

Follow-up Protocol for Infants Born to Hepatitis B Surface Antigen-Positive (HBsAg-positive) Women

1. Review Michigan Care Improvement Registry (MCIR), and/or Official Immunization Record to verify if infant received hepatitis B (hepB) vaccine and hepatitis B immune globulin (HBIG) at birth.
2. **At 1-2 months of age:**
 - A. **GIVE** infant single-antigen hepB vaccine at 1-2 months of age, or Pediarix™ (DTaP-HepB-IPV) at 2 months of age, intramuscularly in the anterolateral thigh (at least 4 weeks after first dose). **(If infant weighed less than 2000g at birth, and received hepB vaccine before 1 month of age, do not count birth dose of hepB vaccine as part of series, repeat the hepB dose at 1-2 months of age and give two additional doses.)**
 - B. **UPDATE** MCIR record.
 - C. **FLAG** infant's chart as a reminder of when next dose is due.
 - D. **ASK** parent for current telephone and address and update patient's MCIR record.
 - E. **COMPLETE** [Hepatitis B Perinatal Case Report-Infant/Contact Form](#) or [Provider Reporting Form](#) and mail or fax to Perinatal Hepatitis B Prevention Program (PHBPP), **or call/email case manager with information.**
 - F. **GIVE** 2nd dose of single-antigen hepB vaccine at 1-2 months of age or Pediarix™ at 2 months of age
3. If using Pediarix™, a dose of the hepB vaccine can be given at the 4 month-visit intramuscularly in the anterolateral thigh.
 - A. **UPDATE** MCIR record.
 - B. **FLAG** infant's chart as a reminder of when next dose is due.
 - C. **ASK** parent for current telephone and address and update patient's MCIR record.
 - D. **COMPLETE** [Hepatitis B Perinatal Case Report-Infant/Contact Form](#) or [Provider Reporting Form](#) and mail or fax to PHBPP, **or call/email case manager with information.**
4. **At 6 months of age:**
 - A. **GIVE** infant single-antigen hepB vaccine or Pediarix™ at 6 months of age, intramuscularly in anterolateral thigh (at least 8 weeks after second dose, at least 16 weeks after first, and no earlier than 24 weeks of age).
 - B. **INFORM** parent that infant will need a blood test at **9-12 months of age, (1-2 months after the final dose if the vaccine series is delayed)**, to make sure baby is protected from hepatitis B virus (HBV).
 - C. **UPDATE** MCIR record.
 - D. **FLAG** infant's chart as reminder of when blood test is due.
 - E. **ASK** parent for current telephone and address and update patient's MCIR record.
 - F. **COMPLETE** [Hepatitis B Perinatal Case Report-Infant/Contact Form](#) or [Provider Reporting Form](#) and mail or fax to PHBPP, **or call/email case manager with information.**
5. **At 9 to twelve months of age (1-2 months after the final dose if the vaccine series is delayed):**
 - A. **DRAW** or refer infant for **HBsAg** and hepatitis B surface antibody (**anti-HBs**) testing. To arrange for free testing contact the PHBPP case manager.
 - a. If HBsAg-positive, refer to specialist for follow-up care.
 - b. If HBsAg and anti-HBs are negative, give one additional dose of hepB vaccine and retest in 1-2 months.
 - i. If repeat HBsAg and anti-HBs are negative, give two additional doses of hepB vaccine (at 1 & 6 months later) and retest 1-2 months after completion of second hepB vaccine series.
 - c. If anti-HBs-positive, no additional vaccine or testing is needed, infant is protected from the HBV.
 - B. **UPDATE** MCIR record.
 - C. **ASK** parent for current telephone and address and update patient's MCIR record.
 - D. **COMPLETE** [Hepatitis B Perinatal Case Report-Infant/Contact Form](#) or [Provider Reporting Form](#) and mail or fax to PHBPP, **or call/email case manager with information.**

If you have questions, or need test kits, please call the Perinatal Hepatitis B Prevention Program (PHBPP) at 517-284-4893 or 800-964-4487. In southeast Michigan, call 313-456-4431 or 313-456-4432.