Supplementary Table 1. FDA-Approved HCV Encoded Antibody Testing (Anti-HCV Assay)

Trade name	Format	Sample	Use	Specificity/ sensitivity	Whole blood vol.*	Manufacturer
Abbott PRISM HCV	CIA (c100-3, HCr43, NS5)	Serum/Plasma/ Cadaveric serum	Clinical; blood/ organ donors	99.89%/ 100%	1.4 ml	Abbott
HCV EIA, Version 3.0	EIA (c-22-3, c200, NS5)	Serum/plasma	Clinical; blood/ organ donors	99.95%/ 100%	0.08 ml	Ortho-Clinical Diagnostics, Inc
RIBA HCV 3.0 Strip Immuno-blot	SIA (NS5, c33c,c100, 5-1-1p, c22p)	Serum/plasma	Suppl. Ab testing of HCV antigens	96.7%/ 96.4%	0.08 ml	Novartis Vaccines and Diagnostics, Inc

(Modified from reference #77); *assuming duplicate assays and serum or plasma being ~50% of whole blood

Supplementary Table 2. FDA-Approved Hepatitis C Virus Nucleic Acid Assays

Qualitative Assays: Trade Name	**Format**	**Sample**	**Use**	**LLD IU/ml**	**Blood vol.***	**Manufacturer**
COBAS Amplicor HCV Test (v 2.0)	Manual RT-PCR	Plasma; Cadaveric serum/ plasma	Qualitative HCV RNA	50	0.8 ml	Roche Molecular Diagnostics
COBAS Ampliprep/COBAS Amplicor HCV Test (v 2.0)	Semi-automated RT-PCR	Plasma; Cadaveric serum/plasma	Qualitative HCV RNA	50	4 ml	Roche Mol. Diagnostics
COBAS Ampli-Screen HCV Test(v2.0)	Semi-automated RT-PCR	Plasma	Qualitative HCV RNA	<10	N.A.	Roche Mol. Diagnostics
Versant HCV RNA Qualitative Assay	Semi-automated RT-PCR	Plasma	Qualitative HCV RNA	50	2 ml	Versant
Quantitative Assays: Trade name	**Format**	**Sample**	**Dynamic range IU/ml**	**LLD IU/ml**	**Blood vol.***	**Manufacturer**
HCV RNA 3.0 assay	DNA signal amplification	serum	615- 7.7x 10^6	615	0.2 ml	Versant
COBAS Ampliprep/COBAS TaqMan HCV Test	Fully automated RT-PCR	Plasma, serum	43- 6.9 x 10^7	15	4 ml	Roche Mol. Diagnostics
COBAS TaqMan HCV Test v2.0 (High Pure System)	Semiautomated RT-PCR	Plasma, serum	25- 3 × 10^8	25	2 ml	Roche Mol. Diagnostics
Abbott RealTime HCV	Semiautomated RT-PCR	plasma	12- 1 × 10^8	12	0.8 ml	Abbott

(Modified from reference #77)

*assuming duplicate assays and serum or plasma being ~50% of whole blood

Supplementary Table 3. Dose Reductions of PEG-IFN Based on Abnormal Laboratory Values (adapted from Ref. #101)

Weekly PEG IFN-α-2a Dosing

Original dose	Level 1 Decrease	Level 2 Decrease	Level 3 Decrease
180 mcg/1.73m^2	135 mcg/1.73m^2	90 mcg/1.73m^2	45 mcg/1.73m^2

Weekly PEG IFN-α-2b Dosing

Original dose	Level 1 Decrease	Level 2 Decrease	Level 3 Decrease
60 mcg/m^2	45 mcg/m^2	30 mcg/m^2	15 mcg/m^2

Parameter	Action
Absolute Neutrophil Count (cells/mm^3)	
750-999	Wk. 1-2: Level 1 Decrease Wk. 3-48: none
500-749	Wk. 1-2: delay dose until ≥750, then resume with Level 1 Decrease Wk 3-48: Level 1 Decrease
250-499	Wk. 1-2: delay dose until ≥750, then resume with Level 2 Decrease Wk 3-48: delay dose until ≥750, then resume with Level 1 Decrease
<250 or febrile neutropenia	Stop drug
Platelets (cells/mm^3)	
35,000-49,000	Delay dose until ≥50,000, then resume dose with Level 1 Decrease
25,000-34,000	Delay dose until ≥50,000, then resume dose with Level 2 Decrease
<25,000	Stop drug
ALT	
≥5x but <10x ULN	-Repeat ALT in 1 wk -If ALT decreasing then continue at present dose. Follow ALT q1-2 wks. to assure stability -If ALT increased but <10x ULN, Level 1 Decrease and weekly ALT until decreasing
≥10x ULN	-Repeat ALT in 1 wk -If ALT decreasing but between 5-10x ULN then Level 1 Decrease and weekly ALT until decreasing -If ALT still ≥10x ULN, stop drug

Ribavirin Dosing

Original dose	Dose Reduction
15 mg/kg/day, divided BID	7.5 mg/kg/day, divided QD or BID (based on dose)

Hemoglobin (gm/dL)	Action
<10	-Decrease ribavirin dose by 50% -Follow weekly and increase to original dose when >10 gm/dL
<8.5	Permanent discontinuation of ribavirin