Question: Should I screen my senior patients for Hepatitis C virus (HCV)?

Answer: Yes! U.S. Preventive Services Task Force (USPSTF) recommends a 1-time screening for HCV infection for all patients born between 1945 and 1965 and for persons at high-risk for infection.

According to the task force, three-quarters of people in the United States who are currently infected with HCV are in the 1945-1965 birth cohort.

Infection with HCV can result in both acute and chronic hepatitis.

60% - 80% of acute Hep C patients develop chronic hepatitis.

Documentation Example:

- Initial diagnosis of a 61 year old male with chronic HCV infection

Assessment: Chronic HCV infection, per hepatitis panel and viral load results on 6/30/16, asymptomatic

- HCC/ICD-9 Code: 070.54 Chronic hepatitis C without mention of hepatic coma

- HCC/ICD-10 Code: B18.2 Chronic viral hepatitis C

Plan: Education and refer to GI

OR

- Established diagnosis of a 55 year old female with chronic HCV infection

Assessment: Viral load improving

- HCC/ICD-9 Code: 070.54 Chronic hepatitis C without mention of hepatic coma

- HCC/ICD-10 Code: B18.2 Chronic viral hepatitis C

Plan: Continue treatment with GI

NOTE:

- Acute HCV infections or carrier status should be documented but are not HCCs

- HCC/ICD-9 Code: 070.51 Acute hepatitis C without mention of hepatic coma, V02.62 Hepatitis C carrier

- HCC/ICD-10 Code: B17.10 Acute hepatitis C without hepatic coma, Z22.52 Carrier of viral hepatitis C