



September 14, 2015

Help stop the spread of the hepatitis B virus (HBV) by improving the identification of HBV-infected pregnant women

The Problem: CDC estimates less than half of hepatitis B surface antigen (HBsAg)-positive pregnant women are identified by health departments. When these HBsAg-positive women are not identified as being pregnant, their infants might not receive timely post-exposure prophylaxis (PEP) through vaccination. Timely PEP vaccination prevents transmission of HBV up to 95% of the time. If an infant does get infected with HBV, the outcome is often chronic hepatitis B infection and premature death. Under-identification of HBsAg-positive pregnant women can be minimized if laboratory reporting indicates that a woman is pregnant at the time of testing for HBsAg.

The Solution: Four major commercial laboratories have successfully implemented methods to report pregnancy status of HBsAg-positive women. An effort is underway to expand this reporting and engage all laboratories providing HBsAg testing services in this public health initiative. Please join this effort.

Action Steps for Laboratories:

Identify Pregnancy Status

- ❖ Clearly indicate pregnancy status when available on all HBsAg-positive test results reported to health departments and ordering clinicians. These test results include, but are not limited to, the following:
 - Orders originating as obstetric (“OB”) panels or prenatal screening panels that include HBsAg testing as a component
 - Individual HBsAg test orders originating from an OB or prenatal panel performed elsewhere (HBsAg outsourced to a reference lab)
 - Orders originating as an individual prenatal HBsAg test
 - Orders for a standalone HBsAg test that is not part of an OB or prenatal panel but where pregnancy status is indicated elsewhere on the order (e.g. as a pregnancy-related ICD-9/10 diagnosis code)

Recommended Method of Identification

- ❖ Insert the word “PRENATAL” into reported test results, either next to test name of results sent by paper/fax or in the OBR-13 field of results sent by Electronic Laboratory Reporting (ELR).

Client Education

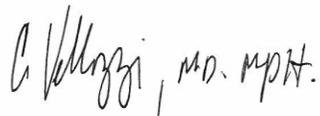
- ❖ Educate clinicians about laboratory testing options for selecting an OB or prenatal panel when screening pregnant women for HBsAg.
- ❖ Encourage clinicians to identify pregnant women when ordering HBsAg tests as a standalone or part of a non-OB/non-prenatal panel. For example, have clinicians provide ICD-9/10 diagnosis codes indicating pregnancy and include these codes in positive reports sent to health departments.

Reporting & Testing

- ❖ Provide timely reports of all HBsAg-positive test results to appropriate health departments.
- ❖ Perform licensed neutralizing confirmatory testing on all HBsAg tests included in OB and prenatal panels or when the ICD-9/10 diagnosis code indicates pregnancy.
- ❖ Include verification of confirmed HBsAg-positive results on the final lab report, if assay is performed on a pregnant woman.

For more information: <http://www.cdc.gov/hepatitis/hbv/pregstatuslabreporting.htm>

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