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**Massachusetts Department of Public Health (DPH)  
Guidance on Use of the Hepatitis B Vaccine for Infants and Children  
December 2025**

This document provides guidance from the Massachusetts Department of Public Health (DPH) regarding infant vaccination against hepatitis B, following the recent recommendations issued by the Advisory Committee on Immunization Practices (ACIP) on December 4-5, 2025.

DPH continues to **strongly** recommend that:

- All newborns receive a birth dose of hepatitis B vaccine within 24 hours of delivery, regardless of the hepatitis B infection status of the birth parent.
- Newborns born to birth parents who test positive for hepatitis B infection or have an unknown status be vaccinated within 12 hours of birth. Infants whose birth parent has hepatitis B infection should also receive hepatitis B immune globulin (HBIG).
- All children complete the full hepatitis B vaccination series within 18 months (doses administered at 0, 1-2 and 6 -18 months of age).

DPH has a longstanding and ongoing commitment to ensuring unimpeded access to vaccines in Massachusetts and to promoting evidence-based immunization practices that protect communities from preventable illness. Accordingly, DPH continues to strongly recommend routine administration of the hepatitis B vaccine to all newborns at birth and completion of the full hepatitis B vaccination series by 18 months of age.

Hepatitis B is a viral infection that infects the liver and can cause acute and chronic disease, including cirrhosis, liver failure, liver cancer, and death. Transmission to unvaccinated children can occur during the perinatal period or later in childhood. Perinatal transmission may occur when an infant is born to an infected person and does not receive timely vaccination after birth. Although it is standard of care for obstetrical providers to screen pregnant people for hepatitis B before delivery, challenges and errors in screening and documentation can occur. Older infants and children may also contract hepatitis B from caregivers, household contacts, individuals with known or unknown infection, or

contaminated surfaces or objects. Infants and young children who acquire hepatitis B are especially vulnerable to developing chronic infection. If infection occurs in the first year of life, 90% of children develop chronic hepatitis B, compared with less than 5% of those infected later in life. One in four people infected during childhood die later in life from cirrhosis or liver cancer.

Infant and childhood vaccination has long been a key tool in preventing hepatitis B infection. **Since 1991, when the Centers for Disease Control and Prevention (CDC) and the American Academy of Pediatrics (AAP) recommended universal hepatitis B vaccination for newborns, hepatitis B infections in children and teens have decreased by 99%.** The safety and efficacy of the hepatitis B vaccine in children who receive the full series are well established.

At its December 2025 meeting, ACIP revised the long-standing CDC recommendation that all infants receive hepatitis B vaccine at birth. ACIP voted that infants born to people not known to be hepatitis B infected may receive birth dose hepatitis B vaccine with shared clinical decision-making. There were no new safety or effectiveness data presented warranting a change to the long-standing and successful universal birth-dose policy. Therefore, DPH recommends that clinicians continue universal administration of hepatitis B vaccine to all newborns at birth. DPH advises that all newborns receive the birth dose within 24 hours of delivery, regardless of the hepatitis B status of the birth parent. Newborns born to a person who tested positive for hepatitis B infection, or whose status is unknown, should be vaccinated within 12 hours of birth.

ACIP also voted that, following the initial dose, serologic testing may be used to guide subsequent vaccine dose administration. DPH recommends against testing hepatitis B serology in children to guide vaccine dosing. There is no evidence that administering fewer doses than the full vaccine series provides long-term protection, and mid-series serology results are not reliable predictors of future immunity. DPH recommends that all children complete the full hepatitis B vaccination series by 18 months of age.

The Massachusetts DPH guidance was developed through review of available data and is aligned with the [American Academy of Pediatrics \(AAP\) Recommended Child and Adolescent Immunization Schedule](#) and with the consensus statement of the [Northeast Public Health Collaborative Hepatitis B Statement](#).

Thank you for your continued partnership and for your commitment to protecting the health of children and communities across Massachusetts.