I am a physician with board certification in Family Medicine. I have clinical experience in treating Hepatitis C during/post residency using interferon/ribavirin, completed the Hepatitis C 101 treatment course from UCSF in 2016, and am an active participant in the UCSF Hepatitis C project ECHO group. I have experience with treating Hepatitis C using AASLD guidelines and have access to hepatology consultation as needed during treatment.

I have evaluated the above patient for readiness to initiate treatment and they are willing/able to strictly adhere to the treatment protocol I have prescribed. This patient has been educated regarding the risks and benefits of hepatitis c virus treatment, including the potential for resistance if the therapy fails due to medication non-adherence.

Clinical Information:

Chronic active hepatitis C genotype 1a 1b 2 3 4 5 6

Year acquired ~

How acquired -

Year diagnosed –

Treatment naïve

Treatment experienced - interferon and ribavirin

Result of prior treatment – null responder, partial responder, relapse/reinfection, failed to complete treatment

No history of treatment with Incivio (telepravir) or Victrelis (bocepravir)

Liver Biopsy – None

APRI Score – Does not suggest advanced fibrosis

Fibrosure –

Cirrhosis – confirmed suspected but unconfirmed none

CTP score -

Childs Class – NA A B C

Extrahepatic manifestations:

Cryoglobulinemia with end organ manifestations or kidney disease - No

HCC - No

HIV - No

Hepatitis B infection - No

Other liver disease – No Yes – steatohepatitis

Type 2 diabetes with insulin resistance - No

Porphyria - No

Men who have sex with men - No

Active injection drug use - No

Hemodialysis - No

Woman considering pregnancy- No

Healthworker that performs high risk procedures- No

Debilitating fatigue- No

Other factors that increase priority/urgency for treatment:

Supplemental information

Interferon intolerant/ineligible: No

(platelets < 100,000, decompensated cirrhosis, severe mental health condition, autoimmune disorder, prior interferon adverse effect, cardiac disease)

Transplant

Transplant recipient/type: No

Pre-transplant: No

Ribavirin Intolerant/ineligible: No

Pregnancy Prevention (if Ribavirin planned):

Counseling provided: NA

Pt infertile or not sexually active: NA

Contraception use during and 6 months post treatment for female/female partner: NA

Life expectancy greater than 12 months: Yes

Medication List:

Chosen regimen:

Acceptable alternate regimen:

Daclatasvir 60mg/sofosbuvir 400mg by mouth once daily for 12 weeks

Epclusa – velpatasvir 100mg/sofosbuvir 400mg by mouth once daily for 12 weeks

Harvoni - ledipasvir 90mg/sofosbuvir 400mg by mouth once daily for 8 or 12 weeks

Mavyret – glecaprevir 100mg/pibrentasvir 40mg – 3 tablets by mouth daily for 8 or 12 weeks

Vosevi – sofosbuvir 400mg/velpatasvir 100mg/voxilaprevir 100mg – 1 tablet daily for 12 weeks

Zepatier – elbasvir 50mg /Grazoprevir 100mg by mouth once daily for 12 weeks

See attached ultrasound report