

Remember:

- Check and document every mother's HBsAg status.
- Report all births to HBsAg(+) women to NMDOH within 24 hours.
- Give the hepatitis B birth dose to all babies, and document in NMSIS.

Resources and Further Information

American Academy of Pediatrics policy statement on the birth dose
www.aappublications.org/news/2017/08/28/HepB082817

New Mexico Department of Health, Perinatal Hepatitis B Prevention Program
nmhealth.org/about/phd/idb/phbp/

Hep B Moms: Patient and Provider Education
www.hepbmoms.org

CDC Perinatal Hepatitis B Information Center for Health Care Professionals
www.cdc.gov/hepatitis/hbv/perinatalxmtn.htm

HBV ECHO: Videoconferencing Support and Education for Primary Care Teams
echo.unm.edu/hbv/

PROTECT BABIES FOR LIFE!

Give the hepB birth dose!



NEW MEXICO
DEPARTMENT OF
HEALTH



Protect Babies for Life. Vaccinate within 24 hours!

In 2009, a CDC team reviewed policies and hepatitis B vaccine birth dose coverage at 242 U.S. facilities, concluding: "The strongest predictor of vaccine administration was having a written hospital policy for newborn hepatitis B vaccination."¹

The Immunization Action Coalition offers excellent guidance and templates for developing policies in L&D and newborn units: www.immunize.org/catg.d/p2130.pdf

Updated Recommendations

In October 2016, the Advisory Committee on Immunization Practices voted to recommend that infants born to HBsAg-negative mothers receive a dose of hepatitis B vaccine within 24 hours of birth. This recommendation was approved by the CDC and is reflected in the 2017 recommended child and adolescent immunization schedule.

For further information on changes to the immunization schedule, see: www.cdc.gov/mmwr/volumes/66/wr/mm6605e1.htm

Protecting NM Babies: How Are We Doing?

In the 2016 National Immunization Survey, NM came in 42nd out of 50 states for hepatitis B birth dose coverage. Only 67.5% of New Mexican newborns received the birth dose, compared to 71% nationally.

Moms Need Vaccines Too!

Recommend hepatitis B vaccine to any mothers who...

- ...are seeking protection from hepatitis B
- ...have diabetes, chronic liver disease, or HIV
- ...have a history of sexually transmitted infection(s)
- ...plan to travel to an endemic area
- ...receive dialysis
- ...are at risk of contact with blood through work in healthcare or public safety

Tdap vaccine should be administered in the third trimester of EACH pregnancy to protect infants from pertussis. For mothers who were not vaccinated in pregnancy, CDC and ACOG recommend Tdap immediately postpartum.

See recommendations at: www.cdc.gov/pertussis/pregnant



1. Willis, B. C., Wortley, P., Wang, S., Jacques-Carroll, L., & Zhang, F. (2010). Gaps in hospital policies and practices to prevent perinatal transmission of hepatitis B virus. *Pediatrics* 125(4), 704-711.