Screen for anti-HBs, HBsAg, and anti-HBc prior to vaccination

- Anti-HBs(+) ≥10 IU/L with HBsAg(−) and anti-HBc(−/+)
- Negative for all serologies
- Anti-HBc(+)/anti-HBs(−)/HBsAg(−)
- HBsAg(+) for >6 months

**VACCINATE**

Test for immune response 1 to 2 months after the last dose of the vaccination series

- Yes: Anti-HBs ≥10 IU/L
- No

**RE-VACCINATE** (using double dose)

Test for immune response 1 to 2 months after the last dose of the re-vaccination

- Yes: Anti-HBs ≥10 IU/L
- No

**Patient Considered Immune**

- STOP

Based on available evidence, a four-dose schedule should also be considered.

Re-vaccination can be deferred in patients initiating ART until CD4 count is ≥200 cells/mm³; re-vaccination should not be delayed in pregnant patients or those who are unlikely to experience immune reconstitution of ≥200 cells/mm³.

A patient who is negative for all serologies and who does not respond to re-vaccination may be a primary nonresponder or have chronic infection. HBV DNA testing may be used to detect the presence of chronic HBV infection.

New York State Department of Health AIDS Institute: [www.hivguidelines.org](http://www.hivguidelines.org)