

NATIONAL STANDARD METHOD

MINIMUM TESTING ALGORITHM

VERTICAL HCV TRANSMISSION

VSOP 8

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



UK Clinical Virology Network



Association of Medical Microbiologists



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VSOP 8i1

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www.evaluations-standards.org.uk

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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.

Whereas every care has been taken in the preparation of this publication, the Health Protection Agency or any supporting organisation cannot be responsible for the accuracy of any statement or representation made or the consequences arising from the use of or alteration to any information contained in it. These procedures are intended solely as a general resource for practising professionals in the field, operating in the UK, and specialist advice should be obtained where necessary. If you make any changes to this publication, it must be made clear where changes have been made to the original document. The Health Protection Agency (HPA) should at all times be acknowledged.

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 8
Controlled document title	Vertical HCV Transmission

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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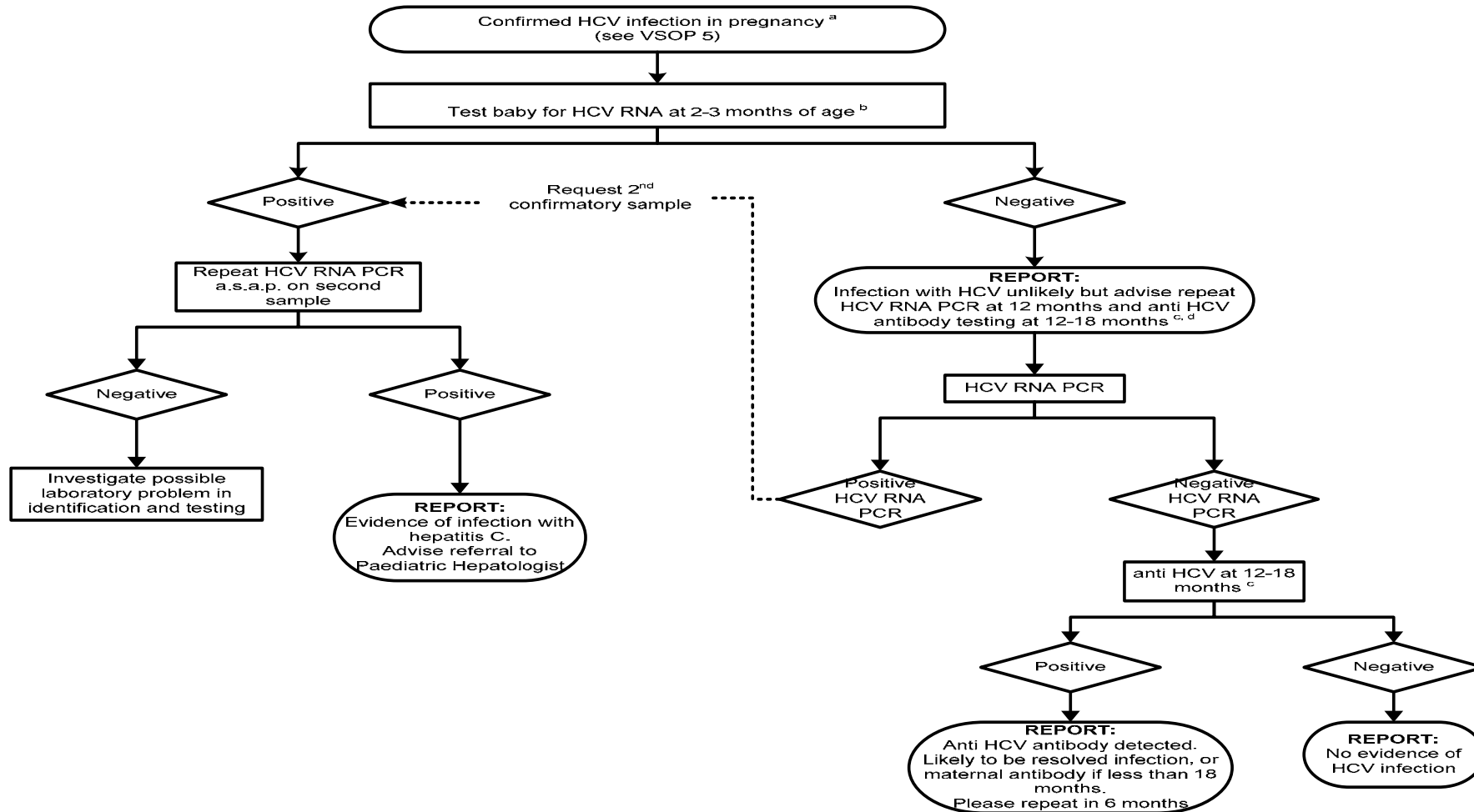
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- a – Mothers with evidence of hepatitis C infection who are HCV RNA negative are highly unlikely to transmit HCV to the baby
- b – This guidance is based principally on that given in Reference 2 (see References). It should be noted that other guidelines do not always advocate early PCR testing in children eg Scottish Intercollegiate Guidelines Network No. 92. Management of hepatitis C - available at <http://www.sign.ac.uk/pdf/sign92.pdf>
- c – Combined HCV antigen/antibody assay could also be used
- d – Both PCR and antibody should be carried out between 12 – 18 months

ACKNOWLEDGMENTS AND CONTACTS

This National Standard Method was initiated and developed by the National Standard Methods Working Group for Clinical Virology on Standards and Quality (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.

For further information please contact us at:

Standards Unit
Evaluations and Standards Laboratory
Centre for Infections
Health Protection Agency
Colindale,
London
NW9 5EQ
[e-mail standards@hpa.org.uk](mailto:standards@hpa.org.uk)

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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. Davison SM, Mieli-Vergani G, Sira J, Kelly DA. Perinatal hepatitis C virus infection: diagnosis and management. Arch Dis Child 2006;91:781-5.

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