**Bundling Antibody and Reflex Testing for Single Blood Draw**

**Adapted from SSTAR, Fall River**

To reduce the need for callbacks for repeat lab draws, it is preferable to screen for HCV using reflex testing that automatically follows a positive HCV antibody test with an HCV viral load and (if positive) genotype testing. For clinics that do not already have the ability to order such reflex testing, the following provides advice on working with the lab to set this up.

1. Implementation process required discussion with lab contractor. The lab vendor initially expressed some skepticism regarding additional cost associated with implementation of reflex testing. Buy-in was facilitated by emphasizing:
	1. There are not clinical situations where an antibody result would be used without also performing the HCV RNA test.
	2. Emphasize with the lab vendor that this change will not incur more cost to the lab, and in fact will increase revenues as patients will not be lost to follow-up for viral load or genotype testing
2. This cascade of labs may require the assignment of a new lab code, requiring cooperation between the clinician and lab vendor.
	1. Clinic IT support will be needed to add the new lab code to the EMR.
	2. Important to ensure that new providers are “added” this order in the contracting lab’s system
3. Providers should be notified of this change in the recommended HCV screening process.
	1. The Combined screening and confirmation test was simply labeled as “HCV antibody” in EMR lab order module for simplicity.
	2. This test is included in preselected “favorites” to encourage providers to select it.
	3. Once implemented this was a seamless process from patient and provider perspective as it did not require providers to change processes; therefore, no training needed beyond description of change in results.
4. The lab technician must draw enough blood for both an antibody screening test, quantitative PCR test (viral load) and genotype
	1. This reduces need from 3 separate lab visits to 2 for uncomplicated cases, which patients sometimes don’t follow through on
	2. Requires 2 vials of blood to be drawn but can be obtained from single venipuncture site
5. Using a medical assistant or HCV patient navigator to accompany patients to the lab, and having evening and weekend lab hours, can help improve lab completion rates.