

**Table 1: Recommended Post-Exposure Prophylaxis for Exposure to Hepatitis B Virus**

Vaccination and antibody response status of exposed workers (1)	Treatment		
	Source HBsAg positive (2)	Source HBsAg negative (2)	Source Unknown or not available to test
<b>Unvaccinated:</b>	HBIG x 1 (3) and initiate HB vaccine series (4)	Initiate HB vaccine series	Initiate HB vaccine series
<b>Previously Vaccinated:</b>			
Adequate response to antibodies (5)	No Treatment	No Treatment	No Treatment
Inadequate response to antibodies (6)	HBIG x 1 and initiate revaccination or HBIG x 2 (7)	No Treatment	If known high risk source, treat as if source were HBsAg positive
Antibody response unknown	Test exposed person for anti-HBs (8) 1. If adequate (5) no treatment is necessary 2. If inadequate (6) administer HBIG x 1 and vaccine booster	No Treatment	Test exposed person for anti-HBs (8) 1. If adequate, (5) no treatment is necessary 2. If inadequate (6) administer vaccine booster recheck titer in 1-2 months

- (1) Persons who have previously been infected with HBV are immune to reinfection and do not require post exposure prophylaxis  
(2) Hepatitis B surface antigen  
(3) Hepatitis B immune globulin; dose is 0.06 mL/kg intramuscularly  
(4) Hepatitis B vaccine  
(5) Adequate Response = levels of serum antibody to HBsAg (serum anti-HBs > 10 mIU/ml)  
(6) Inadequate Response = levels of serum antibody to HBsAg (serum anti-HBs < 10 mIU/ml)  
(7) The option of giving one dose of HBIG and reinitiating the vaccine series is preferred for inadequate responses who have not completed a second 3-dose vaccine series. For persons who previously completed a second vaccine series but failed to respond, two doses of HBIG are preferred.  
(8) Antibody to HBsAg