

Public Health Law: Article 25, Section 2500-e. Pregnant women, blood test for hepatitis B; follow-up care.

§ 2500-e. Pregnant women, blood test for Hepatitis B; follow-up care

1. At the time that a blood sample is taken to be tested for syphilis pursuant to section twenty-three hundred eight of this chapter, every physician or other authorized practitioner attending a pregnant woman in the state shall, in addition, submit or cause to be submitted such sample to an approved laboratory for a standard serological test for hepatitis surface antigen.
2. The term “approved laboratory” means a laboratory approved for the purpose as herein provided by the department by the department, or in the city of New York by the department of health of such city.
3. A standard serological test for hepatitis B surface antigen is one recognized as such by the department of health or in the city of New York by the department of health of such city.
4. The physician or other authorized practitioner attending a pregnant woman shall record the hepatitis B surface antigen test results prominently in the pregnant woman’s medical record at or before the time of hospital admission for delivery.
5. If, at the time of hospital admission for delivery, hepatitis B surface antigen test results are not available, the hospital shall arrange immediate testing of the mother with results available within twenty-four hours, or as soon thereafter as practicable, but in no event longer than forty-eight hours.
6. It shall be the duty of the administrative officer or other person in charge of each institution caring for infants twenty-eight days of age or less to report hepatitis B surface antigen test results of all mothers of newborn children to the department in such a manner as may be required by the commissioner.
7. If the mother of newborn infant has tested positive for hepatitis B surface antigen, the physician or other authorized practitioner attending the infant shall offer or cause to be offered immunizing doses of hepatitis B vaccine and hepatitis B globulin to the newborn within twelve hours of birth or whenever the infant is stable physiologically and immunizing doses of hepatitis B vaccine and follow-up vaccine in accordance with the schedule specified by the commissioner. If the mother’s hepatitis B surface antigen test results were unavailable when the mother was admitted to a hospital for delivery, the physician or other authorized practitioner attending the infant shall offer or cause to be offered immunizing doses of hepatitis B vaccine and follow-up vaccine in accordance with the schedule specified by the commissioner.
8. The parent or guardian of any child born to a mother positive for hepatitis B surface antigen shall have administered to such child immunizing doses of hepatitis B immune globulin at birth and hepatitis B vaccine as well as follow-up hepatitis vaccine in accordance with the schedule specified by the commissioner.
9. If the parent or guardian of such child is unable to pay for the services of a private physician or other authorized practitioner, such person shall present such child to the health officer of the county in which the child resides, who shall then administer the follow-up hepatitis B vaccine without charge,
10. If any licensed physician or nurse practitioner certifies that a follow-up dose of hepatitis B vaccine may be detrimental to a child’s health, the requirements of this section shall be inapplicable until such immunization is found no longer to be detrimental to such child’s health.

11. The provision of this section relating to immunization shall not apply in the case of any newborn infant whose parent or guardian holds genuine and sincere religious beliefs which prohibit immunization and who notifies the person charged with administering such immunization of the religious objection thereto.
12. The commissioner of health shall promulgate such rules and regulations as are necessary to carry out the requirements of this section.