Perinatal Hepatitis B Prevention Program (PHBPP)

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Mission: To identify hepatitis B surface antigen-positive (HBsAg-positive) women prenatally or at delivery for each pregnancy so that their infants, household and sexual contacts can be tested and treated to prevent the spread of the hepatitis B virus (HBV).

Surveillance: Based on Centers for Disease Control and Prevention (CDC) estimates, 355-553 infants born to HBsAg-positive women should be identified annually.

Prevention: Prevention of perinatal hepatitis B transmission requires the coordinated transfer of information between laboratories, primary care providers, hospitals, and the local/state health departments to ensure that all:

- Pregnant women are screened for HBsAg
- HBsAg-positive results are reported to the local health department (LHD) in the county where the patient resides within 24 hours, and the results are sent to the delivery hospital with the prenatal care record
- HBsAg-positive results are confirmed prior to reporting to LHD
- Ordering physicians and laboratories are both reporting the HBsAg-positive results to the LHD
- Laboratories reporting HBsAg-positive results for pregnant women indicate PREGNANCY STATUS on the report (via OB Panel/Prenatal Panel or ICD9 – ICD10 pregnancy diagnosis code)
- Household and sexual contacts of HBsAg-positive pregnant women are identified, tested and immunized if susceptible
- Infants of HBsAg-positive women receive hepatitis B (hepB) vaccine and hepatitis B immune globulin (HBIG) within 12 hours of birth, a complete hepB vaccine series and post-vaccination serologic testing 3 – 6 months later
- Infants born to HBsAg-negative women receive the birth dose of hepB vaccine within 24 hours of birth

To view the manual in its entirety go to www.michigan.gov/hepatitisB.