



CLIENT HANDBOOK

Our mission is to adopt a patient-centered approach that supports individuals, families, and communities facing challenges related to substance use disorder and emotional or behavioral health by providing individualized outpatient treatment.

Love Conquers All

www.avorecovery.com

Suicide attempt/Life at Risk: Call 911, ask for C-I-T Officer

Stark County Crisis Hotline: 330-452-6000, or 988

Crisis Text Line: Text “4hope” to 741-741

988 Suicide & Crisis Lifeline: Dial 988

Alliance Domestic Violence Hotline: 330-823-7223

Military & Veterans Crisis Line: 1-800-273-8225, press 1

Stark County Domestic Violence Hotline: 330-453-SAFE (7233)

Stark County Homeless Hotline: 330-452-4363

Stark County Rape Crisis Hotline: 330-452-1111

Trans Lifeline: 877-565-8860

Trevor Project Lifeline (youth): 866-488-7386

AVO Behavioral Health and Recovery

We are happy you are here, and no matter where you are in your journey, our team is here to help. Taking an opportunity for a new start and making positive changes will take some time, thoughtful consideration, and personal effort. With the support of fellow clients, staff, and significant others, identifying and making changes in your life is within reach. This Client Handbook contains important information about AVO Behavioral Health, the services AVO provides, client rights, and client responsibilities. If there are ever any questions or concerns, please feel free to ask an AVO staff member at any time.

ABOUT

Mission Statement

At AVO Behavioral Health and Recovery, we believe that love conquers all. Our mission is to provide patient-centered, individualized outpatient treatment to help individuals, families, and communities overcome challenges related to substance use and behavioral health. We focus on treating addiction as a chronic disease with a long-term care approach that addresses both symptoms and underlying causes, ensuring comprehensive recovery and quality of life.

Service Descriptions

AVO Behavioral Health offers a wide range of outpatient mental health and substance use disorder services including:

- **Assessment and Referral**
- **Individual Counseling**
- **Group Counseling**
- **Case Management (CPST)**
- **Pharmacologic Management & MAT**
- **Peer Support**
- **Intensive Outpatient Program (IOP)**

Assessment

Involves a thorough evaluation of an individual's mental health and substance use history, including clinical interviews, standardized screening tools, and collateral information from family or other healthcare providers. This process helps identify specific needs, strengths, and areas requiring intervention, ensuring that the treatment plan is tailored to the individual's circumstances.

Referrals

Essential for connecting individuals with appropriate resources and services. Once assessment is complete, healthcare providers may refer individuals to specialized treatment programs, support groups, or counseling services. This step is crucial in creating a supportive network that addresses the multifaceted nature of behavioral health and addiction, facilitating a pathway toward recovery and improved overall well-being.

Individual Counseling

Individual counseling for behavioral health and addiction is a personalized therapeutic approach designed to support individuals in overcoming mental health challenges and substance use disorders. This one-on-one setting provides a safe and confidential space for clients to explore their thoughts, feelings, and behaviors related to their struggles.

Through individual counseling, clients work collaboratively with a trained therapist to identify underlying issues, set achievable goals, and develop coping strategies. Techniques such as cognitive-behavioral therapy (CBT), motivational interviewing, and mindfulness may be employed to help clients understand their patterns and triggers, build resilience, and foster healthier habits.

The individualized nature of this counseling allows for a tailored approach that respects each person's unique experiences and needs. Ultimately, individual counseling empowers clients to gain insight, improve emotional regulation, and make meaningful changes in their lives, paving the way for recovery and improved well-being.

Group Counseling

Dynamic therapeutic approach that brings individuals together to share their experiences and support one another in the recovery process. In a structured setting, participants engage in discussions facilitated by a trained therapist, allowing for the exploration of personal challenges, coping strategies, and emotional responses related to mental health and substance use.

This format fosters a sense of community and connection, helping individuals realize they are not alone in their struggles. Group counseling encourages the exchange of insights and support, promoting accountability and motivation among peers. It also enhances social skills and provides diverse perspectives on coping with similar issues.

By participating in group counseling, individuals can gain valuable feedback, learn from others' experiences, and develop a sense of belonging, all of which are essential components of effective recovery. Ultimately, group counseling serves as a powerful tool in the journey toward healing and sustained well-being.

Case Management

A client-centered approach that coordinates and facilitates access to a range of services and resources necessary for recovery. Case managers serve as advocates and navigators, working closely with individuals to assess their unique needs, strengths, and challenges.

The process begins with a thorough assessment to identify specific goals and required support. Case managers then help individuals develop personalized care plans, connecting them to essential services such as therapy, medical care, housing, and support groups. They also monitor progress, adjust plans as needed, and provide ongoing encouragement and guidance.

By addressing the various aspects of a person's life, case management promotes holistic recovery and empowers individuals to take an active role in their treatment. This collaborative approach not only enhances access to care but also fosters resilience and improves overall quality of life for those facing behavioral health and addiction challenges.

Pharmacologic Management & MAT

Integral components of a comprehensive approach to treating behavioral health and substance use disorders. This method combines the use of medications with therapeutic support to address both the physical and psychological aspects of addiction.

Pharmacologic management involves prescribing medications that can help reduce cravings, alleviate withdrawal symptoms, and stabilize mood. These medications may include antidepressants, anti-anxiety medications, or mood stabilizers, depending on the individual's needs and diagnosis.

MAT specifically refers to the use of FDA-approved medications, such as buprenorphine, or naltrexone, in conjunction with counseling and behavioral therapies. This combination not only helps to manage withdrawal symptoms and cravings but also supports long-term recovery by addressing underlying behavioral and psychological issues.

By integrating pharmacologic management and MAT into treatment plans, healthcare providers can enhance the likelihood of successful recovery, improve treatment adherence, and support individuals in leading healthier, more stable lives. This holistic approach acknowledges the complexity of addiction and emphasizes the importance of tailored, evidence-based interventions for effective care.

Peer Support

Community-based approach that leverages the shared experiences of individuals in recovery to promote healing and resilience. This model involves trained peers—individuals who have lived experience with mental health challenges or substance use disorders—providing emotional support, encouragement, and practical assistance to others facing similar struggles.

Peer support fosters a sense of belonging and understanding, helping participants feel less isolated and more connected. By sharing their own journeys, peers can offer insights, coping strategies, and hope, demonstrating that recovery is possible. This supportive environment encourages open dialogue and mutual respect, empowering individuals to take an active role in their own recovery process.

Research has shown that peer support can enhance treatment outcomes, reduce feelings of stigma, and improve overall well-being. By incorporating peer support into behavioral health and addiction services, individuals gain access to a valuable resource that complements traditional therapeutic approaches, ultimately fostering a stronger community and promoting sustained recovery.

Intensive Outpatient Program (IOP)

Provides provide a structured treatment option that allows individuals to receive comprehensive care while maintaining their daily routines. IOPs are designed for those who need more support than traditional outpatient therapy but do not require the level of care provided in residential treatment.

Participants typically engage in several hours of therapy per week, including individual counseling, group sessions, and educational workshops. This format allows for in-depth exploration of underlying issues, skill development, and peer support, all while enabling individuals to live at home and continue with work or school commitments.

IOPs are tailored to address the specific needs of each participant, focusing on strategies for managing triggers, building coping skills, and fostering a supportive recovery environment. By providing a blend of therapeutic interventions and practical support, IOPs play a vital role in helping individuals achieve lasting recovery and improve their overall quality of life.

Discharge Planning

Discharge planning is done in partnership with the client and provider beginning at the time of the evaluation appointment. The planning could include making referrals and networking with other appropriate community agencies and resources. Provided there is a valid Release of Information on file, referral sources are updated regularly on progress and discharge planning to ensure a smooth transition. Program participants gain valuable information during treatment, and discharge planning helps individuals map out how they will use the information to maintain their treatment goals. Depending on progress in treatment, program participants may be discharged for the following reasons:

- The individual has successfully accomplished treatment plan goals.
 - The individual has made as much progress and/or gained as much benefit from treatment as able.
 - The individual is not able or willing to follow treatment goals or program guidelines.
 - The individual's behavior is evaluated to be harmful to him/herself or to the rest of the peer community.
-

Commitment to Person-Centered Care

At AVO Behavioral Health, LLC, we believe in a person-centered approach that prioritizes the unique preferences, needs, and rights of each individual. Our mission is to empower those we serve by ensuring that they actively participate in decisions about their care.

Key Principles of Person-Centered Care:

- **Individualized Planning:** Each person participates in creating their personalized service plan, reflecting their goals and preferences.
- **Choice and Control:** We empower individuals to make choices regarding their care, including staff selection and service settings.
- **Respect and Dignity:** All staff members treat individuals with respect, maintaining confidentiality and valuing their input.
- **Advocacy:** We encourage individuals to advocate for themselves, providing support when needed.
- **Cultural Competence:** Our services are delivered with sensitivity to the diverse backgrounds of those we serve.
- **Feedback and Continuous Improvement:** We regularly seek feedback to improve our services and ensure individuals feel heard.

For More Information: If you have any questions or would like to learn more about our person-centered approach, please contact your supervisor or the management team.

Access to Service

At AVO Behavioral Health, LLC, we are committed to making our services accessible to all individuals, including offering telehealth options through secure and HIPAA-compliant platforms. Sessions can be held via video conferencing or telephone calls to accommodate the needs of our patients.

In-Person: Our in-person sessions are held at one of our two locations.

AVO Behavioral Health
3745 Whipple Ave NW
Canton, Ohio 44718

AVO Behavioral Health – ETAH (Counseling)
4433 38th Street NW
Canton, Ohio 44718

Telehealth:

- **HIPAA-Compliant Zoom:** Our telehealth sessions are conducted using Zoom, integrated into our Electronic Medical Records (EMR) system to ensure security and privacy.
- **Email or Patient Portal:** Prior to each telehealth session, patients will receive a Zoom link via email or through the patient portal. Simply click the link at the scheduled time to join the session
- **Telephone Sessions:**
For those who prefer or need an alternative, sessions can also be held via telephone, allowing flexibility in how care is provided.

Emergency Procedures

Evacuation routes are posted in every office, and lobby. Egress lighting is posted to define the exits.

In the event of an emergency, call 911, or Coleman Crisis at 330-452-6000/

Expectations

The following are prohibited items within each program facility:

Alcohol:

No alcohol or alcoholic beverages are allowed.

Illegal Drugs:

The possession or use of illegal drugs or drug paraphernalia is strictly forbidden.

Weapons:

Any form of weapon, including firearms, knives, or any item that could be used as a weapon, is prohibited.

Nicotine Products:

The use of tobacco, vaping devices, and any nicotine-based products are not permitted in the buildings

Non-prescribed Medications:

Clients are not allowed to bring medications that have not been prescribed to them by a healthcare provider into the facility.

Hazardous Materials:

Any hazardous materials, including chemicals or flammable substances, are not allowed.

Handling of Prohibited Items:

Upon entry into the facility, all persons served will be informed of the items that are not permitted within the program. Staff will conduct routine inspections of personal belongings as necessary to ensure compliance.

In cases where prohibited items are discovered, the following steps will be taken.

- **Confiscation:** Prohibited items will be confiscated and securely

stored or disposed of following legal guidelines.

- **Documentation:** The discovery of prohibited items will be documented in the person's file, and, if necessary, a formal incident report will be completed.
- **Safety Actions:** If weapons or illegal substances are discovered, law enforcement may be notified as required by law.
- **Referrals and Recommendations:** Clients found in possession of prohibited items may be referred for additional treatment or support services, depending on the nature of the item.

Storage of Personal Items:

- Clients may be permitted to bring in essential personal items.
- Personal items that are allowed must not interfere with the treatment process or pose any risk to the safety of others.

Visitor Rules:

- Visitors are expected to follow the same rules regarding prohibited items. Staff will inform visitors of these regulations upon arrival.
- Visitors found with prohibited items may be denied access to the facility and asked to leave the premises.

Prescription Medications:

Clients are required to inform staff of any prescription medications they bring into the facility. All medications must be in their original containers and must be disclosed to staff for proper monitoring and administration.

Enforcement and Consequences:

Failure to comply with these rules may result in a review of the client's treatment plan or program participation status. In severe cases, such as possession of weapons or illegal drugs, immediate discharge may be considered, and legal actions may be taken.

Confidentiality

Your health information is protected under HIPAA and 42 CFR Part 2. AVO Behavioral Health upholds strict confidentiality policies, ensuring no information is disclosed without written consent unless mandated by law.

Please know that all professional staff are mandatory reporters and are required under Ohio law to report all suspected instances of abuse/neglect of minors and dependent adults to the Stark County Department of Human Services.

There are times when an individual presents a crisis in which confidentiality may be broken in order to ensure safety. AVO Program participants are asked to respect client confidentiality and are asked not to discuss anything seen or heard with those outside AVO anything seen or heard while in services at AVO. Also, if an individual attends an activity in the community while in services, confidentiality may be breached because of participating in that activity. Additionally, there are times when information an individual discloses to one staff member may be re-disclosed to other members of the person's treatment team as part of coordinating care while at AVO.

Grievance

You can file a grievance if you believe your rights have been violated, concerns about services, or they have been discriminated against, received unequal treatment, or sees something that they feel is not right, please follow the procedure:

1. **Report the Issue:** Submit your concern to a staff member or complete a grievance form.
2. **Review Process:** The Clinical Director or Client Rights Officer reviews the grievance within 48 hours.
3. **Resolution:** You will receive a written response within 20 days outlining the decision and any steps taken.

Feedback on Care, Outcomes, and Satisfaction

We encourage client feedback to improve services and client outcomes. You can share your input during treatment sessions or by completing surveys provided by staff.

Hours of Operation

Regular hours of operation are Monday to Thursday, 8:00am- 6:00pm, Fridays 8:00am- 4:00pm. After-hours services are available via our After-Hours Line.

Emergency and After-Hours Contact

For urgent concerns after office hours, call the After-Hours Line at (330) 331-7506 or dial 911 for emergencies.

Code of Ethics

AVO Behavioral Health staff are committed to ethical practices and adhere to professional conduct standards. All services are provided with respect for patient rights, confidentiality, and a commitment to ethical decision-making.

Follow-Up for Mandated Clients

Individuals mandated by legal authorities will be required to provide appropriate documentation of attendance and completion of treatment. Failure to attend sessions or comply with treatment may result in a report to the referring entity.

Premises Familiarization

Clients will be shown where the nearest restrooms are located, and posted signs in case of an evacuation are available in every office and lobby. First aid kits are available in the reception area.

No Use of Seclusion and Restraints:

Clients will be informed that AVO does not use seclusion or physical restraints in any treatment setting, adhering to trauma-informed care practices.

Payment

AVO Behavioral Health, LLC accepts payments from the following sources:

Medicaid:

Services are provided to patients enrolled in Medicaid, adhering to state and federal guidelines for Medicaid billing.

Commercial Insurance:

AVO Behavioral Health, LLC accepts a variety of commercial insurance plans, and staff will assist patients with verification of benefits and claims processing.

Grant-Funded Services:

Certain services may be funded through grants, ensuring that specific populations (such as individuals with SUD or mental health conditions) have access to necessary care without financial barriers.

Sliding Scale:

AVO offers a sliding fee scale for patients based on their income and ability to pay, ensuring that services are available to those with limited financial resources.

Private Pay (Cash):

Patients who do not wish to use insurance may pay for services in cash or through other direct payment methods.

Self-Pay Rates Effective February 1st, 2024

Psychiatric Medication Management Evaluation	\$200
Medication Management Check-up	\$130
Nursing Visit	\$25
Medication Refill Request	\$50
Urine Drug Screen	\$15
Counseling Evaluation	\$125
30-minute Counseling Session	\$50
60-minute Counseling Session	\$100
Intensive Outpatient Program	\$150/day
No-Show Fee	\$60

Client Rights and Responsibilities

1. The right to be treated with consideration and respect for personal dignity, autonomy and privacy;
2. The right to reasonable protection from physical, sexual or emotional abuse and inhumane treatment;
3. The right to receive services in the least restrictive, feasible environment;
4. The right to participate in any appropriate and available service that is consistent with an individual service plan (ISP), regardless of the refusal of any other service, unless that service is a necessity for clear treatment reasons and requires the person's participation;
5. The right to give informed consent to or to refuse any service, treatment or therapy, including medication absent an emergency;
6. The right to participate in the development, review and revision of one's own individualized treatment plan and receive a copy of it;
7. The right to freedom from unnecessary or excessive medication, and to be free from restraint or seclusion unless there is immediate risk of physical harm to self or others;
8. The right to be informed and the right to refuse any unusual or hazardous treatment procedures;
9. The right to be advised and the right to refuse observation by others and by techniques such as one-way vision mirrors, tape recorders, video recorders, television, movies, photographs or other audio and visual technology. This right does not prohibit an agency from using closed-circuit monitoring to observe seclusion rooms or common areas, which does not include bathrooms or sleeping areas;
10. The right to confidentiality of communications and personal identifying information within the limitations and requirements for disclosure of client information under state and federal laws and regulations;
11. The right to have access to one's own client record unless access to certain information is restricted for clear treatment reasons. If access is restricted, the treatment plan shall include the reason for the restriction, a goal to remove the restriction, and the treatment being offered to remove the restriction;
12. The right to be informed a reasonable amount of time in advance of the reason for terminating participation in a service, and to be provided a referral, unless the service is unavailable or not necessary;
13. The right to be informed of the reason for denial of a service;
14. The right not to be discriminated against for receiving services on the basis of race, ethnicity, age, color, religion, gender, national origin, sexual orientation, physical or mental handicap, developmental disability, genetic information, human immunodeficiency virus status, or in any manner prohibited by local, state or federal laws;
15. The right to know the cost of services;
16. The right to be verbally informed of all client rights, and to receive a written copy upon request;
17. The right to exercise one's own rights without reprisal, except that no right extends so far as to supersede health and safety considerations;
18. The right to file a grievance;
19. The right to have oral and written instructions concerning the procedure for filing a grievance, and to assistance in filing a grievance if requested;
20. The right to be informed of one's own condition; and,
21. The right to consult with an independent treatment specialist or legal counsel at one's own expense.

TB and HIV Education

AVO Behavioral Health provides education on Tuberculosis (TB) and HIV to ensure clients understand the importance of early detection and treatment for both conditions. Clients are encouraged to get tested and follow preventive measures to protect their health and that of others.

Tuberculosis (TB) Facts

TB Can Be Treated

What is TB?

"TB" is short for a disease called tuberculosis. TB is spread through the air from one person to another. TB germs are passed through the air when someone who is sick with **TB disease** of the lungs or throat coughs, speaks, laughs, sings, or sneezes. Anyone near the sick person with **TB disease** can breathe TB germs into their lungs.

TB germs can live in your body without making you sick. This is called **latent TB infection**. This means you have only inactive (sleeping) TB germs in your body. The inactive germs cannot be passed on to anyone else. However, if these germs wake up or become active in your body and multiply, you will get sick with **TB disease**.

When TB germs are active (multiplying in your body), this is called **TB disease**. These germs usually attack the lungs. They can also attack other parts of the body, such as, the kidneys, brain, or spine. **TB disease** will make you sick. People with **TB disease** may spread the germs to people they spend time with every day.

If the **TB disease** is in your lungs, you may:

- cough a lot,
- cough up mucus or phlegm ("flem"),
- cough up blood, or
- have chest pain when you cough.

You should ALWAYS COVER YOUR MOUTH when you cough!

If you have **TB disease**, you may also:

- feel weak,
- lose your appetite,
- lose weight,
- have a fever, or
- sweat a lot at night.

These are symptoms of **TB disease**. These symptoms may last for several weeks. Without treatment, they usually get worse.

If you get **TB disease** in another part of the body, the symptoms will be different. Only a doctor can tell you if you have **TB disease**.



Page 1 of 2

National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
Division of Tuberculosis Elimination



FACTS ABOUT HIV

1. How do I get HIV?

There are four ways HIV is passed from person to person:

- **Sexual intercourse** (vaginal and anal): HIV may enter the body through cuts and sores (many of which are too small to notice) during sex. Vaginal and anal intercourse are considered to be high-risk practices.
- **Oral sex** (mouth-penis, mouth-vagina, mouth-anus): Although the mouth is not a good environment for HIV to spread and the risk of oral HIV transmission is lower than the risk of transmission through sexual intercourse, there is still a risk. Oral sex is considered to be a lower risk practice than sexual intercourse.
- **Sharing injection needles:** Any needle used to break the skin can transmit HIV. This includes sharing needles for using drugs and for giving home-made tattoos. Sharing needles is considered a high-risk practice.
- **Mother to child:** It is possible for a woman with HIV to pass the virus to her baby before or during birth or through breast-feeding. Breast milk can contain enough of the HIV virus to infect an infant. The risk of a mother transmitting HIV to her baby is about 30% UNLESS she gets good prenatal care and starts taking medication. If the mom gets good care, she can reduce the likelihood of her baby being infected down to 2%.

2. How do I know if I have HIV?

Get tested! People can have HIV for 10 years or more and never show any sign of being sick. Other people can get symptoms within a short time after being infected. The only way you can tell if you have HIV is to get an HIV test. Free or low-cost HIV testing is available in most communities. Find a local testing location by calling the Ohio HIV/AIDS/STD Hotline at 800-332-2437.

3. How can I protect myself and others from getting HIV?

- **Using a barrier is important every time you have sex even if your partner has an undetectable HIV viral load.** If a viral load test doesn't show a detectable amount of HIV in a person's blood, it is still important to practice safer sex with a partner because the virus can hide out in the body and may be present in other body fluids.
- **Do not share personal items** that may have even small amounts of blood on them (e.g., toothbrushes, razors, etc.).
- **Protect your baby.** If you think you are pregnant, please consider an HIV test so you and your baby can be healthy! Prenatal care is important for a healthy baby, and an HIV test is a smart part of prenatal care.



Ohio Department of Health – HIV Care Services Section

246 North High Street, Columbus, Ohio 43215

TELEPHONE 614-466-6374 EMAIL hcs@odh.ohio.gov

www.odh.ohio.gov/odhprograms/hastpac/hivcare/aids1.aspx

PATIENT EDUCATION



The American College of
Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS

Protecting Yourself Against Hepatitis B and Hepatitis C

Hepatitis B and hepatitis C are infections that affect the liver. These infections are caused by **viruses** that can spread easily. These infections also can lead to serious, long-term illness. There is no cure for hepatitis B infection, but it can be managed. A **vaccine** also is available to prevent hepatitis B. There is no vaccine for hepatitis C, but new treatments have the potential to cure hepatitis C infection in most people and prevent long-term **complications**.

This pamphlet explains

- *how the viruses affect the body*
- *how the viruses are spread*
- *risk factors and tests*
- *treatment and prevention*
- *effects on pregnancy*

How Hepatitis Affects the Body

The liver is in the upper right part of the abdomen. It sits on top of the stomach, right kidney, and intestines. The liver has many functions, including

- making bile to help digest food
- clearing the blood of harmful substances
- fighting infection
- making proteins that help blood clot after an injury
- storing and releasing **glucose** when the body needs energy

Hepatitis infection can be acute or chronic. Acute infection is a short-term illness that happens in the first 6 months after a person is infected. Acute infection can cause mild symptoms or no symptoms at all. When symptoms develop, they may include

- tiredness
- loss of appetite
- nausea and vomiting
- **jaundice**
- stomach pain
- pain in the muscles and joints

Chronic infection can develop if the virus stays in the body. Chronic infection can cause serious, long-term liver disease, such as *cirrhosis*. In this condition, *cells* of the liver die and are replaced by scar tissue. Over time, the liver stops working. In some cases, chronic hepatitis can lead to liver cancer.

Hepatitis B

About 850,000 people in the United States are estimated to be living with hepatitis B. Many do not know they are infected.

Hepatitis B is passed through contact with body fluids. This can happen during unprotected sex or while sharing needles used to inject (“shoot”) drugs. People who work in the health care field also may be exposed to body fluids. A baby can be infected during birth if the pregnant woman has hepatitis B.

Hepatitis B also can be spread if you live with an infected person and share household items that touch body fluids, such as toothbrushes or razors. But hepatitis B is not spread by casual contact, such as shaking hands, sharing food or drink, coughing, or sneezing. Also, hepatitis B is not spread by breastfeeding.

In most people, the virus goes away by itself. But in some people, the virus does not go away. These people become *carriers* of the virus who can infect others. Carriers also may develop chronic hepatitis, which can lead to liver damage, liver cancer, and early death.

Tests for Hepatitis B

There are different blood tests for the hepatitis B virus. Tests for hepatitis B can tell whether you have been recently infected or whether you are a carrier. Tests also can show whether you have had the virus in the past and are now *immune* to it or whether you have had the hepatitis B vaccine. People who should be tested for the hepatitis B virus include

- pregnant women
- babies born to infected mothers
- sex partners of infected people
- those who live with an infected person
- people with *human immunodeficiency virus (HIV)* or hepatitis C virus
- users of injected illegal drugs
- men who have sex with men
- people exposed to blood or body fluids, such as health care workers
- people born in countries with a high rate of hepatitis B or people with parents born in these countries
- people receiving dialysis, cancer treatment, or treatment with drugs that suppress the *immune system*

Treatment and Prevention of Hepatitis B

There is no cure for hepatitis B, but symptoms can be managed. Treatment can be given for some of the liver diseases caused by the infection.

The best protection against the hepatitis B virus is a vaccine. The vaccine triggers your body’s immune

system to fight off the virus when you are exposed to it. The hepatitis B vaccine is a series of three shots. All babies are vaccinated beginning at birth (see the section “Hepatitis B and Pregnancy”). Children should receive the vaccine if they were not vaccinated as babies. The vaccine also is recommended for adults at risk of hepatitis B.

Even if you do not have any risk factors, you still can be vaccinated if you have not been before (see the box “Who Should Get the Hepatitis B Vaccine”). Pregnant women with risk factors for hepatitis B infection also can get the vaccine.

People who have been recently exposed to hepatitis B and are not vaccinated usually are given the vaccine along with a shot of *hepatitis B immune globulin (HBIG)*. HBIG contains *antibodies* to the virus. It can give additional protection against infection in certain situations.

Although getting the vaccine is the best way to prevent hepatitis B infection, you can take steps to avoid hepatitis B, including

- using a latex or polyurethane condom every time you have vaginal, oral, or anal sex
- knowing your sex partners, since the more partners you or your partners have, the higher your risk of getting infections
- getting help and trying to stop if you are injecting drugs—if you cannot stop, do not share needles

Hepatitis B and Pregnancy

If no preventive steps are taken, about 9 in 10 pregnant women infected with hepatitis B will pass the infection to their babies at birth. Hepatitis may be severe

Who Should Get the Hepatitis B Vaccine

- All babies
- All children younger than 19 who have not been vaccinated before
- Sex partners of people infected with hepatitis B
- Men who have sex with men
- People who inject illegal drugs
- People with more than one sex partner
- People seeking treatment for a *sexually transmitted infection (STI)*
- People with jobs that expose them to human blood (such as health care workers)
- People who live with someone infected with hepatitis B
- People receiving dialysis
- People with chronic liver disease, *diabetes mellitus*, *kidney disease*, or HIV infection
- People who travel to countries where hepatitis B is common
- Anyone else who wants to be protected from hepatitis B infection

in babies and can be life-threatening. Even babies who appear well may be at risk of serious health problems. Infected newborns have a high risk of becoming carriers of the virus.

The vaccine is safe for pregnant women, postpartum women, and women who are breastfeeding. All babies should get their first dose of hepatitis B vaccine before leaving the hospital after birth. The second dose is given when the baby is 1 to 2 months old. The third dose is given when the baby is 6 to 18 months old.

All pregnant women are tested for hepatitis B infection as part of early **prenatal care**. If you test negative for hepatitis B virus but you have risk factors for getting infected, you should be offered the hepatitis B vaccine. If you test positive, you should be tested again during your third **trimester** to determine how much virus is in your system. Depending on the results of this test, you may be offered HBIG antiviral therapy.

Babies born to infected mothers will get the first dose of hepatitis B vaccine within 12 hours of birth. They also will get HBIG soon after birth to give extra protection against infection. The rest of the shots then will be given over the next 6 months. With this treatment, the chance of the baby getting the infection is much lower. A woman who has hepatitis B infection can breastfeed safely if the baby has gotten the hepatitis B vaccine and HBIG at birth.

Hepatitis C

More than 2 million people in the United States are estimated to be living with hepatitis C. Another 3 to 4 million are thought to be carriers. About 2 in 3 hepatitis C carriers eventually develop chronic liver disease.

Hepatitis C is spread through direct contact with infected blood. This can happen while sharing needles or household items that can carry small amounts of blood (razors, nail clippers, toothbrushes). People who work in the health care field also may be exposed to infected blood. A baby can be infected during birth if the mother has hepatitis C. It also can be spread during unprotected sex, but it is harder to spread the virus this way. It is not spread through casual contact.

There is more than one type of hepatitis C virus. Different virus types are called strains. It is possible to be infected with more than one strain at the same time. It's also possible to be infected later with a different strain.

The signs and symptoms of hepatitis C are like hepatitis B signs and symptoms. In some cases, there are no symptoms. Unlike hepatitis B infection, most adults infected with hepatitis C become carriers. Most carriers develop long-term liver disease. A smaller number will develop liver damage and other serious, life-threatening liver problems.

Tests for Hepatitis C

The tests for hepatitis C show whether you are infected with the hepatitis C virus. If the test result is positive, another kind of test can tell whether you still have the virus in your blood, and if so, how much virus is present.

All people 18 and older should be tested for hepatitis C at least once. Those at high risk of infection should be tested for hepatitis C, regardless of age. People at high risk of hepatitis C infection include

- all adults born between 1945 and 1965
- users or past users of injected illegal drugs
- people who received clotting factors before 1987
- people who are on or have had dialysis
- people with HIV infection
- people who have abnormal **liver enzymes**
- people who received blood or who had an organ transplant before 1992
- people who received blood from someone who later tested positive for hepatitis C
- health care workers who may have been exposed to hepatitis C-positive blood
- children born to women who were infected with hepatitis C

Treatment and Prevention of Hepatitis C

Antiviral medications are used to treat hepatitis C infection. With recent advances in treatment, most people with chronic hepatitis C infection can be cured. Treatment also decreases the risk of long-term complications of the disease.

There is no vaccine to prevent hepatitis C infection. You can take steps to avoid hepatitis C, including

- using a latex or polyurethane condom every time you have vaginal, oral, or anal sex
- knowing your sex partners—the more partners you or your partners have, the higher your risk of getting infections
- getting help and trying to stop if you are injecting drugs—if you cannot stop, do not share needles

Hepatitis C and Pregnancy

About 4 in 100 pregnant women who are infected with hepatitis C will pass it to their babies. The risk is related to how much of the virus a woman has in her body and whether she also is infected with HIV.

If you test positive for hepatitis C before pregnancy, you can start treatment with an antiviral medication before getting pregnant.

Currently, there are no hepatitis C treatments approved for use during pregnancy. But hepatitis C testing is recommended for all pregnant women during each pregnancy. If you have the virus, you will need special care during pregnancy to make sure you stay healthy.

There are no preventive measures available that can reduce the risk of passing the virus on to the baby. **Cesarean birth** does not lower the risk of transmission to the baby. If you are infected with the hepatitis C virus, your baby should be tested, usually when your baby is at least 18 months old.

There is no newborn vaccine for hepatitis C. Babies who become infected with the hepatitis C virus will need ongoing medical care. You can still breastfeed your baby if you have hepatitis C infection.

You also will need long-term health care. You can start treatment with an antiviral medication after pregnancy. If you breastfeed your baby, treatment should start after finishing breastfeeding.

Finally...

Hepatitis B and hepatitis C are serious infections. Talk with your health care practitioner about the hepatitis B vaccine if you have not been vaccinated. If you are pregnant, you should be tested for the hepatitis B and hepatitis C virus.

Glossary

Antibodies: Proteins in the blood that the body makes in reaction to foreign substances, such as bacteria and viruses.

Carrier: A person who is infected with the organism of a disease without showing symptoms. This person can pass the disease to another person.

Cells: The smallest units of a structure in the body. Cells are the building blocks for all parts of the body.

Cesarean Birth: Birth of a fetus from the uterus through an incision (cut) made in the woman's abdomen.

Cirrhosis: A disease caused by loss of liver cells. The lost cells are replaced by scar tissue that impairs liver function.

Complications: Diseases or conditions that happen as a result of another disease or condition. An example is pneumonia that occurs as a result of the flu. A complication also can occur as a result of a condition, such as pregnancy. An example of a pregnancy complication is preterm labor.

Diabetes Mellitus: A condition in which the levels of sugar in the blood are too high.

Glucose: A sugar in the blood that is the body's main source of fuel.

Hepatitis B: An infection caused by a virus that can be spread through blood, semen, or other body fluid infected with the virus.

Hepatitis B Immune Globulin (HBIG): A substance given to provide temporary protection against infection with hepatitis B virus.

Hepatitis C: An infection caused by a virus that can be spread through infected blood.

Human Immunodeficiency Virus (HIV): A virus that attacks certain cells of the body's immune system. If left untreated, HIV can cause acquired immunodeficiency syndrome (AIDS).

Immune: Protected against infectious disease.

Immune System: The body's natural defense system against viruses and bacteria that cause disease.

Jaundice: A buildup of bilirubin (a brownish yellow substance formed from the breakdown of red cells in the blood) that causes the skin to have a yellowish appearance.

Kidney Disease: A general term for any disease that affects how the kidneys function.

Liver Enzymes: Chemicals made by liver cells. High levels of liver enzymes may suggest liver damage.

Prenatal Care: A program of care for a pregnant woman before the birth of her baby.

Sexually Transmitted Infection (STI): An infection that is spread by sexual contact. Infections include chlamydia, gonorrhea, human papilloma-virus (HPV), herpes, syphilis, and human immunodeficiency virus (HIV, the cause of acquired immunodeficiency syndrome [AIDS]).

Trimester: A 3-month time in pregnancy. It can be first, second, or third.

Vaccine: A substance that helps the body fight disease. Vaccines are made from very small amounts of weak or dead agents that cause disease (bacteria, toxins, and viruses).

Viruses: Agents that cause certain types of infections.

This information is designed as an educational aid to patients and sets forth current information and opinions related to women's health. It is not intended as a statement of the standard of care, nor does it comprise all proper treatments or methods of care. It is not a substitute for a treating clinician's independent professional judgment. For ACOG's complete disclaimer, visit www.acog.org/WomensHealth-Disclaimer.

Copyright July 2021 by the American College of Obstetricians and Gynecologists. All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, posted on the internet, or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise, without prior written permission from the publisher.

This is EP125 in ACOG's Patient Education Pamphlet Series.

ISSN 1074-8601

American College of Obstetricians and Gynecologists
409 12th Street SW
Washington, DC 20024-2188