Enrollment Criteria (Pediatric)

General Instructions

The Enrollment Criteria form lists the inclusion and exclusion criteria for the Cohort Study. This form is to be completed after the patient information has been recorded on the Screening Log, the eligibility criteria listed on the Screening Log have been met, the parent/caregiver has provided written informed consent for study participation, and the patient has provided assent, if age appropriate. This form should be completed when patient eligibility can be determined, most likely at the screening visit or very shortly after the screening visit.

Consent for the genetic component of the Cohort Study is not required for participation in the Cohort Study.

Consent for stored samples (serum, plasma, liver tissue) should be encouraged since many of the laboratory tests that are important to the Cohort Study will be performed on stored samples at the HBRN central testing laboratory, although these stored samples are not required for participation in the Cohort Study.

Specific Instructions

Patient ID**:** Record the Patient ID in the top right hand corner.

Date of Determination: Record the date (month/day/year) that patient eligibility is determined. Either the patient meets all inclusion criteria and none of the exclusion criteria (eligible) or the patient fails to meet at least one of the inclusion criteria or meets any of the exclusion criteria (ineligible).

Section I: Inclusion Criteria

Check "Yes" or "No" to indicate if the patient meets each of the inclusion criteria. The response to all inclusion criteria must be YES for a patient to be eligible for participation in this study.

Age: Check "Yes" if the patient is at least 6 months of age and less than 18 years of age. Check "No" if the patient is under 6 months of age or 18 years of age or older at the time.

HBsAg positive: Check "Yes" if the patient is HBsAg positive or check "No" if there is no test result to confirm that the patient is HBsAg positive at the time.

Informed consent: Check "Yes" if the parent/caregiver has provided written informed consent and the patient has provided assent, if age appropriate, to participate in this study. Check "No" if parent/caregiver consent or patient assent, if age appropriate, has not been obtained.

Section II: Exclusion Criteria

Check "Yes" or "No" to indicate if the patient meets the following exclusion criteria. The response to all exclusion criteria must be NO for a patient to be eligible for participation in this study.

Hepatic decompensation:

Check “No” if the patient does not have a history of hepatic decompensation.
Check “Yes” if the patient has been diagnosed with hepatic decompensation defined as the presence of any of the following:

- Ascites or hepatic hydrothorax
- Variceal or portal hypertensive bleeding
- Hepatic encephalopathy
- Child-Turcotte-Pugh (CTP) score ≥ 7

Ascites: Defined as an excess of fluid in the peritoneal cavity that is either mild, moderate or marked on ultrasound, or is progressive on serial physical examinations, or requires diuretic therapy. Ultrasound report of minimal fluid around the liver does not meet the definition.

Medical record must indicate the presence of ascites or diuretic usage and one of the following:

- Paracentesis lab report
- Liver U/S report
- Liver CT report
- Liver MRI report

Hepatic hydrothorax: ascites associated pleural effusion.

Variceal bleeding: defined as GI bleeding from varices present in the esophagus or stomach based on an endoscopy showing either:

- Direct evidence of variceal bleeding (bleeding varix, red wale sign)
- Moderate varices with no other site of bleeding identified and historical evidence for clinically significant upper GI bleeding.

Medical record must include an endoscopy report showing evidence of active or recurrent bleed within 48 hours of an episode.

Portal hypertensive bleeding: gastrointestinal bleeding associated with portal hypertension.

Hepatic encephalopathy: Characterized by recurrent disturbances of consciousness, impaired intellectual function, neuromuscular abnormalities, metabolic slowing on EEG and elevated serum ammonia levels. Symptoms include changes in mental state, consciousness, behavior and personality, decrease in performance of simple self-care tasks, or muscle spasms or rigidity. Also known as portal-systemic encephalopathy.

Medical record must indicate one of the following:

- Asterixis
- Clinical alteration in mental status with reversibility with therapy
- Two or more episodes of confusion consistent with encephalopathy

A patient with acute hepatitis B and a CTP >7 may be enrolled as long as the patient is not in liver failure. The CTP score applies to patients with cirrhosis only.

CTP score is calculated using the algorithm below.

		Number of points		
Items	**Units**	**1**	**2**	**3**
Serum albumin	g/dL	>3.5	2.8-3.5	<2.8
Serum total bilirubin No Gilbert's Syndrome No hemolytic diseases Not receiving Ribavirin	mg/dL	<2.0	2.0-3.0	>3.0
Serum total bilirubin Presence of Gilbert's Syndrome Hemolytic disorder such as patients receiving Ribavirin*	mg/dL	<4.0	4.0-7.0	>7.0
INR		<1.7	1.7-2.3	>2.3
Ascites		None	Mild^	Severe‡
Encephalopathy		None	Mild^	Severe‡

Note that if, in the opinion of the investigator, the patient has Gilbert's syndrome or a hemolytic disorder (e.g., patients receiving ribavirin) the level of the serum total bilirubin may be increased to as high as 3.99 mg/dL without considering the total bilirubin to be sufficiently elevated for the patient to receive a score of 2 in the CTP scoring system.

^ Mild means readily controlled by standard medical therapies.

‡ Severe means difficult to control or uncontrollable by optimal, maximally tolerated medical therapies.

The score is the sum of the scores for albumin, total bilirubin, INR, ascites and encephalopathy (range 5-15)**.**

Class A = 5-6
Class B = 7-9
Class C = 10-15

HCC: Check "No" if the patient does not have a history and there is no known evidence of hepatocellular carcinoma (HCC). Check "Yes" if the patient has a diagnosis of HCC. The diagnosis of HCC will follow the AASLD guidelines.

Solid organ or bone marrow transplant: Check "No" if the patient has not had a solid organ transplant or bone marrow transplant. Check "Yes" if the patient has had a solid organ transplant or bone marrow transplant.

HIV co-infection: Check "No" if the patient is not known to have HIV infection. Check "Yes" if the patient is known to have HIV infection.

Current hepatitis B antiviral therapy:	Check “No” if the patient is not currently taking antiviral treatment for hepatitis B or if the patient is pregnant and is currently taking antiviral treatment for hepatitis B. Check “Yes” if the patient is currently on an antiviral therapy for hepatitis B (except pregnant women), which includes but is not limited to Entecavir, Telbivudine, Lamivudine, Adefovir, Tenofovir, Emtricitabine, and Truvada. **NOTE**: A pregnant woman, on antiviral therapy for hepatitis B, is eligible to participate in the Cohort Study.
Use of chronic immunosuppression therapy:	Check “No” if the patient has not been on immunosuppressive therapy. Check “Yes” if the patient has been regularly using immunosuppressive therapy within the 30 days prior to screening or the patient has started immunosuppressive therapy and will remain on therapy for 30 days or more. Some common immunosuppressive agents include but are not limited to corticosteroids, methotrexate, cyclosporine, azathioprine, Cellcept, Prograf and Arava.
Routine follow-up:	Check “No” if the there is no indication or reason to believe that the patient would be unwilling or unable to adhere to the routine follow-up schedule for the study protocol or to return per protocol for “special visits”. Check “Yes” if the patient has expressed or implied that they will be unable to adhere to the protocol schedule and you chose to exclude them from enrollment for this reason.
Other evidence for exclusion:	Check “No” if there is no other reason, in the opinion of the investigator, to exclude the patient from participation in the study. Check “Yes” and record the reason in the space provided if, in the opinion of the investigator, there is some medical, social, or other reason that the patient should not be enrolled in the Cohort Study.

The response to all inclusion criteria must be YES and all exclusion criteria must be NO for the patient to be eligible for participation in this study. If the patient is determined to be eligible, check “Yes” to the eligibility question at the bottom of the page. If the patient is not eligible for participation then check “No” and no additional study-related tests should be performed or data collection forms completed for the Cohort study.