Guidance

For Hepatitis C Treatment Monitoring

Monitoring Patients on Pegylated Interferon + Ribavirin ± Protease Inhibitor *(Boceprevir or Telaprevir)*

CPH *Clinical Public Health*

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For more Hepatitis C information, look online at:
http://www.hepatitis.va.gov and
http://vaww.hepatitis.va.gov

IB 10-428; P96523 March 2012

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Labs/Test	Baseline	Wk 2	Wk 4	Wk 8	Wk 12	Wk 16	Wk 20	Wk 24	Wk 28	Wk 32	Wk 36	Wk 40	Wk 44	Wk 48	6 Months Post-Treatment
CBC with differential	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
ALT/AST	x		x		x			x		x		x		x	x
T. Bili	x		x		x	*As Clinically Indicated*									
Albumin, PT/INR	x	*As Clinically Indicated*													
Electrolytes-chem panel	x							x						x	x
Creatinine	x				x			x			x			x	x
TSH	x				x			x			x			x	x
Glucose	x				x			x			x			x	x
Uric acid (if on telaprevir)	x	x	x	x	x			x						x	x
Pregnancy test in women of childbearing age	x		x	x	x	x	x	x	x	x	x	x	x	x	x
Depression screening	x		x	x	x	x	x	x	x	x	x	x	x	x	x
Clinical evaluation	x	x	x	x	x	*Every 4-8 weeks based on patient tolerance and response to treatment*								x	x
May increase frequency of above tests/exams for patients with significant drops in blood counts, renal insufficiency, diabetes, cirrhosis or other indications															
HCV Genotype	x														
HCV RNA, PCR (Quant)	x		x	*Follow Algorithm for additional HCV PCR timepoints while on therapy*											
HIV	x														
HAV Ab (total)	x														
HBsAg, HBsAb, Anti-Hep B Core (total)	x														
ECG (if pre-existing cardiac disease)	x														
Psychiatric and substance use screening	x	*Check periodically while on antiviral therapy if indicated*													
Eye exam for retinopathy in patients with diabetes or hypertension	x	*As Clinically Indicated*													
Additional tests for consideration at baseline															
Liver biopsy	x														
Eye exam for patients without risk factors for retinal disease	x	*Check periodically while on antiviral therapy and as needed with any visual complaints*													
Serum ferritin, iron studies	x														
ANA	x														
Urine drug screen	x	*Check periodically while on antiviral therapy if indicated*													

****** Note: This is meant to provide general guidance, not mandatory requirements. ******