



**State of Louisiana**  
Department of Health and Hospitals  
Immunization Program

To: Hospital Administrator  
Pharmacy Department

Re: Hepatitis B Vaccine for All infants

To participate in the Vaccines for Children (VFC) program and receive federally procured Hepatitis B vaccine provided to birthing Hospitals at no cost, we ask that you complete the Enrollment form, the Hospital Provider Profile and the Vaccine Order Form and mail or fax them to the Immunization Program. Upon enrolling in the VFC program you are agreeing to the following conditions:

1. Screen prenatal mothers and provide the appropriate Hepatitis B vaccine to **all infants** born in your hospital (with the consent of a parent/guardian).
  - a. Infants of mothers identified as HBsAg positive should receive hepatitis B immune globulin (HBIG) and the hepatitis B vaccine within 12 hours of birth. **Report all HBsAg positive mothers to Hepatitis Program Manager. (504-838-5206)**
  - b. All other Infants born in the State of Louisiana should receive the first dose of the hepatitis B vaccine series at birth
2. Maintain vaccine information acknowledgement and consent form for a period of 3 years
3. If requested, make such records available to the State or the Department of Health and Hospitals
4. The hospital will comply with the appropriate immunization schedule, dosage and contraindications, that are established by the ACIP, unless a) hospital judgment and in accordance with accepted medical practice, it is deemed to be medically inappropriate; or b) the particular requirement contradicts the law in the State pertaining to religious and other exemptions.
5. The hospital will distribute written hepatitis B vaccine information and maintain records in accordance with the National Childhood Vaccine Injury Act.
6. The hospital will not impose a charge for the cost of the vaccine
7. The hospital will not impose a charge for the administration of the vaccine that is higher than the maximum fee established by the State.
8. The hospital will not deny administration of a federally procured vaccine to a child because the child's parent/guardian/individual of record is unable to pay the administration fee.
9. The hospital will comply with the State's requirements for ordering vaccine, and the other requirements outlined on the attached forms.
10. The State may terminate this agreement at any time for failure to comply with these requirements or the Hospital may terminate this agreement at any time for personal reasons.

Thank you for providing a service that will benefit **all infants** born in Louisiana.

Susan Hom, RN, MSN  
Hepatitis Program Manager

Adrienne Mercadel Whitney, MPH  
Vaccine Procurement & Distribution Manager