

Labor & Delivery HBsAg Admission Checklist for Birthing Mother

For your answers, please check “yes” or “no,” and add check marks and your initials where indicated.

STEP 1

Check new patient’s hepatitis B status	YES	NO	RN init
Was the recommended test ordered, i.e., HBsAg (not antiHBs, HBsAb, antiHBc, HBcAb)?			
Was the test result obtained during this pregnancy (and not from an earlier pregnancy)?			
Is there a copy of the original HBsAg lab report in the prenatal record (not a transcribed test result)?			

▲ If any question above is answered “no,” fill out chart A at right, and then proceed to Steps 2 and 3. ►

STEP 2

Spoken introduction for this section, if it is helpful: While the questions I am about to ask may feel unnecessary or intrusive, we ask them of ALL our patients. We ask because if there is even a chance you might have been unknowingly exposed to the hepatitis B virus at any time during your pregnancy, we need to know so we can protect your baby from becoming infected with this very serious disease. We hope you understand.

Screen new patient for hepatitis B risk factors during this pregnancy	YES	NO	RN init
Have you had hepatitis (e.g., skin or eyes turned yellow) since your previous hepatitis B test?			
Have you had sex with a person who is HBsAg-positive?			
Have you injected illegal drugs during this pregnancy?			
Have you had more than one sex partner in last 6 months?			
Have you been evaluated or treated for a sexually transmitted infection during this pregnancy?			

▲ If any question above is answered “yes,” fill out chart A at right, and then proceed to Step 3. ►

STEP 3

If HBsAg test result is positive (whether STAT or routine):	not applicable	when done, add check	RN init
Alert nursery staff that the newborn is high risk and will need postexposure prophylaxis with hepatitis B immune globulin (HBIG) and hepatitis B vaccine within 12 hours of birth.			
Educate mother that the baby is at risk for HBV transmission at birth and will need: <ul style="list-style-type: none"> • Prophylaxis beginning within 12 hours of birth and continuing through until the HepB vaccine series is completed. • Lab work after HepB series is completed to determine if infant is infected with HBV. • Referral of mother and infant to Perinatal Hepatitis B Prevention Program for follow up. 			
Provide mother with language-appropriate information about hepatitis B treatment and prevention.			
Notify your Perinatal Hepatitis B Prevention Program of birth to HBsAg-positive mother.			

FOR HOSPITAL INPATIENT INFORMATION

A

If any question in Step 1 or 2 indicates immediate need for HBsAg screening, do the following:	when done, add check	RN init
Draw hepatitis B surface antigen (HBsAg) test from mother STAT.		
Verify with the lab that they will call L&D and nursery with the STAT HBsAg test result as soon as it is available.		
Notify the responsible nursery nurse that the HBsAg test result is pending.		
Contact the lab if the test result is not back by the expected time.		
Notify the responsible nursery nurse that if HBsAg results are still pending 12 hours after birth, the infant should immediately be administered post-exposure prophylaxis based on infant’s birth weight: <ul style="list-style-type: none"> • < 2,000 grams administer HBIG and hepatitis B vaccine. • ≥ 2,000 grams administer hepatitis B vaccine. 		

◀ Be sure to complete Steps 2 and 3.

SIGNATURE(S)

NURSE SIGNATURE _____ DATE AND TIME _____

NURSE SIGNATURE _____ DATE AND TIME _____

NURSE SIGNATURE _____ DATE AND TIME _____

