

**PENNSYLVANIA DEPARTMENT OF HEALTH**

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Testing Recommendations for hepatitis B, hepatitis C,  
HIV and STDs in Pregnant Females



<b>DATE:</b>	10/04/2017
<b>TO:</b>	Health Alert Network
<b>FROM:</b>	Dr. Rachel Levine, Acting Secretary of Health and Physician General
<b>SUBJECT:</b>	<b>Testing Recommendations for hepatitis B, hepatitis C, HIV and STDs in Pregnant Females</b>
<b>DISTRIBUTION:</b>	Statewide
<b>LOCATION:</b>	Statewide
<b>STREET ADDRESS:</b>	Statewide
<b>COUNTY:</b>	Statewide
<b>MUNICIPALITY:</b>	Statewide
<b>ZIP CODE:</b>	Statewide

**This transmission is a “Health Advisory”: provides important information for a specific incident or situation; may not require immediate action.**

**HOSPITALS:** PLEASE SHARE WITH ALL MEDICAL, PEDIATRIC, INFECTION CONTROL, NURSING, AND LABORATORY STAFF IN YOUR HOSPITAL

**EMS COUNCILS:** PLEASE DISTRIBUTE AS APPROPRIATE

**FQHCs:** PLEASE DISTRIBUTE AS APPROPRIATE

**LOCAL HEALTH JURISDICTIONS:** PLEASE DISTRIBUTE AS APPROPRIATE

**PROFESSIONAL ORGANIZATIONS:** PLEASE DISTRIBUTE TO YOUR MEMBERSHIP

The Pennsylvania Department of Health (PADOH) is providing information on the testing recommendations for hepatitis B, hepatitis C, HIV and STDs in pregnant females. The testing recommendations are in alignment with the recommendations in the most recent copy of the CDC STD Treatment Guidelines available online at: [www.cdc.gov/std/treatment](http://www.cdc.gov/std/treatment) and the current American Congress of Obstetricians and Gynecologists (ACOG) Guidelines for Perinatal Care, available online at: [https://www.acog.org/resources\\_and\\_publications](https://www.acog.org/resources_and_publications).

Due to the recent increases in STDs and individuals with Opioid addiction, PADOH is encouraging OB/Gyn providers to review these testing recommendations for pregnant females and assure that their practices are in adherence.

**General Recommendation for Syphilis, HIV, and Hepatitis B and Hepatitis C Testing of Pregnant Females**

Offer pregnant women a test for syphilis and HIV at the time of first examination for conditions related to pregnancy in alignment with **28 Pa Code § 27.89 (a)(1)(i)**.

All pregnant women should also be routinely screened for HBsAg during the first prenatal visit, or within 15 days of the first visit, but no later than the time of delivery.

At the time of admission to the hospital for delivery, test the patients who were not screened prenatally, and retest those with signs or symptoms of hepatitis B, and those who engage in behaviors that put them at high risk for infection such as having had more than one sex partner in the previous six months, evaluation or treatment for an STD, recent or current injection-drug use, and/or an HBsAg-positive sex partner.

**Special Note for High Risk Females**

High Risk Pregnant Females (females who report any of the following: previous STD such as gonorrhea or chlamydia; multiple partners; and/or drug use) are strongly encouraged to get syphilis and HIV testing during the third trimester of pregnancy; rapid HIV testing during labor (if not previously tested), and syphilis testing upon delivery of a child (or a stillborn child).

Hepatitis C testing is recommended for pregnant females who have risk factors for infection, which include current or past injection drug use; blood transfusions prior to July 1992, unregulated tattoos, long term hemodialysis, intranasal drug use and other percutaneous exposures, and certain medical conditions, such as HIV.

**Special Note on Syphilis Treatment:** Parenteral Benzathine penicillin **G** is the only therapy with documented efficacy for syphilis during pregnancy. Pregnant women with syphilis in any stage who report penicillin allergy should be desensitized and treated with Benzathine penicillin **G**. Due to the recent changes in health care delivery and a nationwide shortage of the drug, some providers have not been able to obtain cost-effective access to Benzathine penicillin **G** for their at-risk pregnant clients. In these situations, providers are strongly encouraged to contact PADOH for treatment assistance. Additional information on the treatment and follow-up of syphilis is also available by consulting the CDC’s “Sexually Transmitted Diseases Treatment Guidelines – 2015,” that is available on the internet at [www.cdc.gov/std/treatment/](http://www.cdc.gov/std/treatment/) .

**Additional Information**

Physicians needing additional information are asked to call the following number:  
Pennsylvania Department of Health

Division of TB/STD  
717- 787-3981  
8 a.m. – 4 p.m.

Division of Immunizations  
717- 787-5681  
8 a.m. – 4 p.m.

Division of HIV Disease  
717- 783-0572  
8 a.m. – 4 p.m.

**Additional Web Links**

Additional information on syphilis testing and treatment for pregnant women can be found online at: [www.cdc.gov/std/treatment](http://www.cdc.gov/std/treatment)

Up-to-date information on the nationwide shortage of Benzathine penicillin G is available online at: [www.cdc.gov/std/treatment/drugnotices/bicillinshortage.htm](http://www.cdc.gov/std/treatment/drugnotices/bicillinshortage.htm).

Additional information on HIV and pregnant women can be found at: [www.cdc.gov/hiv/group/gender/pregnantwomen/index.html](http://www.cdc.gov/hiv/group/gender/pregnantwomen/index.html)

Categories of Health Alert messages:

**Health Alert:** conveys the highest level of importance; warrants immediate action or attention.

**Health Advisory:** provides important information for a specific incident or situation; may not require immediate action.

**Health Update:** provides updated information regarding an incident or situation; unlikely to require immediate action.

This information is current as of October 4, 2017, but may be modified in the future.