

## TRANSFUSION MEDICINE SERVICES

<b>OTHER NAMES</b> IMIG Anti-HBIG	<b>CLASSIFICATION</b> Immunglobin	<b>ALERTS</b> Contains human plasma
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### PREPARATION and ADMINISTRATION

**Reconstitution** None.

HyperHep B is a sterile solution of immune globulin for intramuscular administration supplied in vials or as pre-filled syringes comprised of a syringe barrel with plunger, a needle with a needle cap (shield), and a plastic UltraSafe® needle guard (see page 2 under **Reconstitution** for proper use of pre-filled syringe).

It is a clear to opalescent liquid which can range from colorless, to pale yellow or pink.

#### Intramuscular Injection

Administer intramuscularly, preferably in the anterolateral aspects of the upper thigh and the deltoid muscle of the upper arm.

The gluteal region should not be used routinely as an injection site because of the risk of injury to the sciatic nerve.

Doses over 10 mL should be divided and injected into several muscle sites to reduce local pain and discomfort.

#### Requirements and Monitoring

##### Pre and post injection vitals

Blood pressure via cuff or arterial line

Temperature

Heart Rate

Respirations

Lung sounds in non-verbal, non-oriented or pediatric patients and patients with CHF or pulmonary dysfunction

Keep unopened back up bag of NS and standard IV tubing nearby for prompt response if an adverse event (AE) occurs.

### INDICATIONS

Indicated as an adjunct therapy along with hepatitis B vaccine for post-exposure prophylaxis in the following situations, unless it is known, by testing within the 24 previous months or can be established within 48 hours that the patient has levels of pre-existing antibodies to hepatitis B virus surface antigen at greater than or equal to 10 units/L:

- Acute exposure to blood containing hepatitis B virus surface antigen (HBsAg)
- Perinatal exposure of infants born to HBsAg-positive mothers
- Sexual exposure to, or needle sharing with an HBsAg-positive person
- Household exposure to persons with acute hepatitis B virus (HBV) infection

### ADVERSE EFFECTS

**Adverse reactions may include:** Allergic-type hypersensitivity reactions including anaphylaxis have been reported and have manifested as pruritus, rash, urticaria, local site reactions, hives, facial swelling, dizziness, hypotension, nausea, chest discomfort, cough, dyspnea, wheezing, flushing, discomfort (generalized) and fatigue.

**If an AE is suspected:** Consult the authorized prescriber (AP) for medical management. Notify the TM lab of a suspected reaction.

- Review the product lot number, TM tag and patient ID to rule out a verification (clerical) error and that the expiry date

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and time has not passed.

- Ensure TM tag, along with a copy of the documented clinical data and interventions are sent to TM lab if an adverse event occurs.

Note: AP may require blood work

### DOSAGE

Refer to product monograph for dosing based on individual clinical context.

### COMPATIBILITY, STABILITY

- Single use vials. Do not use past expire date
- Do not dilute
- Protect vials from light
- Do not store unused vials in refrigerator. Administer at room temperature

### DOSAGE FORMS

- Supplied by Transfusion Medicine

### MISCELLANEOUS

- None

### RECONSTITUTION

*Directions for administration of pre-filled syringe:*

1. Remove the prefilled syringe from the package. Lift pre-filled syringe by barrel, not by plunger. The plastic UltraSafe® needle guard must be kept in its original position until after administration, and should only be pulled down over the needle for disposal of the used syringe.
2. Twist the plunger rod clockwise until the threads are seated. Do not use if the pre-filled syringe is prematurely engaged.
3. With the rubber needle shield secured on the pre-filled syringe tip, push the plunger rod forward a few millimeters to break any friction seal between the stopper and the glass syringe barrel.
4. Remove the needle shield and expel air bubbles (Do not remove the needle shield to prepare the product for administration until immediately prior to the anticipated injection time).
5. Proceed with hypodermic needle puncture.
6. Aspirate prior to injection to confirm that the needle is not in a vein or artery.
7. Inject the medication.

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## REFERENCES

- [CL-BP-030, IWK-625 Blood Component and Blood Product Administration – Policy and Procedure](#)
- HyperHep B product monograph. Found at <https://www.grifols.com/en/products-services/-/product-search/canada>