

# Hepatitis A in Correctional Facilities Outbreak Protocol



Since March 2018, the West Virginia Bureau for Public Health has reported an increase in the number of confirmed cases of acute hepatitis A virus (HAV). This increase in cases has primarily been among injection and non-injection drug users, homeless or mobile individuals, and those who have been recently incarcerated. Viral sequencing has linked cases from Kentucky and California. This guidance is specific to this statewide outbreak of HAV and should not replace routine disease surveillance activities for other conditions. Statewide initiative was implemented Summer/Fall of 2018 to offer vaccine to all regional jail inmates statewide. For all other correctional facilities, vaccine may be requested by contacting the local health department.

## **Correctional Institution Responsibilities**

### **Reporting and Case Investigation:**

1. Report to your local health department within the timeframe indicated:
  - a. Hepatitis A, positive IgM within 24 hours to the local health department
  - b. Report suspect or confirmed outbreaks/clusters immediately to the local health department.
2. Isolate inmate immediately from general population.
3. Because HAV is easily spread it is recommended that cases be reported as soon as possible after diagnosis. Include the following information:
  - a. inmates name, date of birth, permanent address and phone number
  - b. Demographic information including race, sex, age, and ethnicity
  - c. Date of symptom onset
  - d. Clinical symptoms
  - e. Laboratory results: hepatitis A serology (including IgM), transaminase levels (ALT and AST) and bilirubin levels. Results should also include normal values and range interpretation.
4. Interview inmate using the Acute Hepatitis A Case Report Form.
5. Calculate the infectious period. Persons with HAV are most infectious from two weeks before onset of symptoms to one week after onset. If jaundice is present, use the onset date of jaundice to calculate the infectious period. A hypothetical example follows:

---

### **Division of Infectious Disease Epidemiology**

350 Capitol Street Room 125, Charleston, WV 25301-3715

Phone: (304) 558-5358 Fax: (304) 558-6335 [www.dide.wv.gov](http://www.dide.wv.gov)

# Hepatitis A in Correctional Facilities Outbreak Protocol



**Infectious Period for Hypothetical Case of Hepatitis A  
(Shaded area indicates the infectious period)**

Sun	Mon	Tues	Wed	Thurs	Fri	Sat
5	6	7	8	9 (2 weeks before onset)	10	11
12	13	14	15	16	17	18
19	20	21	21	23 <b>ONSET</b>	24	25
26	27	28	29	30 (1 week after onset)	31	1

6. Identify and obtain contact information on household contacts, sexual contacts, and injection or non-injection illicit drug sharing contacts who are still within 2 weeks of exposure for post exposure (PEP) immunization.
7. For individuals who develop symptoms while incarcerated, contacts inside the correctional facility do not need to be identified as they should be vaccinated. Review vaccination records for those in the same pod and offer vaccine to any inmates who refuse on intake. Contacts identified outside of the correctional facility should be listed and provided to the local health department for follow up.
8. Fax completed Acute Hepatitis A Case Report Form to the local health department within one week of receipt of the positive lab.

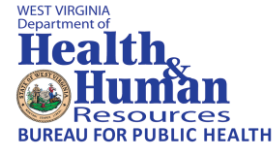
Regional Jail Facility	Local Health Department	Phone Number	Fax Number
Central	Braxton County	(304) 765-2851	(304) 765-2020
Eastern	Berkeley County	(304) 263-5131	(304) 263-1067
North Central	Doddridge County	(304) 873-1531	(304) 873-2994
Northern	Marshall County	(304) 845-7840	(304) 843-9837
Potomac Highlands	Hampshire County	(304) 496-9640	(304) 496-9650
South Central	Kanawha County	(304) 348-6494	(304) 348-6821
Southern	Raleigh County	(304) 252-8531	(304) 252-0466

**Division of Infectious Disease Epidemiology**

350 Capitol Street Room 125, Charleston, WV 25301-3715

Phone: (304) 558-5358 Fax: (304) 558-6335 [www.dide.wv.gov](http://www.dide.wv.gov)

# Hepatitis A in Correctional Facilities Outbreak Protocol



<b>South Western</b>	Logan County	(304) 792-8630	(304) 792-8635
<b>Tygart Valley</b>	Randolph County	(304) 636-0396	(304) 637-5902
<b>Western</b>	Cabell County	(304) 523-6483	(304) 523-6482

9. Exclude inmates that are food handlers from work responsibilities, if within 7 days of symptom onset. Regional Jails are considered state facilities; therefore, any food service worker who is confirmed to have hepatitis A must be reported to the WV Bureau for Public Health Sanitation Division at (304) 558-2981.
10. Provide education about the disease, its transmission and appropriate control measures.
11. Notify the local health department of the county of residence if an inmate with HAV will be released before the end of the infectious period.
12. Only symptomatic persons should be tested for HAV. If a positive lab is identified in an asymptomatic inmate as part of a routine testing panel, the case report form should be completed and submitted to indicate the patient is not symptomatic.

## **Vaccination Efforts:**

1. Offer vaccine to all new admissions to the facility. Educate inmates on HAV to encourage participation with vaccination efforts.
2. **Vaccine can be ordered by completing the Hepatitis A Vaccine Requisition Form and faxing it to 304-558-8736. A copy of the vaccine requisition form can be found on our webpage at [www.hepawarewv.org](http://www.hepawarewv.org).**
3. **The Vaccine Administration Log should be completed, following the instructions provided, for all vaccines administered. Fax completed logs to 304-558-8736 monthly. Logs should be received no later than 5<sup>th</sup> day of each month for the previous month.**
4. Allergy to the vaccine or its components are the only contraindications for HAV vaccination. Vaccination is not contraindicated during pregnancy.

## **Laboratory Responsibilities**

1. Report all positive anti-HAV IgM tests to the local health department in the patient’s county of residence within 24 hours of result. Send or fax a copy of the laboratory result to the local health department if not already reported by electronic laboratory reporting (ELR).
2. Please include the following information:
  - a. Patient’s name, date of birth, address and phone number
  - b. Demographic information including race, sex, age, and ethnicity
  - c. Physician name, address and phone number

---

## **Division of Infectious Disease Epidemiology**

350 Capitol Street Room 125, Charleston, WV 25301-3715

Phone: (304) 558-5358 Fax: (304) 558-6335 [www.dide.wv.gov](http://www.dide.wv.gov)

# Hepatitis A in Correctional Facilities Outbreak Protocol



- d. Laboratory results: hepatitis A serology (including IgM), transaminase levels (ALT and AST) and bilirubin levels. Results should also include normal values and range interpretation.

## **Local Health Responsibilities**

1. For the purposes of this statewide HAV outbreak the correctional facility will be responsible for investigating cases of hepatitis A for individuals who are currently incarcerated.
2. Cases in West Virginia Electronic Disease Surveillance System (WVEDSS) should be assigned to the county of residence of the inmate under Reporting Address for Case Counting. The Jurisdiction of incarcerated patients under investigation shall be in the jail county under Investigation. Assignment of the investigation to the jail county will be the responsibility of the Regional Epidemiologist.
3. Local health departments will be responsible for notifying contacts of incarcerated individuals outside of the correction facility who need PEP and/or to offer vaccine.
4. Enter laboratory reports and case report forms submitted by correctional facilities into WVEDSS.
5. Vaccine ordered by the correctional facility will be shipped to the LHD for pick-up. Notify the facility when vaccine has arrived.
6. Notify correctional facility if a close contact of a confirmed case of HAV is currently incarcerated.

## **POST EXPOSURE PROPHYLAXIS RECOMMENDATIONS**

Persons recently exposed to HAV (within 14 days) and who previously have not received hepatitis A vaccine:

- For healthy persons aged 12 months to 40 years: 1 age-appropriate dose of single antigen hepatitis A vaccine.
- Persons aged > 40 years: IG is preferred (recommended dosage of GamaSTAN S/D is 0.1 mL/kg)\*; vaccine can be used if IG is not available
- For children < 12 months, immunocompromised persons, persons with chronic liver disease, or persons for whom vaccine is contraindicated, IG should be used.

---

### **Division of Infectious Disease Epidemiology**

350 Capitol Street Room 125, Charleston, WV 25301-3715

Phone: (304) 558-5358 Fax: (304) 558-6335 [www.dide.wv.gov](http://www.dide.wv.gov)

# Hepatitis A in Correctional Facilities Outbreak Protocol



---

## **State Health Responsibilities**

1. Coordinate and maintain statewide vaccine campaign in partnership with the WV Division of Corrections (WVDOC).
2. Prompt and complete reporting of HAV cases to the Centers for Disease Control (CDC) through WVEDSS.
3. Report cases of HAV to the CDC within 30 days of notification.
4. Provide technical expertise and consultation regarding surveillance, investigation, control measures and prevention of HAV.
5. Provide outbreak HAV vaccine and IG for contacts of cases and in outbreaks.
6. Offer laboratory testing of HAV through the Office of Laboratory Services (OLS) for contacts.
7. Assist with difficult investigations.
8. Work through the WVDOC to address any concerns related to reporting and investigation of hepatitis A cases in the Regional Jail Facilities.
9. Monitor electronic laboratory reports received in WVEDSS through the WVDOC.
10. Duplicate cases that are assigned to different local jurisdiction will be merged and assigned to the jail county by state program lead.

## **Occupational Health**

CDC does not recommend vaccination for any occupational group including correctional facility staff. If one has a known exposure to HAV while investigating a case or an outbreak, PEP may be used to prevent infection. Standard Precautions should be followed while investigating a possible HAV infection, this included when entering an inmates cell to prevent fecal oral transmission to others. Strict hand washing is the best prevention method.

Standard precautions include:

1. Use of PEP when in proximity of blood and other bodily fluids. PEP includes:
  - a. Gloves
  - b. Face masks
  - c. Protective eye wear
2. Keep wounds covered at all times in health care settings
3. Wash hands regularly after being in contact with blood, other bodily fluids or possible contaminated objects or surfaces
4. Follow safe injection practices
5. Dispose of contaminated objects properly and timely

---

## **Division of Infectious Disease Epidemiology**

350 Capitol Street Room 125, Charleston, WV 25301-3715

Phone: (304) 558-5358 Fax: (304) 558-6335 [www.dide.wv.gov](http://www.dide.wv.gov)

# Hepatitis A in Correctional Facilities Outbreak Protocol

---



## **Clinical Description**

HAV is a viral illness that results in jaundice, fever, loss of appetite, nausea, malaise, and sometimes diarrhea. Affected individuals may have abdominal pain, an enlarged liver, dark urine, and light stool. Infection usually is symptomatic and typically lasts several weeks, with jaundice occurring in 70% or more of these cases. Signs and symptoms typically last less than 2 months. In contrast to hepatitis B and C, fulminant disease or death occurs only rarely, and there is no carrier state. Severe disease is more likely to occur in the elderly or in persons with underlying liver disease (including hepatitis C). Chronic disease does not occur.

## **Etiologic Agent**

Hepatitis A is member of the Picornaviridae family of viruses, which includes Enteroviruses and Rhinoviruses. HAV is an RNA virus that is very hardy and can survive outside the body for several months depending on environmental conditions.

## **Reservoir**

Humans are the reservoir for the virus in this outbreak.

## **Mode of Transmission**

This outbreak is being spread person-to-person transmission through the fecal-oral route (i.e., ingestion of something that has been contaminated with the feces of an infected person).

## **Incubation Period**

The average incubation period for HAV is 28 days (range: 15–50 days).

## **Period of Communicability**

The infectious period is of the disease is from two weeks before the onset of symptoms to one week after onset. If jaundice is present, use the date of the onset of jaundice as the date of symptom onset.

## **Case Definition**

Please use the most recent case definition for the investigation of acute hepatitis A. definitions can be found at: <https://wwwn.cdc.gov/nndss/conditions/hepatitis-a-acute/>.

## **Preventive Interventions**

The major methods of disease prevention are improved sanitation and personal hygiene and immunization.

1. Vaccinate those at risk for HAV infection

---

## **Division of Infectious Disease Epidemiology**

350 Capitol Street Room 125, Charleston, WV 25301-3715

Phone: (304) 558-5358 Fax: (304) 558-6335 [www.dide.wv.gov](http://www.dide.wv.gov)

# Hepatitis A in Correctional Facilities Outbreak Protocol

---

2. Always wash your hands after using the bathroom
3. Always wash your hands after cleaning the toilet
4. Always wash your hands after changing diapers
5. Always wash your hands after handling soiled towels or linens
6. Always wash your hands before fixing food or eating
7. If exposed to HAV, ask your doctor about post exposure PEP

## **Treatment**

Supportive care as needed for dehydration and electrolyte abnormalities.