

Table: Interpretation of Hepatitis B Virus (HBV) Markers of Infection Following Discrepant Hepatitis B Surface Antigen (HBsAg) Lab Results During Pregnancy

*These additional tests help to verify a pregnant person's Hepatitis B status if their first HBsAg is **positive** and their second HBsAg is **negative** during the same pregnancy.*

Additional Tests*	Results of Additional Testing [†]	Interpretation	Action
HBV DNA	Detected	Resolving acute infection [§]	Report to Perinatal Hepatitis B Prevention Unit (PHBPU) Infant needs post-exposure prophylaxis[¶]
Total anti-HBc	Positive		
IgM anti-HBc	Positive		
Anti-HBs	Positive		
HBV DNA	Not detected	False positive HBsAg ^{**} with a history of HBV infection cleared prior to pregnancy <i>OR</i> False negative HBsAg (possible mutant [†])	Report to PHBPU Infant needs post-exposure prophylaxis^{§§}
Total anti-HBc	Positive		
IgM anti-HBc	Negative		
Anti-HBs	Negative		
HBV DNA	Detected	Occult infection	Report to PHBPU Infant needs post-exposure prophylaxis
Total anti-HBc	Positive		
IgM anti-HBc	Negative		
Anti-HBs	Negative		
HBV DNA	Detected	False negative HBsAg (possible mutant [†])	Report to PHBPU Infant needs post-exposure prophylaxis^{§§}
Total anti-HBc	Positive		
IgM anti-HBc	Positive		
Anti-HBs	Negative		
HBV DNA	Not Detected	False positive HBsAg ^{**} with a history of HBV infection cleared prior to pregnancy <i>OR</i> resolved acute infection during pregnancy	Report to PHBPU Infant needs post-exposure prophylaxis
Total anti-HBc	Positive		
IgM anti-HBc	Negative		
Anti-HBs	Positive		

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Additional Tests*	Results of Additional Testing [†]	Interpretation	Action
HBV DNA	Not detected	False positive HBsAg and potentially susceptible ^{¶¶}	Do not report to PHBPU Vaccinate infant per routine guidelines
Total anti-HBc	Negative		
IgM anti-HBc	Negative		
Anti-HBs	Negative		
HBV DNA	Not Detected	False positive HBsAg and potentially vaccinated	Do not report to PHBPU Vaccinate infant per routine guidelines
Total anti-HBc	Negative		
IgM anti-HBc	Negative		
Anti-HBs	Positive		

*Additional tests should be done on the same day as the negative HBsAg result, or as soon as possible after it.

†If no other lab tests are drawn, because HBV infection cannot be ruled out (and risk factors are not always reported), manage as if it is an HBV infection (i.e. Report to PHBPU and give infant post-exposure prophylaxis).

§HBV exposure early in pregnancy.

¶Post-exposure prophylaxis – Administer HBIG and hepatitis B vaccine to the infant within 12 hours of birth.

**False positive HBsAg can occur within 30 days of receiving a hepatitis B vaccine.

‡Mutant HBV that is not detected on the second HBsAg test. Some mutant HBV isolates may be undetectable by HBsAg assays that have not yet incorporated these mutants in their assay systems. FDA-approved Abbott ARCHITECT HBsAg assay and Siemens Centaur HBsAg II assays can detect most commonly occurring HBV mutants.

§§Cannot rule out HBV exposure during pregnancy.

¶¶Susceptible pregnant persons should be vaccinated according to [ACOG recommendations](#).