

NATIONAL STANDARD METHOD

MINIMUM TESTING ALGORITHM

BLOOD BORNE VIRUS TESTING IN DIALYSIS PATIENTS

VSOP 10

Issued by Standards Unit, Evaluations and Standards Laboratory
Centre for Infections



UK Clinical Virology Network



Association of Medical Microbiologists



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STATUS OF NATIONAL STANDARD METHODS

National Standard Methods, which include standard operating procedures (SOPs), algorithms and guidance notes, promote high quality practices and help to assure the comparability of diagnostic information obtained in different laboratories. This in turn facilitates standardisation of surveillance underpinned by research, development and audit and promotes public health and patient confidence in their healthcare services. The methods are well referenced and represent a good minimum standard for clinical and public health microbiology. However, in using National Standard Methods, laboratories should take account of local requirements and may need to undertake additional investigations. The methods also provide a reference point for method development.

National Standard Methods are developed, reviewed and updated through an open and wide consultation process where the views of all participants are considered and the resulting documents reflect the majority agreement of contributors.

Representatives of several professional organisations, including those whose logos appear on the front cover, are members of the working groups which develop National Standard Methods. Inclusion of an organisation's logo on the front cover implies support for the objectives and process of preparing standard methods. The representatives participate in the development of the National Standard Methods but their views are not necessarily those of the entire organisation of which they are a member. The current list of participating organisations can be obtained by emailing standards@hpa.org.uk.

The performance of standard methods depends on the quality of reagents, equipment, commercial and in-house test procedures. Laboratories should ensure that these have been validated and shown to be fit for purpose. Internal and external quality assurance procedures should also be in place.

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The HPA is an independent organisation dedicated to protecting people's health. It brings together the expertise formerly in a number of official organisations. More information about the HPA can be found at www.hpa.org.uk.

The HPA aims to be a fully Caldicott compliant organisation. It seeks to take every possible precaution to prevent unauthorised disclosure of patient details and to ensure that patient-related records are kept under secure conditions¹.

More details can be found on the website at www.evaluations-standards.org.uk. Contributions to the development of the documents can be made by contacting standards@hpa.org.uk.

Please note the references are now formatted using Reference Manager software. If you alter or delete text without Reference Manager installed on your computer, the references will not be updated automatically.

Suggested citation for this document:

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AMENDMENT PROCEDURE

Controlled document reference	VSOP 10
Controlled document title	Blood Borne Virus Testing in Dialysis Patients

Each National Standard Method has an individual record of amendments. The current amendments are listed on this page. The amendment history is available from standards@hpa.org.uk.

On issue of revised or new pages each controlled document should be updated by the copyholder in the laboratory.

Amendment Number/ Date	Issue no. Discarded	Insert Issue no.	Page	Section(s) involved	Amendment

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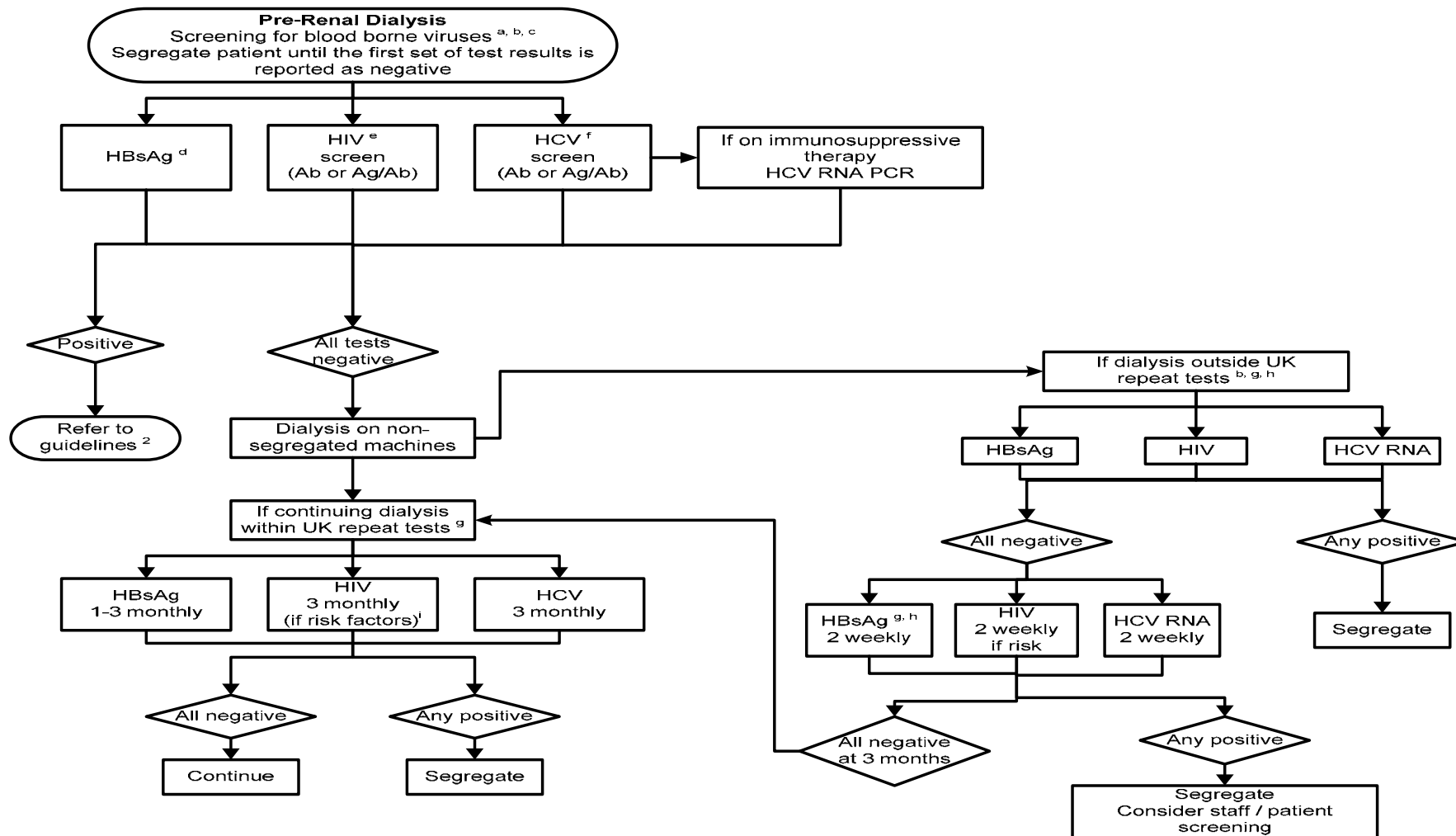
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^a if more than one month since negative tests for BBV

^b local risk assessment should be carried out based on the patients history including where and when dialysed if outside the UK

^c patients should be tested against HBsAg and anti-HBc to check for current/past infection; additional investigation and monitoring may need to be considered where anti-HBc alone is found, while absence of anti-HBc may indicate a need for vaccination against hepatitis B

^d [VSOP 4 - Hepatitis B diagnostic serology in the immunocompetent \(including Hepatitis B in pregnancy\)](#)

^e [VSOP 11- Anti-HIV Screening](#)

^f [VSOP 5 - Investigation of Hepatitis C Infection](#)

^g store blood samples for at least a year

^h HBsAg may not be required if recent antiHBs \geq 100mlu/mL

ⁱ if no risk factors as per the guidelines

ACKNOWLEDGEMENTS AND CONTACTS

This National Standard Method has been developed, reviewed and revised by the National Standard Methods Working Group for Clinical Virology (http://www.hpa-standardmethods.org.uk/wg_virology.asp). The contributions of many individuals in clinical virology laboratories and specialist organisations who have provided information and comment during the development of this document, and final editing by the Medical Editor are acknowledged.

The National Standard Methods are issued by Standards Unit, Evaluations and Standards Laboratory, Centre for Infections, Health Protection Agency, London.

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1. Department of Health NHS Executive: The Caldicott Committee. Report on the review of patient-identifiable information. London. December 1997.
2. Department of Health. Good practice guidelines for renal dialysis/transplantation units. Prevention and control of blood-borne virus infection. p. 24-35. 2005

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