Department of Corrections
WASHINGTON STATE

PATIENT I.D. DATA:

(Name, DOC#, DOB)

HEPATITIS C TREATMENT SIDE EFFECT MANAGEMENT

Facility	Allergies

PRACTITIONER DATE/TIME/INIT	**Practitioner conducting evaluation enters date/time and initials/stamps at left. Nurse taking off order enters date/time and initials/stamps at right.**	NURSE DATE/TIME/INIT
	MANAGEMENT OF SIDE EFFECTS • The Hepatitis C Protocol is a guideline. Some patients may need more frequent monitoring based on clinical judgment. • Present all cases to Hep C CRC within one week of dosage changes. • E-mail/page/call Hep C Committee chair before prescribing Epogen. • Standard dosing: Epoetin alfa (Epogen) 40,000 units subcutaneous once weekly	
	I. MANAGEMENT OF ANEMIA If patient is on Epogen, discontinue immediately if hemoglobin goes above 12 g/dL. Adjust dose of ribavirin in increments of 200 mg to maintain hemoglobin at > 10 g/dL. ☐ No cardiac disease or equivalent (e.g. DM) ☐ Hemoglobin < 10 g/dL: Reduce ribavirin dose to 600 mg a day (200/400) ☐ Hemoglobin < 8.5 g/dL: Stop ribavirin ☐ History of stable CAD ☐ ≥ 2 g/dL in any four week period: Reduce ribavirin dose to 600 mg a day (200/400) ☐ Hemoglobin < 12 g/dL: Reduce ribavirin dose to 600 mg a day (200/400) ☐ Hemoglobin < 12 g/dL after four weeks at reduced dose or < 10 g/dL: Stop ribavirin	