



GP Referral Follow-Up Letter

Date...../...../.....

Addressograph Label

Dear Doctor..... ,

Thank you for reviewing baby and family. This neonate was identified as at risk for Hepatitis C virus (HCV).

Breastfeeding is recommended provided the woman has no damaged or bleeding nipples. Should this occur the breasts should continue to be emptied (pump and discard the milk) until such time as the nipples are healed. During this time the infant may be formula fed.

Recommended follow-up testing for the infant to assess if perinatal infection has occurred is as follows:

- Test the infant for HCV antibodies at **18 months of age**. Prior to this time passive transfer of maternal antibodies may limit value of this test.
- In circumstances requiring earlier diagnosis (e.g. for parental anxiety/ or request):
 - Test the infant for HCV RNA between 2 and 6 months of age
 - Two tests must be performed 3 to 4 months apart in order to confirm the diagnosis.

If two tests confirm the infant is HCV RNA negative, the infant should be tested at 18 months of age for HCV antibodies.

Thank you for your ongoing care of this family.

Regards,

Signature..... Designation.....

Print Name

Staff of the Neonatal Directorate, KEMH