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To: Wisconsin Vaccinators

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Communicable Disease

Hepatitis B Vaccine Recommendations

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Summary

- The Wisconsin Department of Health Services (DHS) continues to recommend routine administration of the hepatitis B vaccine within 24 hours after birth for all newborns and the full 3-dose vaccine series for all children by 18 months.
- Serologic testing has no demonstrated role for guiding the schedule of doses in children born to hepatitis B–negative mothers, and is not recommended.
- No new clinical data, on either safety or effectiveness, were presented at the recent CDC ACIP meeting that would justify changes to this longstanding and successful public health practice. Wisconsin recommendations align with the American Academy of Pediatrics' Recommended Child and Adolescent Immunization Schedule.

Background

Following the December 4–5, 2025, meeting of the CDC Advisory Committee on Immunization Practices (ACIP), the Wisconsin Department of Health Services (DHS) has reviewed the votes regarding hepatitis B vaccination. After reviewing the available evidence, including the recommendations of national medical organizations, and consulting with clinicians, health system leaders, and public health partners comprising the Wisconsin Council on Immunization Practices (WCIP), DHS continues to recommend routine administration of the hepatitis B vaccine at birth for all newborns, and the full vaccination series within 18 months.

Hepatitis B vaccine birth dose administration

Decades of data continue to support the universal birth dose as the most evidence-based and equitable strategy for protecting infants from a lifelong infection associated with cirrhosis, liver cancer, and premature death. No new clinical data, on either safety or effectiveness, were presented at the recent ACIP meeting that would justify changes to this longstanding and successful public health practice.

Because the ACIP voted to recommend individual-based decision-making about whether to administer the birth dose to infants born to hepatitis B–negative mothers, DHS offers additional clarification for families and clinicians. Wisconsin DHS encourages open, supportive communication between parents and health care providers. Collaborative decision-making is an important part of high-quality clinical care, and it works best when clinicians and families can rely on well-established evidence.

Hepatitis B serology testing

The ACIP also voted to recommend that parents and clinicians consider hepatitis B serology testing before administering additional vaccine doses. DHS notes that this approach is not part of current pediatric vaccination practice and such testing does not help ensure protection for children. Routine serologic testing has **no demonstrated utility** for guiding the schedule of doses in children born to hepatitis B-negative mothers, and existing evidence continues to support the simple, well-established practice of completing the standard 3-dose vaccine series.

Current standard of care

At this time, no change in clinical practice is recommended in Wisconsin. Newborns should continue receiving a hepatitis B vaccine dose within 24 hours of birth. Wisconsin clinicians are urged to recommend that children complete the full vaccine series according to the [standard immunization schedule published by the American Academy of Pediatrics](#).

DHS will continue to monitor national guidance and emerging evidence, and communicate any future updates to providers, health systems, and the public.

Resources

[American Academy of Pediatrics Childhood Immunization Schedule](#)

[American Academy of Pediatrics statement changes to hepatitis B recommendations](#)

[Wisconsin Department of Health Services Recommended Vaccination Schedule webpage](#)