



Hepatitis B – Surveillance and Prevention

January 2012

Hepatitis B Surveillance Instructions

- A. Any of the following lab test results should trigger a case investigation**
 - A. HBsAg positive result**
 - B. HBcIgM positive result**

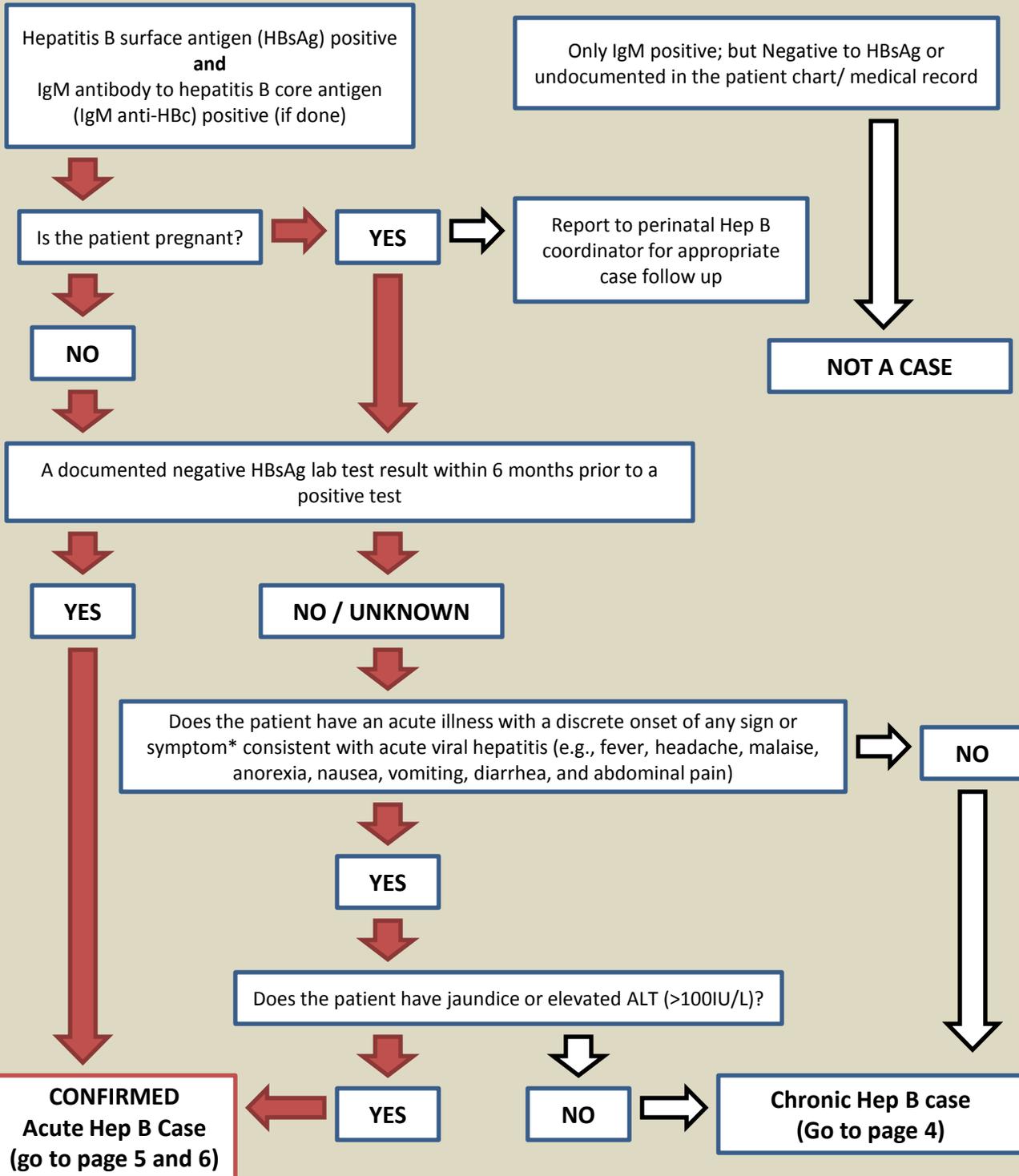
- B. Upon receiving these lab results, follow the investigation procedure outlined in the next pages**
 - A. Investigation timeline: After receiving the lab results, the patient should be contacted within a week and not later than two weeks**

- C. Risk factor information needs to be completed for acute hepatitis B cases**

- D. All pregnant women with HBsAg-positive results should be communicated to the perinatal hepatitis B coordinator immediately, and the surveillance information should be completed in NBS**

- E. Provide educational/prevention messages to all HBsAg-positive and perinatal cases**

Hepatitis B Case Classification



Note: All relevant serological markers, nucleic acid test results, and clinical information (yes/no answers) need to be completed in NBS for all reportable lab results, and the case investigation needs to be closed once the investigation is complete.

Chronic Hepatitis B Case Classification

IgM antibodies to hepatitis B core antigen (IgM anti-HBc) negative

AND

a positive result on one of the following tests: hepatitis B surface antigen (HBsAg), hepatitis B e antigen (HBeAg), or nucleic acid test for hepatitis B virus DNA (including qualitative, quantitative, and genotype testing)

OR

HBsAg positive or nucleic acid test for HBV DNA positive (including qualitative, quantitative and genotype testing) or HBeAg positive two times at least 6 months apart (Any combination of these tests performed 6 months apart)

AND

Does not meet the case definition for acute hepatitis B



**Confirmed Chronic Hep B Case
(Go to page 7)**

Single HBsAg positive or HBV DNA positive (including qualitative, quantitative, and genotype testing) or HBeAg positive lab result

AND

Does not meet the case definition for acute hepatitis B



**Probable Chronic Hep B Case
(Go to page 7)**

Prevention Messages and Data Collection: Acute Hepatitis B Cases

Prevention for Acute Hep B

At-risk* contacts should get Hep B vaccine. Hep B vaccine is available for contacts free of charge at health department clinics.

Provide information that at-risk* contacts should talk to their primary doctor for testing and case management (if tested positive).

If the patient is pregnant, ensure that the perinatal coordinator is informed for necessary follow-up and case management.

Provide preventive information: Use condoms, do not share personal items like razors, use barrier precautions, stop drug use or use clean needles and syringes, do not share drug paraphernalia, and limit alcohol intake/consumption.

Inform that at-risk* contacts can get immunoglobulin at emergency department, if applicable (see page 6).

Documentation for Acute Hep B

Complete the risk factors and other clinical information in NBS, and indicate the pregnancy status.

Indicate in NBS, under comment section if prevention information is provided. You may type PAG (prevention advice given) under comment section to indicate that prevention message is given.

•**At Risk Contacts:** Includes sexual contacts, household contacts, and contacts with blood exposure (e.g., sharing of needle sharing, glucose meters, or lancets).

Prevention Messages and Data Collection: Acute Hepatitis B Cases

TABLE. Guidelines for postexposure prophylaxis* of persons with no occupational exposures⁺ to blood or body fluids that contain blood by exposure type and vaccine status

Exposure	Treatment	
	Unvaccinated person ^{&}	Previously vaccinated person [%]
<i>HBsAg** positive source</i>		
Percutaneous (e.g., bite or needlestick) or exposure to HbsAg-positive blood or body fluids	Administer hepatitis B vaccine series and hepatitis B immune globulin (HBIG)	Administer hepatitis B vaccine booster dose
Sex or needle-sharing contact of an HbsAg-positive person	Administer hepatitis B vaccine series and HBIG	Administer hepatitis B vaccine booster dose
Victim of sexual assault / abuse by a perpetrator who is HbsAg-positive	Administer hepatitis B vaccine series and HBIG	Administer hepatitis B vaccine booster dose
<i>Source with unknown HbsAg status</i>		
Victim of sexual assault / abuse by a perpetrator with unknown HbsAg status	Administer hepatitis B vaccine series	No treatment
Percutaneous (e.g., bite or needlestick) or exposure to HbsAg-positive blood or body fluids from a source with unknown HbsAg status	Administer hepatitis B vaccine series	No treatment
Sex or needle-sharing contact of person with unknown HbsAg status	Administer hepatitis B vaccine series	No treatment

*When indicated immunoprophylaxis should be initiated as soon as possible, preferably within 24 hours. Studies are limited on the maximal interval after exposure during which postexposure prophylaxis is effective, but the interval is unlikely to exceed 7 days for percutaneous exposure or 14 days for sexual exposures. The hepatitis B vaccine series should be completed.

+These guidelines apply to nonoccupational exposures. Guidelines to management of occupational exposures have been published separately and also can be used for management of nonoccupational exposures, if feasible

[&]A person who is in the process of begin vaccinated but who has not completed the vaccine series should complete the series and receive treatment as indicated.

[%]A person who has written documentation of a completed hepatitis B vaccine series and who did not receive postvaccination testing

**Hepatitis B surface antigen

Prevention Messages and Data Collection: Chronic Hepatitis B Cases

Prevention for Chronic Hep B

Provide preventive information: Use condoms, do not share personal items (e.g., razors, diabetic lancets and glucometer), use barrier precautions, stop drug use or use clean needles and syringes, do not share drug paraphernalia, and limit alcohol intake/consumption.

At-risk* contacts should get Hep B vaccine. Hep B vaccine is available for contacts free of charge at department of health clinics.

Provide information that at-risk* contacts should talk to their primary doctor for testing and case management (if tested positive).

If the patient is pregnant, ensure that the perinatal coordinator is informed for necessary follow-up and case management.

Documentation for Chronic Hep B

Enter in NBS that the patient does not have symptoms or is not jaundiced. Indicate the pregnancy status in NBS.

Indicate in NBS, under comment section if prevention information is provided. You may type PAG (prevention advice given) under comment section to indicate that prevention message is given.

***At-Risk Contacts:** Includes sexual contacts, household contacts, and contacts with blood exposure (e.g., sharing of needle sharing, glucometers, or lancets)

Follow-Up Prevention Messages for Hepatitis B Positive Patients

If case patient is available:

“This is *[insert your name]* calling from *[insert your agency]*. I would like to speak with *[insert name of patient]* about a recent illness *[he/she]* has had. Is *[insert name of patient]* available?”

“Hold on a moment.”

“Hello?”

“This is *[insert your name]* calling from *[insert your agency]*. Is this *[insert name of patient]*?”

“Yes.”

“I am calling to talk to you about your recent doctor’s visit. Do you have about 10 minutes for me to go over some important information?”

- **If no, schedule a time to call back.** –

- **If yes, continue below.** –

“During your recent doctor’s visit at *[insert name of clinic or doctor’s office]* you had a blood sample for testing. One of the blood tests done indicates that you are positive for hepatitis B. Have you have been told before that you have hepatitis B?”

- **If yes, continue below.** –

“Hepatitis is an inflammation of the liver. The hepatitis B virus is one of causes of this inflammation. When inflamed, it becomes increasingly difficult for the liver to perform its job.”

Follow-Up Prevention Messages for Hepatitis B Positive Patients

“A person may have hepatitis B and not have any symptoms. It is possible to spread hepatitis B to others in the absence of symptoms. If symptoms are present, they may include:

- Yellow skin or eyes – also known as jaundice
- Loss of appetite
- Feeling tired
- Muscle, joint or stomach pain
- Nausea, vomiting or diarrhea

A person becomes infected with hepatitis B when they are exposed to or come in contact with blood, semen, or other body fluids from someone who is already infected with hepatitis B. This exposure can happen:

- During sexual intercourse
- By sharing personal items, like razors or toothbrushes
- By sharing needles, syringes, or other drug paraphernalia
- By passing from mother to child during birth
- By sharing diabetic lancets and glucometers

There are a number of things that you can do to prevent hepatitis B from spreading to others:

- Using condoms appropriately during sexual intercourse; avoid rough sex
- Don't share personal items, like razors or toothbrushes
- Don't inject drugs; if one chooses to continue, don't share needles, syringes, or other drug paraphernalia
- Don't share diabetic lancets and glucometers”

Follow-Up Prevention Messages for Hepatitis B Positive Patients

“Those who live in the same household with you, are sexual partners, or have come in contact with your blood in some way (such as sharing of personal items or sharing a needle), are at risk for getting hepatitis B. Encourage those persons to take the preventive measures mentioned.

These at-risk contacts should get the hepatitis B vaccine for additional protection. They can get the vaccine at their healthcare provider’s office. If he/she doesn’t have a regular doctor, they can get the vaccination at the health department.”

For pregnant cases only:

“You should be receiving a phone call from the Perinatal Hepatitis B Coordinator from the local Health Department sometime within the next week. If, after two weeks, you have not received that phone call, please call 615-741-7247 and ask for the Perinatal Hepatitis B Coordinator. This person should be able to put you in touch with the local coordinator.”

Follow-Up Prevention Messages for Hepatitis B Positive Patients

For all other cases:

“There are a number of things **you** can do to take care of yourself:

- Avoid drinking alcohol and IV drug use
- Do not share personal items or diabetes equipment
- Eat healthy, get plenty of rest, and exercise
- See your healthcare provider for further care

Do you have access to the internet at home, or can you get to a library that has internet access? The Health Department has a website with many resources regarding hepatitis B. The website can be found at:

http://health.state.tn.us/Ceds/Adult_Viral_Hepatitis/Adult_Viral_Hepatitis.shtml

You can also Google ‘adult viral hepatitis, Tennessee’. The top option should be the State’s website called ‘Adult Viral Hepatitis – the Tennessee Department of Health’. Start by looking at the following sections:

- Patient Education – Hepatitis B
- Tennessee Specific Resources
- Hepatitis Treatment and Financial Resources
- Support Groups

If you find that you have additional questions after reviewing the website, please call 615-741-7247 and ask for the Adult Viral Hepatitis Prevention Coordinator.”

Follow-Up Prevention Messages for Hepatitis B Positive Patients

If case patient ***is not*** available:

“This is [***insert your name***] calling from [***insert your agency***]. I would like to speak with [***insert name of patient***] about a recent illness [***he/she***] has had.”

“[***Insert name of patient***] is not available right now.”

“Could you ask [***insert name of patient***] to call me at [***insert your phone #***]?”

NOTE:

Per the folks in FoodNet, they usually call people once in the AM and once in the PM on each of 4 days. If they are still unable to reach the case patient, they send information in the form of a letter.



Name: _____ DOB: ___/___/___
 Today's Date: ___/___/___

This Patient is Diagnosed With:

- Acute Hepatitis B Chronic Hepatitis B

Receive the Following Prevention Messages:

- Provide patient with population specific CDC hepatitis B fact sheet
- Instruct patient
- That hepatitis B is spread through contact with blood or other body fluids from someone who is already infected with hepatitis B
 - That it is possible to spread hepatitis B even though I don't have symptoms
 - To use protective barriers (e.g., condoms) during sexual intercourse
 - To not share personal items (e.g., razors or toothbrushes)
 - If an IV drug user
 - Strongly encourage patient to stopping the use of IV drugs
 - Refer patient to appropriate care if receptive to treatment
 - Choosing to continue, instruct patient to not share needles, syringes or other paraphernalia
 - If diabetic: instruct patient to not share lancets or glucose meters

Offer the Following Vaccination Messages:

- Strongly encourage patient to tell the following individuals to get vaccinated:
- Household Contacts Blood Contacts
 - Sexual Contacts Individuals with Diabetes
- Contacts can get hepatitis B vaccinations from:
- Their healthcare provider
 - Free of charge from their local health department if they don't have insurance

Offer the Following Follow-Up Care:

- Instruct patient to encourage contacts to follow up with their healthcare provider about getting tested for hepatitis B and any follow-up care needed based on results
- If pregnant:
- Instruct the patient that the Perinatal Hepatitis B Coordinator at the local health department will contact me regarding follow-up care
 - Instructed to follow up with the Perinatal Hepatitis B Coordinator at 615-741-7247 if I have not received a call within 2 weeks.
- For all others:
- Instruct to go to the State Health Department's Adult Viral Hepatitis website by googling "adult viral hepatitis Tennessee" and select the 1st option ("Adult Viral Hepatitis – the Department of Health")
 - Encourage patient to contact the Adult Viral Hepatitis Prevention Coordinator at 615-741-7247 with any further questions



Name: _____

Today's Date: ___/___/___

I Have Been Diagnosed With:

- Acute Hepatitis B Chronic Hepatitis B

Did I Receive the Following Prevention Messages:

- Received population specific CDC hepatitis B fact sheet
- Instructed
- That hepatitis B is spread through contact with blood or other body fluids from someone who is already infected with hepatitis B
 - That it is possible to spread hepatitis B even though I don't have symptoms
 - To use protective barriers (e.g., condoms) during sexual intercourse
 - To not share personal items (e.g., razors or toothbrushes)
 - If an IV drug user
 - Strongly encouraged stopping the use of IV drug use
 - Referred to appropriate care if receptive to treatment
 - Choosing to continue, instructed to not share needles, syringes or other paraphernalia
 - If diabetic: instructed to not share lancets or glucose meters

Was I Offered the Following Vaccination Messages:

- Strongly encouraged to tell the following individuals to get vaccinated:
- Household Contacts Blood Contacts
 - Sexual Contacts Individuals with Diabetes
- Contacts can get hepatitis B vaccinations from:
- Their healthcare provider
 - Free of charge from their local health department if they don't have insurance

Was I Offered the Following Follow-Up Care:

- Instructed to encourage contacts to follow up with their healthcare provider about getting tested for hepatitis B and any follow-up care needed based on results
- If pregnant:
- Instructed that the Perinatal Hepatitis B Coordinator at the local health department will contact me regarding follow-up care
 - Instructed to follow up with the Perinatal Hepatitis B Coordinator at 615-741-7247 if I have not received a call within 2 weeks.
- For all others:
- Instructed to go to the State Health Department's Adult Viral Hepatitis website by googling "adult viral hepatitis Tennessee" and select the 1st option ("Adult Viral Hepatitis – the Department of Health")
 - Encouraged to contact the Adult Viral Hepatitis Prevention Coordinator at 615-741-7247 with any further questions