

## Worcester Neonatal Hep B Screening & Vaccination Care Pathway

All antenatal women screened at each pregnancy for Hep B status at booking.  
UK guidelines (Department of Health, 1998)

**Positive Maternal Hep B Maternal Hep B**

**Negative**

Positive maternal Hep B result Microbiologist notifies all persons identified on notification list (**Appendix 1**), **unborn child identified as high or low risk**. Information required see **appendix 3**

When notified:

- Consultant in infectious diseases will send out letter for appointment for mother.
- Screening Midwife - flags maternity records; notifies department leads (**Appendix 2**); discuss results & follow up with mother within **10 working days**; obtains consent for immunisation. Arranges HBIg if required (**Appendix 5**).
- Hep B failsafe coordinator (HBFC) logs details onto community database- (details needed see **appendix 3**)
- Paediatrician arranges vaccine/s to be available at delivery

No further action

Around 20 weeks gestation HBFC contacts screening midwife to confirm viability of pregnancy & check/ confirm EDD (post-dating scan results). HBSC notifies Health visiting lead –for potential antenatal visit to reinforce information (**Appendix 7** – health visitor responsibilities)

When child born, (if after 28 weeks gestation) **1st Hep B vaccination given on labour Ward- within 24 hours of birth**. If identified as **high risk** also give **(HBIg) Immunoglobulin at same time**. *Babies with a birth weight of 1500g or less, born to mothers infected with hepatitis B, should receive HBIg in addition to the vaccine, regardless of the e-antigen status of the mother. For Babies born before 28 weeks gestation seek further advice from Paediatrician*

**Immuniser** – complete PCHR (red book- Hep B supplementary page); inform screening midwife.

**Screening Midwife** -notifies HBFC of birth & vaccine details (details needed see **appendix 4**);

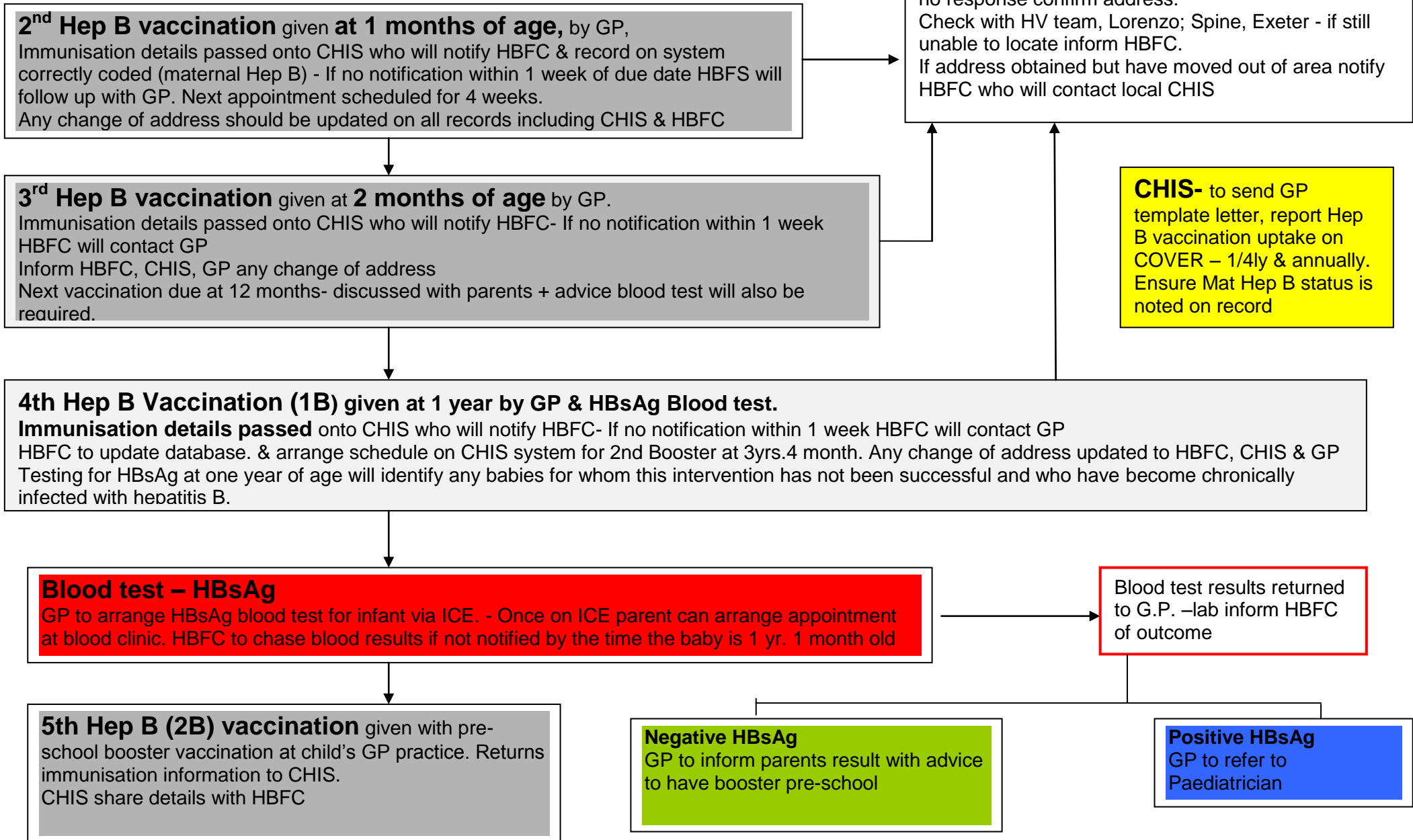
**HBFC** -notify local Child Health Information Services (CHIS), record details on Hep B database;

**CHIS** – sends template letter to GP identifying when Imms due and advising GP to contact patient for appointments.

**Discharge midwife**- See **appendix 6**

**Community Midwife & Health Visitor** responsibilities –See appendix 7

If HBFC not notified of birth within 2 weeks of EDD- he/she will contact Screening Midwife to check status.



## Appendix 1

### Lab Maternal HBV + Notification List

<u>Title, department</u>	<u>Named Person</u>	<u>Contact details</u>
Lab lead Virology / Microbiology	Dr C R Catchpole: Consultant Microbiologist Mrs J Mulpeter: Senior BMS Virology	<a href="mailto:Chris.catchpole@worcascute.nhs.uk">Chris.catchpole@worcascute.nhs.uk</a> / <a href="mailto:chris.catchpole@nhs.net">chris.catchpole@nhs.net</a> (for PID) Tel: 01905 733032 ext. 30658 <a href="mailto:Jane.mulpeter@worcascute.nhs.uk">Jane.mulpeter@worcascute.nhs.uk</a> ext.30669
Midwife Lead for antenatal screening	Sonya Woodcock Macfarlane Janice	<a href="mailto:Sonya.Woodcock@worcsacute.nhs.uk">Sonya.Woodcock@worcsacute.nhs.uk</a> or <a href="mailto:sonya.woodcock@nhs.net">sonya.woodcock@nhs.net</a> . (For PID) Tel: 01905 733926 Internal: 30731 <a href="mailto:j.macfarlane1@nhs.net">j.macfarlane1@nhs.net</a>
Hep B Failsafe Coordinator (HBFC)	Jacqui Cornock	<a href="mailto:Jackie.cornock@nhs.net">Jackie.cornock@nhs.net</a> Tel: 01789 414593 Mobile: 07798825110 Fax: 01789 296701
Local CHIS Manager	Trudi Richardson	<a href="mailto:Trudi.Richardson@hacw.nhs.uk">Trudi.Richardson@hacw.nhs.uk</a> or <a href="mailto:trudi.richardson@nhs.net">trudi.richardson@nhs.net</a> (for PID) Tel: 01905 681597
Consultant in Infectious diseases	Mark Roberts	<a href="mailto:Mark.roberts@worcacute.nhs.uk">Mark.roberts@worcacute.nhs.uk</a>

## Appendix 2

### Antenatal Screening coordinator Notification List

Patient	Within 10 days of result	Individual patient	
Patients GP	Within 6 weeks of notification	Individual GP	Located on patient records
Neonatologist (Hep B lead)	Within 6 weeks of notification	Viviana Weckemann	Tel: 01905 760736 <a href="mailto:Viviana.Weckemann@worcsacute.nhs.uk">Viviana.Weckemann@worcsacute.nhs.uk</a> <a href="mailto:viviana.weckemann@nhs.net">viviana.weckemann@nhs.net</a> (for PID)
Labour Ward	When patient reaches 20/40 gestation		Alert put in patients notes
Community Midwifery Services	After the birth & prior to discharge		Individual teams
Hep B Failsafe Coordinator (When EDD available & @ birth notification)	When scanned EDD available & @ birth notification	Jacqui Cornock	<a href="mailto:Jackie.cornock@nhs.net">Jackie.cornock@nhs.net</a> Tel: 01789 414593 Mobile: 07798825110 Fax: 01789 296701
Health Visiting lead	Around 20 weeks gestation	Helen Wood	<a href="mailto:helena.wood@nhs.net">helena.wood@nhs.net</a>

***NB if late booking i.e. after 24 weeks referral to colleagues above should be immediately on receipt of positive result***

### Appendix 3

<b>Pre-natal information requirements</b>	Name of mother, DOB, NHS number, GP, address, EDD
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### Appendix 4

<b>Post natal vaccination information requirements</b>	Name of baby, DOB, NHS number, mums name, GP, address, Date vaccine given, site, batch number, vaccine name, and dose.
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### Appendix 5

#### How to obtain HBIg & paediatric Hep B vaccine

In West midlands area Heartlands Hospital (Birmingham) hold supplies of **HBIg**. Contact details for obtaining HBIg for routine & in an emergency (i.e. pre-term labour) are:

**In hours \_ 0121 4242240 (lab) or alt numbers: 0121 4242248 / 0121 4242513**

**Out of hours – 0121 4242000 main switch – ask for on call duty virologist**

Requesting hospital then arranges collection

The **Paediatric Hep B vaccine** should be kept in stock in hospital pharmacy as this has a reasonable length expiry date and probably not easily to obtain in 24-48 hour time limit. Pharmacies / GP's can obtain it direct from either of two manufacturers:

**GlaxoSmithKline (Tel: 0808 100 9997).**

**Sanofi Pasteur MSD (Tel: 0800 0855511).**

## **Appendix 6**

### **Discharge Midwife duties (NSC, 2010)**

NSC states: on discharge the midwife should:

- discuss baby's immunisation schedule and importance of completion. Confirm process for follow-up appointments
- complete all relevant vaccination forms
- Record woman's hep B status and vaccinations in PCHR
- inform CHIS of status/vaccination
- notify GP, HV, HBFS of vaccinations status and follow-up
- It is of vital importance that the woman's discharge address is accurate as follow up will be compromised if a health visitor is not able to contact the woman (NSC 2010), equally immunisation appointments will not get to the parents.

## **Appendix 7**

### **Community Midwife & health visitor responsibility**

#### **Community Midwife –**

- Check 1<sup>st</sup> vaccine has been given within 24 hours of birth & Hep B page has been inserted into PHCR ( red book)
- Check mother has registered child with GP,
- Check parents have a good understanding of the importance of these immunisations, the Hep B vaccine schedule and how to raise concerns if no appointment received.
- Stress importance of keeping up to date address with GP

#### **Health visitor –**

- Antenatal visit – discuss immunisation schedule & follow up with parents
- Birth visit & subsequent contacts -confirm & reinforce above
- check baby has follow up appointments for vaccination and serology ( at 12 months)
- movement into area; HV to check hep B status and plan future care , inform GP, CHIS, HBFC and organise referral into Paeds service (if relevant).
- Movement out of area: share details with receiving area to ensure vaccination schedule is arranged.