Hepatitis B status – initial screening										
Hep B surface antigen HBsAg	Hep B core antibody HBcAb	Hep B surface antibody HBsAb	Hep B core IgM	Status	Management					
Pos	Pos	Neg	Neg	Chronic	Determine phase, test: HBeAg, HBV DNA, HBeAb, LFT, FBC,	Non-Invasive fibrosis assessment				
Pos	Pos	Neg	Pos High Titre	Acute	INR, AFP and Liver USS Assess liver fibrosis-cirrhosis Screen for co-infection: HIV, HCV, HDV and HAV Screen household and sexual contacts and	<ul> <li>Image-based elastography</li> <li>Serum interpretation</li> <li>Cirrhosis - present or likely</li> </ul>				
Nor	Nor	Dec		Immune	vaccinate as needed. HBsAb >10IU/ml = immune					
Neg	Neg	Pos		(vaccination)	Document in client file	Treatment indicated				
Neg	Pos	Pos		Immune (acquisition)	Immunity due to resolved infection Document in client file	Refer to specialist				
Neg	Pos	Neg		Unclear	<ul><li>Interpretation:</li><li>1. Resolved infection (most common)</li><li>2. False positive 3. Occult HBV infection</li><li>4. Resolving acute infection</li></ul>	Elastography – non-invasive technique to check the stiffness				
Neg	Neg	Neg		Non-immune	Non-immune Offer Hep B vaccination	of the liver.				
1	Serum interpretation – non- invasive, serum interpretation for cirrhosis. Use APRI or FIB-4 See clinical calculator at www.hepatitisb. uw.edu									

HBeAg	HBV DNA	ALT	Anti-HBe	Phase	Management	Fibrosis – scarring of the liver with	
Pos High >20,000IU/ml		Normal		Immune tolerance HBeAg-pos chronic infection	No treatment indicated	the formation of large amounts of scar tissue as the liver attempts to repair and replace damaged	
Pos	High >20,000IU/ml	Elevated Women >19U/L Men >30U/L		Immune clearance HBe-Ag-pos chronic hepatitis	Treatment indicated Refer to specialist	cells. <b>Cirrhosis</b> – widespread distortion of the internal structure of the liver when permanently replaced with scar tissue. Scar tissue develops with repeated or continuous damage to the liver ie. Chronic hepatitis.	
Neg	Low <2000IU/ml	Normal	Pos	Immune control HBe-Ag-neg chronic infection	No treatment indicated		
Neg	High >2000IU/ml	Elevated Women >19U/L Men >30U/L	Pos	Immune escape HBeAg-neg chronic hepatitis	Treatment indicated Refer to specialist		



This table is a guide only, please go to Decision Making In Hepatitis B | ASHM Health for further information