Screening is the first step to treatment

HIV, STIs, VIRAL HEPATITIS AND LTBI ROUTINE SCREENING TOOLKIT

Clinical Workflow Algorithm: Hepatitis C (HCV) Screening

This document translates screening guidance and clinical considerations from the USPSTF and CDC into a decision tree format to guide implementation.

WHO TO SCREEN

— Adults aged 18 to 79 years
— Pregnant persons
— Adolescents younger than 18 years and adults older than 79 years at high risk for infection

If screening criteria are met

TEST TO USE

Anti-HCV antibody testing

POSITIVE — PCR CONFIRMATORY TEST

NEGATIVE — NO INFECTION

Note: Periodic screening is recommended for persons with ongoing risk for HCV infection

IF SCREENING CRITERIA ARE MET

Risk factors

— Persons with past or current injection drug use
— Persons with HIV infection
— Persons who received maintenance hemodialysis
— Health care personnel with needlestick, sharps, or mucosal exposure to HCV positive blood
— Recipients of a transfusion or organ transplant before July 1992
— Recipients of clotting factor concentrates produced before 1987
— Children born to mothers with HCV

REACTIVE

Link to HCV treatment
See guidelines: www.hcvguidelines.org/treatment-naive
Perform HIV and HBV screen

NEGATIVE

No evidence of current HCV infection, but patient not protected from reinfection

IMPLEMENTATION CONSIDERATIONS

1 Test frequency
One-time screening for most adults and for each pregnancy. Periodic screening for persons with continued risk for HCV infection.

2 Treatment
Ensure patient knows that safe and highly effective treatment is available for hepatitis C.

3 Case reporting
Report positive cases to public health agency.