

Figure 3-3. Process for classifying cases of hepatitis B as acute and chronic

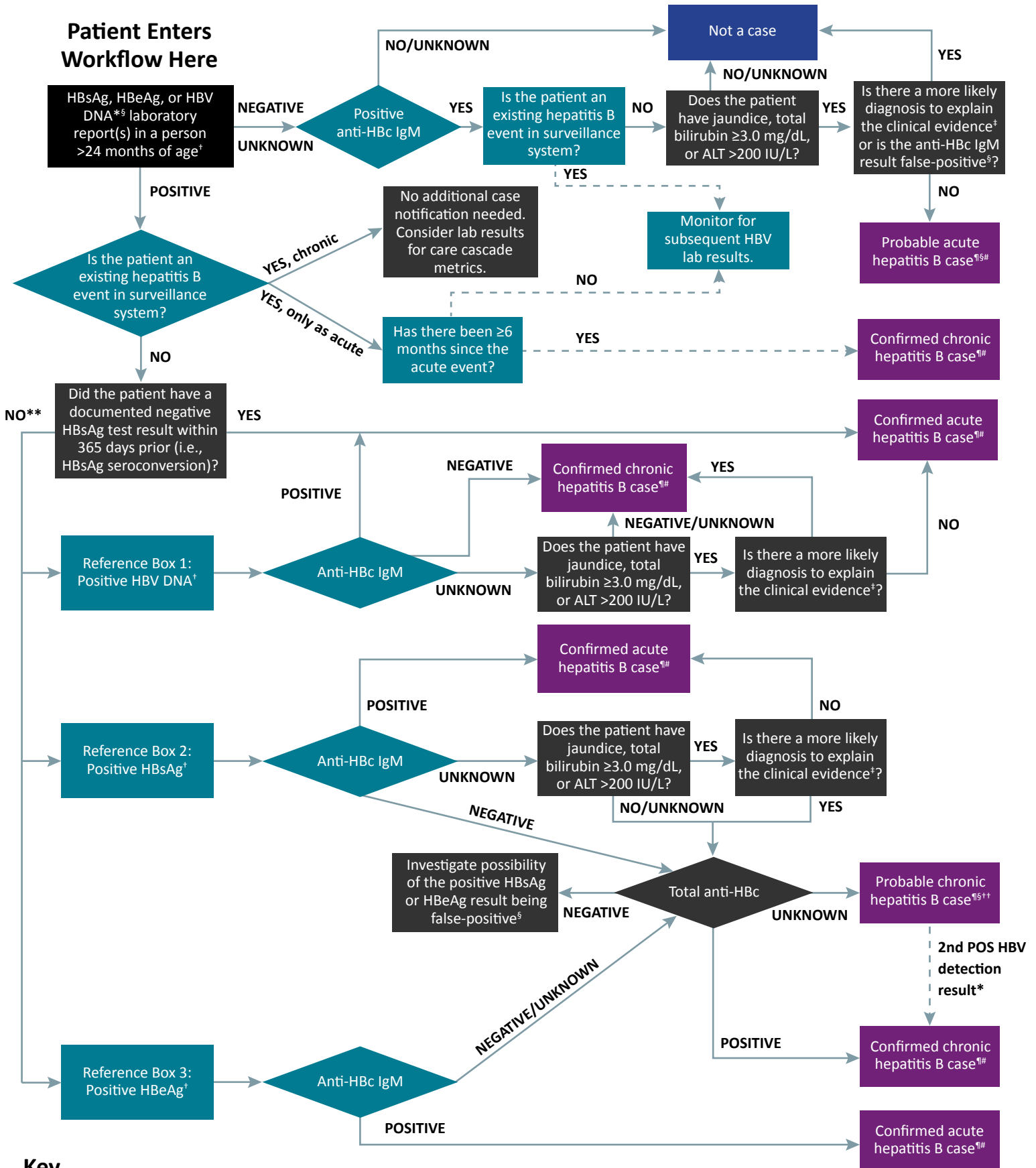


Figure 3-3. Process for classifying cases of hepatitis B as acute and chronic

Footnotes

*For surveillance case classification, HBsAg, HBeAg, and HBV DNA results are considered HBV detection results. If HBsAg confirmatory neutralization results were received, HBsAg was positive by confirmatory neutralization. Nucleic acid testing for HBV DNA, including qualitative, quantitative, and genotype testing. An isolated positive hepatitis B 'e' antigen (HBeAg) test result should prompt further investigation into the hepatitis B surface antigen (HBsAg) and/or HBV DNA results. Negative HBeAg results and HBV DNA levels below the positive cutoff level do not confirm the absence of HBV infection.

†Children ≤24 months of age and born in the United States to a gestational parent with documented evidence of HBV infection should be classified and reported using the 2017 perinatal hepatitis B case definition unless there is evidence that exposure occurred via a non-perinatal mechanism (e.g., health care-acquired). Children ≤24 months of age whose mode of exposure is not perinatal should be classified under the 2024 acute or chronic hepatitis B case definitions. Surveillance programs should provide prevention programs with information on individuals who have positive test outcomes for post-test counseling and referral to treatment and care, as appropriate.

‡Alternative diagnoses may include evidence of acute liver disease due to other causes or advanced liver disease due to hepatitis B reactivation, pre-existing chronic hepatitis B, other causes including alcohol exposure, other viral hepatitis, hemochromatosis, etc. If there is documentation from the patient's health care provider explaining that the clinical evidence is due to another reason other than acute hepatitis B, the patient should not be evaluated under the acute hepatitis B case definition.

§If a false-positive result is suspected, jurisdictions should consider other available test results, such as the total anti-HBc result, to aid with interpretation. If results are determined to be false-positive, they should not be used to classify cases as confirmed or probable.

¶A new acute hepatitis B case is an incident case that has not been previously notified as an acute or chronic hepatitis B case. A new chronic hepatitis B case is an incident case that has not been previously notified as a chronic hepatitis B case.

§A probable acute hepatitis B case that is confirmed within the same reporting year (before the NNDSS close-out date) can be transmitted as an update to the same case, but if the case is confirmed following the initial reporting year, it should not be transmitted to NNDSS again. A probable chronic hepatitis B case that is confirmed within the same reporting year (before the NNDSS close-out date) can be transmitted as an update to the same case, but if the case is confirmed following the initial reporting year, it should not be transmitted to NNDSS again.

*A confirmed or probable acute hepatitis B case may be additionally enumerated as a new confirmed chronic hepatitis B case if a positive HBV viral detection test is reported ≥6 months after acute case onset, or if asymptomatic, after the initial positive test result (e.g., consider reactivation).

**Refer to the appropriate reference box based on the positive HBV detection test(s) received.

††Classify as confirmed chronic hepatitis B if ≥2 HBV detection results are positive (e.g., positive for both HBsAg and HBeAg, positive for HBsAg in two clinical specimens taken ≥6 months apart, or positive for HBeAg in two clinical specimens taken ≥6 months apart).

