Hepatitis A Modified Cases Investigation

In response to the statewide outbreak of hepatitis A virus (HAV), the Division of Infectious Disease Epidemiology (DIDE) is issuing modified guidance for Hepatitis A case investigations because of the volume of cases being reported. This guidance is for when the local health department (LHD) receives notification of a positive HAV laboratory test, the investigation should begin as follows:

1. Contact the reporting facility for information about the case. Request the history and physical (H&P) for the visit or any other pertinent notes if a H&P is not available. If the testing was performed at a hospital, the Infection Preventionist (IP) is a good point of contact.

2. Using the lab report and the information provided by the reporting provider, complete as much of the Acute Hepatitis A case report form as possible.

3. Contact the patient using the phone number provided to complete the case report form interview and identify close contacts. Close contacts for HAV investigations include household, sexual, and injection or non-injection illicit drug sharing contacts. Cases that have the potential to be high profile should be given additional attention and may require additional investigation. This includes a food service employee, a person who works or attends a school or daycare, and those that live in a closed setting (e.g. group home, treatment center, long-term care facility, or incarcerated). Please let make the Epidemiologist lead aware of these cases.

4. Evaluate contacts for the need for post-exposure prophylaxis (PEP) or vaccination based date of last contact and risk factors. Notify contacts to arrange for PEP or vaccination as needed. See the surveillance protocol for PEP recommendations.

5. Review HAV education with patient:
   1) HAV is a highly contagious disease of the liver. It is usually a short-term illness that leaves you sick for several weeks. HAV can be very serious and can cause liver failure and death in some cases.
   2) HAV is usually spread when you ingest the virus from contaminated objects/surfaces you touch. These objects/surfaces are contaminated with tiny amounts of stool you cannot see from a person who is infected. HAV can also spread from close contact with an infected person through sex or caring for someone who is ill.
   3) You can prevent others from getting sick with HAV through vaccination. This is the best way to prevent HAV. This is why we ask for the names of your close contacts so that we can provide them vaccine to prevent them from also getting
sick. Making sure you wash your hands with soap and water after using the bathroom, changing diapers, and before preparing or eating food is important so that the virus does not spread.

6. If unsuccessful in contacting the patient at the number provided, after 3 attempts and a voicemail requesting a return call (if possible), a letter should be mailed to the address on record for the patient.

7. If no return call is received, there is no additional follow up necessary and the case is considered lost to follow up.

8. The information available should be reported into West Virginia Electronic Disease Surveillance System (WVEDSS).

Additionally, lab reports with a result of borderline, equivocal, or indeterminate should be investigated to determine if the person is symptomatic, has risk factors related to the outbreak, or is a contact of a conformed case of HAV.