

HCV AB+
HCV RNA+

INITIAL HCV TESTING PANEL

HIV SCREEN
HEP A AND B SCREEN
LIVER FUNCTION PANEL
PLATELET COUNT
PATIENT EDUCATION
HCV GENOTYPE

IF HIV AND HBV NEGATIVE

SEE VACCINATION RECOMMENDATIONS

Treatment Eligibility Checklist

CONSULT WITH SPECIALIST

HIV OR HBV POSITIVE

CONSULT WITH SPECIALIST

SEE ALGORITHM FOR HCV-HIV, HIV-HBV, AND/OR HCV-HBV, COINFECTION PATIENT MANAGEMENT

CONSULT WITH SPECIALIST

CONTINUE FOLLOW UP
q 6 MONTHS - LIVER PANEL
ULTRASOUND
(if Advanced Fibrosis)
q 12 MONTHS
PLATELET/APRI
HIV SCREEN

HEPATITIS C PATIENT MANAGEMENT

SEE TABLES FOR TREATMENT DESCRIPTIONS