

Immunization for Hepatitis B

Hepatitis B shots are recommended for all newborns.

The American Academy of Pediatrics, the American Academy of Family Physicians, and the Centers for Disease Control and Prevention (CDC) all recommend that every baby born in the United States be vaccinated against hepatitis B.

What is hepatitis B?

Hepatitis B is a serious liver disease caused by a virus. This Virus enters the bloodstream and attacks the liver. When infants and young children are infected, the virus often remains in the body for decades and causes ongoing liver damage, including liver failure and liver cancer.

Hepatitis B vaccine is an investment in baby's future!

This vaccine protects babies from a disease that they may come in contact with at any time in life.

Three or four injections are needed. The first dose is usually given shortly after birth, before your baby leaves the hospital. The second is given one to two months later, and the third, usually at six months of age. Four doses are needed if your baby's health-care provider uses a combination vaccine for later doses.

Studies show the vaccine offers protection that lasts at least 15 years.

Learn more about hepatitis B:

CDC-INFO Contact Center
(800) 232-4636

Immunization Action Coalition
(651) 647-9009

www.vaccineinformation.org
www.immunize.org

Why does my baby need so many vaccinations?

It's true that little babies get lots of injections, which can cause temporary discomfort. But without these vaccines your baby is susceptible to serious diseases like:

- measles
- tetanus
- hepatitis A
- hepatitis B
- whooping cough
- meningococcal disease
- polio
- rotavirus
- chickenpox
- influenza

Like hepatitis B, many of these diseases can result in severe illness, hospitalizations and even death.

While a few of these diseases have virtually disappeared because of vaccination, reported cases of people with diseases like measles and whooping cough have been on the increase lately.

Even if some diseases do completely disappear in the United States, they are common in other parts of the world and are just a plane ride away. If we stop vaccinating against these diseases, many more people will become infected.

Vaccinating your child will keep him or her safe.

Make sure all your children get their vaccinations!

If you can't afford a clinic visit, contact your city or county health department.

Our Mission

Why we exist.

We are called to reveal the healing love of Jesus to those in need.

Our 2020 Vision

What we are striving to do.

Inspired by faith and committed to excellence, we will lead the transformation of healthcare in our communities.

WomenCareWNY.org

Newborn Screening & Immunization

For Your Baby's Health



Your baby's health is important

Detect

Newborn Screening offers early diagnosis of rare medical conditions in order to provide early treatment for your child.

Prevent

Vaccinations protect your child from disease by stimulating the immune system to create antibodies against certain bacteria or viruses.

Children are our future – protect them!



WomanCareWNY.org

Newborn Screening

What you don't know...

Some medical disorders can affect a child very early in life – even within the first few days. For this reason, prompt testing and diagnosis are important.

The New York State Newborn Screening Program began in 1965 and is a service provided by the State Department of Health to families with newborn babies.

This screening identifies those few infants who may have one of several rare disorders and infants who have been exposed to HIV, the virus that causes AIDS.

A blood test provides important information about your baby's health that you or even your doctor might not otherwise know.

With early diagnosis and medical treatment, serious illness can often be prevented.

Every state has a newborn screening program.

For details on the New York State program and the specific disorders in the panel, please contact:

Newborn Screening Program
Wadsworth Center
New York State
Department of Health
P.O. Box 509
Albany, NY 12201-0509
(518) 473-7552
www.wadsworth.org/newborn/index.htm

For how many disorders is my baby tested?

The number has increased from one in 1965 to more than 40 today, including:

- Cystic Fibrosis
- Krabbe Disease
- Mitochondrial Disease
- Sickle Cell Anemia
- Hypothyroidism
- other genetic, metabolic or blood conditions.

Although these disorders are rare, they are usually serious. Some may be life-threatening. Others may slow down the baby's physical development or cause mental retardation or other problems if undetected and untreated.

Early treatment is very important!

How is my baby tested?

All of the tests are performed on a tiny sample of blood obtained by pricking the baby's heel. The sample is usually taken on the day the baby is discharged from the hospital. The sample is sent for testing to the laboratories of the State Department of Health in Albany.

How much will the tests cost me?

Nothing. The cost of the tests is paid with special funds from the New York State and Federal governments.

But my baby seems healthy. Are these tests still needed?

Yes. Most infants with a disorder identified by the Newborn Screening Program show no signs of the disorder immediately after birth. With special laboratory tests the program can identify and infant who may have one of these disorders and alert the baby's doctor of the need for special care. Usually this can be done before the baby becomes ill.

Will I get the test results?

Your baby's doctor or clinic will be informed of the results and will contact you immediately if anything is wrong. But, as a responsible parent, you should ask about the results when you bring your baby to the doctor or clinic for the baby's first check-up. The pink form given to you by the nurse will tell you how to get the test results from your doctor.

Dear Parents,

Your child's specimen(s) will be stored by the Newborn Screening Program for up to 27 years under secure conditions where access is strictly controlled. Should the need arise, the specimen(s) may be used for diagnostic purposes for your child with appropriate consent. A portion of the specimen will also be stripped of all information that might identify your child and may be used in public health research that has been reviewed and approved by a Board charged with overseeing compliance with all applicable laws and ethical guidelines. You may arrange to have your child's specimen(s) destroyed or prevented from being used in public health research by calling (518) 473-7552.

If all the tests are screen-negative, does that mean my baby will be healthy?

The Newborn Screening Program screens for only a few of the many disorders a baby could have. In addition, some babies with these disorders may not be identified because of differences in the way the blood is collected or the kinds of tests used. You should bring your baby to the doctor or clinic on a regular basis for care. Always watch your baby for unexpected behavior and call a doctor immediately if things don't seem right.

Why is my baby tested for HIV?

HIV can be transmitted by an infected woman to her baby before it is born, during delivery or from breastfeeding. If a baby has HIV antibodies, that means the mother has the virus. In NYS, most pregnant women are tested for HIV in prenatal care. Those who aren't, get tested in the labor and delivery setting.

The newborn screening test is a "safety net" for those who were not tested so that, if positive for HIV, both mother and baby can be referred for further testing and care. The results of HIV tests are confidential.

For more information about HIV call 1-800-541-AIDS (English) or 1-800-233-SIDA (Spanish)

Does a "retest" mean my baby may have a disorder?

Not necessarily. Retesting may be needed for a number of reasons. The most common is that the first sample contained too little blood to complete all tests. This does not mean there is anything wrong with your baby. It simply means that another sample must be taken so that all the tests can be done.

Often, when first test results suggest a problem, the results are not considered final until the tests are done again. This requires a new blood sample. In general, the doctor will discuss the need for further evaluation only when a baby's test is unusual for a second time.

On very rare occasions, because of the potential severity of a particular disorder, the doctor will treat the child immediately while waiting for the results of the second series of tests. If you are asked to have your baby retested, please act quickly, so the repeat test can be done immediately.

What if my baby has one of these disorders? Can it be cured?

None of these disorders can be cured. However, the serious effects can be lessened – and often prevented completely – if a special diet or other medical treatment is started early. Most of these disorders are very complicated to treat and medical care should be coordinated by a specialist in the specific disorder.

In the case of HIV, less than ten percent of babies who test positive are actually infected and will need treatment.

If the baby has a disorder, will my future children have it?

That depends on the disorder. Some disorders are genetic and inherited by children from their parents. Many families seek genetic counseling to better understand how their child got the disorder and to understand risks to their future children and other family members.

Other disorders, such as hypothyroidism and HIV, are not inherited. Hypothyroidism has many causes. And HIV infection is caused by a virus, not a gene.

Remember, time is very important. As a parent, you can help the Newborn Screening Program make sure that your baby is as healthy as possible by making sure your baby's doctor knows how to reach you.

