for Health Care Providers* and fax to the Regional Public Health office.
  - All positive hepatitis B results are reported to Manitoba Health, Seniors and Active Living. Public Health generates a follow up form letter to the mother's primary care physician/practitioner advising that hepatitis B pediatric vaccine and HBIG be given at birth. After delivery, a second letter is generated to the parents/guardian as well as the mother's primary care physician/practitioner advising that follow up doses are required (2 follow-up doses for full-term newborn; 3 follow-up doses for pre-term newborn).
  - **Follow up is extremely important as the infant will require all doses in the series of the vaccine.**
- 9) Fax these forms with the Postpartum/Newborn Referral Form to Public Health upon discharge from the hospital. Midwifery to submit required documents post delivery.

**For infants born to mothers of unknown status:**

- 1) Maternal blood testing for hepatitis B is done as soon after admission as possible.
- 2) If results are not received within 12 hours of birth, or are positive, follow the procedure for infants born to hepatitis B positive mothers.
- 3) If the mother is later determined to be positive, continue with the regular vaccine dosing schedule. The infant should undergo post immunization serology testing.
- 4) If the mother is later determined to be negative, it is recommended to finish the series but post immunization serology testing of the infant is not required.

For infants born into a household with a hepatitis B positive member:

- 1) Follow steps 1-4, 6-8 above in the For infants born to hepatitis B positive mothers section.
- 2) HBIG (step 5) is not required.

**NOTE: Any adverse reactions must be reported by filling out the Manitoba Health, Seniors and Active Living form *Report of adverse events following immunization (AEFI) MHSU-2334(2016-11-15)*.**

**EQUIPMENT/SUPPLIES:**

HBIG

Hepatitis B monovalent pediatric vaccine

Separate syringes/needles for each biologic

**REFERENCES:**

*Manitoba Health Hepatitis B communicable disease control – Fact sheet*

<https://www.gov.mb.ca/health/publichealth/factsheets/hepb.pdf>

*Child Immunization Consent Form MG-7707 (revised June 2016)*

<http://www.gov.mb.ca/health/publichealth/cdc/div/docs/7707.pdf>

*Hepatitis B-Prophylaxis record sheet for infants*

[http://www.gov.mb.ca/health/publichealth/cdc/protocol/hepb\\_infantrecord.pdf](http://www.gov.mb.ca/health/publichealth/cdc/protocol/hepb_infantrecord.pdf)

*Immunization Inputting Form for Health Care Providers*

<http://www.gov.mb.ca/health/publichealth/cdc/div/docs/iifhcp.pdf>

*Report of adverse events following immunization (AEFI) MHSU-2334(2016-11-15)*

[http://www.gov.mb.ca/health/publichealth/cdc/docs/mhsu\\_2334\\_20161115\\_aefi.pdf](http://www.gov.mb.ca/health/publichealth/cdc/docs/mhsu_2334_20161115_aefi.pdf)

Manitoba Public Health Branch (May 2018). Hepatitis B newborn prophylaxis protocol.  
Communicable Disease Management Protocol.

Manitoba Public Health Branch (May 2018). Hepatitis B. Communicable Disease Management Protocol.