**Section 690.452 Hepatitis C, Acute Infection and Non-Acute Confirmed Infection (Reportable by mail, telephone, facsimile or electronically, within 7 days)**

a) Control of Case. Standard Precautions shall be followed.

b) Control of Contacts. No restrictions.

c) Laboratory Reporting. Laboratories shall report to the local health authority patients who are anti-HCV positive by immunoassay (e.g., enzyme immunoassay, chemiluminescence immunoassay) with a signal-to-cutoff ratio (S/C) or other parameter predictive of a true positive as determined for the particular assay (S/C should be included with all test results that are reported) or who test positive for hepatitis C by recombinant immunoblot assay, polymerase chain reaction (PCR) or any other supplemental or confirmatory test that may be used. Results of the alanine aminotranferase testing that are closest in time to the date of the positive hepatitis C result and within 3 months of the positive test for hepatitis C should be reported concurrently with the positive immunoassay, PCR, immunoblot or other confirmatory test results. Viral genotype results (when performed) should also be reported. Laboratores not performing confirmatory testing or tests to identify highly positive specimens (e.g., S/C) shall report selected hepatitis C results as requested by the Department.

(Source: Amended at 32 Ill. Reg. 3777, effective March 3, 2008)