

**Hepatitis B Immunoglobulin (HBIG) for post-exposure prophylaxis (PEP)  
in NEONATES born to women with Hepatitis B virus infection (HBV) in pregnancy  
(peri-natal exposure to HBV)**

Please note that UHS Pharmacy will issue HBIG only when both PRESCRIPTION and RISK ASSESSMENT FORMS are completed. (MONTHLY RETURNS TO THE DEPT OF HEALTH)  
Risk assessment form: page 1 Prescription form: page 2

FALSIFYING THIS RISK ASSESSMENT MAY RESULT IN A PATIENT RECEIVING HBIG INAPPROPRIATELY.  
RISK ASSESSMENTS ARE RETROSPECTIVELY REVIEWED.

**Please note**

→ Whenever a pregnant woman is found to be highly infectious with HBV (see below) in the routine antenatal screening for infection (usually performed between during the first trimester of pregnancy) HBIG 200IU is requested under her name from the Immunisation Division, Colindale, London. The Immunisation Division issues HBIG 200 IU 5-6 weeks prior delivery and the drug is stored in the Neonatal Unit (Princess Ann Hospital) until the time of delivery.

→ In some circumstances, however, neonates of HBV infected women in need of HBIG 200IU do not have this drug available under their mother's name at delivery. These case scenarios include:

- The HBV positive mother delivers prematurely, before the HBIG 200IU is sent by the Immunisation Division to the Neonatal Unit;
- The mother is found to be infected with HBV at delivery (concealed pregnancies, recent immigration to the UK, previously declined antenatal HBsAg screening test, recent acute hepatitis B);
- The HBV positive mother has been transferred urgently from another region to deliver at the Princess Ann Hospital.

→ In these cases Neonatologists can request HBIG 200IU from the UHS Pharmacy by completing this risk assessment and prescription forms.

→ HBIG should be administered preferably within 24 hours of delivery.

→ HBIG is always administered in conjunction with the first dose of an accelerated course of hepatitis B vaccine, at different body sites.

**Risk assessment form**

**Box A**

The mother of this newborn is <b>HBsAg positive</b> and:			
	(1) Unknown HBeAg and anti-HBe status	YES	NO
OR	(2) HBeAg Positive, irrespective of the anti-HBe status	YES	NO
OR	(3) Anti-HBe Negative, irrespective of the HBeAg status	YES	NO
OR	(4) HBV Viral Load $\geq 1 \times 10^6$ IU/L ( $\geq 5 \times 10^6$ HBV DNA copies/ml)	YES	NO

*Please note that HBeAg positive status and HBV VL > 1 x 10<sup>6</sup> copies/ml usually, but not necessarily, coexist*

**Box B**

The birth weight of this newborn is < 1.5 Kg (irrespective of the gestational age) and his/her mother has chronic HBV infection with any HBV serological profile, including the HBeAg negative and anti-HBe positive status. Please report here the birth weight: .....	YES	NO
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**Box C**

Mother has had acute hepatitis B during pregnancy	YES	NO
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Performed by (block letters)	Doctor's signature	Date
Designation	Department	
Patient's name	Patient's date of birth	Patient's hospital number
Mother's name	Mother's date of birth	Mother's hospital number
Home Address		

<b>One of the following is required:</b>			
At least	ONE YES answer from BOX A	<b>YES</b>	<b>NO</b>
And/or	the YES answer from BOX B	<b>YES</b>	<b>NO</b>
Or	the YES answer from BOX C	<b>YES</b>	<b>NO</b>
		It is sufficient ONE YES box ticked above to establish that this neonate requires HBIG	

Please note: HBIG is issued only when the UHS Pharmacy receives **HBIG PRESCRIPTION & the RISK ASSESSMENT FORMS** (required for HBIG returns to the Department of Health)  
Deliver or Fax (023 8120 6792) prescription and risk assessment forms to main dispensary Southampton General Hospital. If faxed, the original prescription will need to be received by pharmacy within 72 hours.  
Out of hours contact the Pharmacist on call through UHS switchboard (Tel 023 80 777 222)

**Prescription for Supply of Hepatitis B Immunoglobulin (HBIG) 200 IU  
FOR USE IN NEONATES ONLY**

**Patient Details**

Patient's Forename		Patient's Surname	
Date of birth	NHS or Hospital number	Baby's birth weight	
Address			

**Product Details**

Product (including form and strength where necessary) <b>HBIG for neonatal use</b> <input type="checkbox"/> <b>(Contains approximately 200 IU)</b>	Quantity <b>1 vial</b> <input type="checkbox"/>
Please note that in case HBIG 200 IU (neonatal dose) is unavailable, UHS Pharmacy can issue HBIG 500 IU (adult dose): in this cases the neonates must receive 2/5 of its volume.	
<b>HBIG is always given together with the 1<sup>st</sup> dose of HBV vaccine, but at a different body site</b>	
Directions	Intramuscular injection

**Authorisation**

Name (in block letters)	Signature
Designation (the prescriber should be a Neonatologist)	Ward
Contact number	Date

**Collection/Delivery Method:** Please check that arrangements are in place to have the injection(s) administered. Please specify

Taxi or Courier arranged by Other Hospital <input type="checkbox"/>	Product to be sent to the Neonatal Unit, Princess Ann Hospital, by prior arrangement. Please state name and contact details of Neonatologist with whom HBIG 200 IU treatment administration has been agreed
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**Pharmacy Use Only** Make sure that HBIG vials are stored within are the cold chain until use

Screened by:	Dispensed by:	Checked by:	Product details:	Batch No	Date:
Cost code Inpatients: Ward Outpatients: Pathology SGH		Stock location Fridge, SGH main dispensary	HBIG	Expiry date	Essential record keeping Log details of this supply in the immunoglobulin register. Ensure one copy is made (for the patient/healthcare professional) The original prescription and risk assessment form needs to be filed in the IM immunoglobulin folder. Please file appropriately immediately after checking.

**HBIG 200 IU is recommended at birth in the following case scenarios:**

1. Mother has had acute Hepatitis B in pregnancy	4. Mother is HBsAg positive with unknown HBeAg and anti-HBe status
2. Mother is HBsAg positive and HBeAg positive, irrespective of the anti-HBe status	5. Mother's HBV Viral Load is $\geq 1 \times 10^6$ IU/ml ( $\geq 5 \times 10^6$ HBV DNA copies/ml)
3. Mother is HBsAg positive and Anti-HBe negative, irrespective of the HBeAg status	6. Baby's birth weight is $\leq 1.5$ kg (irrespective of the gestational age)
<p>→ HBIG should be given as soon as possible after birth, ideally within 24 hours of delivery.</p> <p>→ In neonates, HBIG is always administered in conjunction with HBV Vaccine (at different body sites!).</p> <p>→ The HBV vaccine schedule is: 1<sup>st</sup> dose at birth, 2<sup>nd</sup> dose at 1 month, 3<sup>rd</sup> dose at 2 months, 4<sup>th</sup> dose at 1 year.</p> <p>→ <b>HBV vaccine is available from UHS Pharmacy but it is usually stocked in the Neonatal Unit</b></p>	