# Appendix C-

# PHIMS Closure Checklist for Hepatitis C Case Investigations

# **Demographics:** Confirm validated address and phone number have been entered into client demographics

# **Case classification/ staging:** Label as “lab confirmed”, staging will vary, “chronic” as default if both antibody and RNA/ core antigen positive. If only antibody testing completed, stage as unknown. See page 6 [**https://www.gov.mb.ca/health/publichealth/surveillance/docs/mhsu\_6780\_ug.pdf**](https://www.gov.mb.ca/health/publichealth/surveillance/docs/mhsu_6780_ug.pdf) for guidance regarding “previous diagnosis” staging. Ensure staging is added by 4 weeks.

# **Case disposition:** Specific disposition will depend on the specific clinical scenario, however appropriate dispositions at time of closure may include:

# Declined follow up

# Follow up complete

# Unable to complete/ locate

# **Address at time of initial investigation:** Verify appropriate address selected from drop down. **.** If in the last 12 months the client has been unsheltered, emergency sheltered, or provisionally sheltered as defined by[**https://www.homelesshub.ca/sites/default/files/COHhomelessdefinition-1pager.pdf**](https://can01.safelinks.protection.outlook.com/?url=https%3A%2F%2Furldefense.com%2Fv3%2F__https%3A%2F%2Fwww.homelesshub.ca%2Fsites%2Fdefault%2Ffiles%2FCOHhomelessdefinition-1pager.pdf__%3B!!IqQd2s6KUyvHwNLtrw!qvZb8XfU_HsxkgYPjpHrJcmNZJdPx3bbeqFrfQFyfHJMXfUsE6ict44XSfqDNXkonRTROsUsrTvjd6dlKeucx5Nr7ciucQ%24&data=05%7C01%7CDebbie.Nowicki%40gov.mb.ca%7C61f6aa88f2524771c89208daff0d4eb9%7Cabf64de92a5c4d77baa2a76265367d3a%7C0%7C0%7C638102730139447483%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=k%2BCoS7nv7W1umPiuZ%2FtCmrcm6SWxyK6XCTaUgpn6%2BEk%3D&reserved=0) **- add risk factor Housing Unstable**

# **Exposure summary:** If IVDU contacts were generated, ensure that contacts have been entered correctly and that follow up is either complete or that there is a clear plan for ongoing follow up. All contacts should be reflected in exposure summary, even if it is as an anonymous contact.

# **Signs and Symptoms:** Record both yes and no for all discussed with client/ HCP

# **Risk factors: social and exposure-related risk factors are defined on MHSU Surveillance form. For required risk factors, investigator must document a response: *yes, no, unknown, declined to respond, not asked.* Ensure inclusion of relevant risk factors associated with potential blood exposure. If client has a previous history of Hep C diagnosed out of Manitoba, detail should be recorded in the appropriate risk factor. Non-required risk factors may be explored if client does not identify any other likely acquisition risk, or other relevant issues that arise during the investigation.**

# **Closure Note:** Documentation should occur throughout investigation in the note section in accordance with regional documentation policies. Prior to closure, include a note summarizing completion of follow up/ what remains outstanding (if unable to locate client).