



# Hepatitis C Pre-Treatment Assessment

Clinical Question	Response
Was the patient likely infected within the past 6 months? (i.e. acute infection)	If yes, consider referral
Does the patient have a detectable viral load?*	
What is the Hepatitis C genotype?	
Has the patient ever previously been treated?	If yes, consider referral
What is the liver disease stage? <a href="#">Click to view Staging Algorithm</a>	
What do AASLD Guidelines recommend based on the genotype and liver disease stage? <a href="#">Click to view AASLD Guidelines</a>	
Have basic labs and imaging studies been done? <ul style="list-style-type: none"> <li>Hepatitis C genotype and viral load (see above)</li> <li>Hepatitis A &amp; B serology (Hep A total Ab, Hep B SAg, Hep B S Ab, and Hep B total core Ab (Ig G/Ig M))</li> <li>HIV testing</li> <li>CBC, BMP, LFTs, PT/INR for all patients</li> <li>Hepatic ultrasound and AFP level for anyone with stage F3 or F4 liver disease prior to starting treatment</li> </ul>	Vaccinate for Hepatitis A & B if not immune  Consider referral for anyone with abnormal hepatic ultrasound, elevated AFP, or if HIV+  Give PVX- 23 for Stage F3 or F4 liver disease if not previously vaccinated or if not UTD
Are there any drug interactions to consider? <a href="#">Click to view Drug Interaction Checker</a>	
Any co-morbidities to take into account – particularly Child Pugh Class B or C (decompensated) cirrhosis, or Stage 4 or Stage 5 CKD (GFR $\leq$ 29) <a href="#">Click to view Child Pugh Calculator</a>	If yes, consider referral
Is the patient co-infected with either Hepatitis B or HIV?	If yes, consider referral
Is the patient pregnant? <a href="#">Click to view AASLD Guideline regarding Pregnancy</a>	If yes, do not prescribe treatment: suggest referral
How likely is it the patient will be able to adhere to the regimen? <a href="#">Click to view Prep-C assessment tool</a>	
Should I treat myself or should I refer to a “specialist?”	

\* If viral load (VL) is undetectable, repeat VL now and again in 6 months. If all VL results are undetectable: Done-no treatment necessary. If any VL results are detectable (or if concern still remains): suggest referral.