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To: Local Health Departments and Tribal Health Clinics

From: Jim Vergeront, M.D.
 Acting Chief Medical Officer and State Epidemiologist for Communicable Diseases

**Implementation of Reporting Positive Hepatitis B Virus-Related Laboratory Results
 Among Children Aged 5 years and Younger**

PLEASE DISTRIBUTE WIDELY

The Department of Health Services, Division of Public Health (DPH), has requested clinical laboratory directors to report all hepatitis B surface antigen (HBsAg) and hepatitis B surface antibody (anti-HBs) results among children aged 5 years and younger. The purpose of this request of clinical laboratory directors is to:

- Simplify receipt of HBsAg and anti-HBs laboratory results done as part of post-vaccination serologic testing (PVST) for children born to HBsAg-positive women. Presently, DPH needs to call the pediatric care provider to receive PVST results.
- Ensure that we are receiving all PVST results among children born to HBsAg-positive women.

Implementation

The success of this new reporting process is dependent on your collaboration to implement it. We ask that the following steps be taken to document the HBsAg and anti-HBs results and follow up with the client.

Lab Results	Follow-up Steps
HBsAg (negative); Anti-HBs (positive)	
The result is for a child already in WEDSS as a contact investigation (known birth to HBsAg-positive woman).	<ul style="list-style-type: none"> • Import the results from WEDSS staging. • Enter them onto the "labclinical" tab. • Close out the contact investigation.
The result is for a child not in WEDSS.	Contact the pediatric care provider (not the child's caregiver) to determine the reason for testing.
If testing was for PVST (i.e., child born to HBsAg-positive woman but public health was not aware of the birth), search for the mother in WEDSS.	If the mother has an existing incident in WEDSS: <ul style="list-style-type: none"> • Create a contact investigation for the child. • Import the results from WEDSS staging into the contact investigation. If the mother does not have an existing incident in WEDSS: <ul style="list-style-type: none"> • Create a disease incident for the mother. • Create a contact investigation for the child.

Lab Results	Follow-up Steps
	<ul style="list-style-type: none"> Import the results from WEDSS staging into the contact investigation.
HBsAg (positive); Anti-HBs (negative)	
The child is likely infected with the hepatitis B virus.	Import the results from WEDSS staging and create a disease incident or attach the results to an existing incident, if one exists.
HBsAg (negative); Anti-HBs (negative)	
The result is for a child already in WEDSS as a contact investigation (known birth to HBsAg-positive woman).	<ul style="list-style-type: none"> Import the results from WEDSS staging. Enter them onto the “labclinical” tab.
The result is for a child not in WEDSS.	Contact the pediatric care provider (not the child’s caregiver) to determine the reason for testing.
If testing was for PVST (i.e., child born to HBsAg-positive woman but public health was not aware of the birth), search for the mother in WEDSS.	<p>If the mother has an existing incident in WEDSS:</p> <ul style="list-style-type: none"> Create a contact investigation for the child. Import the results from WEDSS staging into the contact investigation. <p>If the mother does not have an existing incident in WEDSS:</p> <ul style="list-style-type: none"> Create a disease incident for the mother. Create a contact investigation for the child. Import the results from WEDSS staging into the contact investigation.

If it is determined that a child was tested for hepatitis B for a reason other than PVST, please import the results into WEDSS. Note the reason for testing in the comments and close it as “not a case.”

Any births to HBsAg-positive women previously not reported to public health should be reported to Sarah Born, sarah.born2@wi.gov.