Important: Read all instructions before use.

The Home Access® Hepatitis C Check™ collection kit is part of a counseling and testing service for use in determining if you have antibodies to the Hepatitis C virus, which would indicate you have been infected. This means you might have Hepatitis C, but this diagnosis can only be made by a physician. The service is intended for use by persons with little or no experience in obtaining blood samples for medical testing. This kit contains all the items necessary to collect and mail your blood sample to our certified laboratory for testing. For counseling or assistance in collecting your blood sample, call 1-800-442-7708 or 1-847-310-4224 to speak with a healthcare counselor.

WARNINGS
• Keep out of reach of babies or children.
• Only one person’s blood should be applied to the blood sample card.
• You may experience dizziness while collecting your blood sample. If this occurs, sit down.
• During blood sample collection, use precautions to prevent other persons from coming into contact with your blood.
• Do not leave your blood sample in a place where others may be exposed to it.
• If you feel ill, consult your physician.
• Failure to dispose of used lancets as directed may result in injury or infection.
• Carefully handle the lancet. DO NOT touch the red activation button until ready for use. Each lancet may only be used once.

LIMITATIONS OF THIS SERVICE
• This service tests your blood for the presence of antibodies to the Hepatitis C virus. If you receive a “positive” result, further testing and evaluation by a physician is strongly recommended. The tests used cannot determine if this is an active infection, or if you were infected in the past and may no longer be infected.
• A small number of persons who are infected with the Hepatitis C virus will receive a “negative” result from this service. If you become ill or remain concerned that you may be infected, a physician of your choice should evaluate you.
• Failure to use this blood sample collection kit as directed may result in an insufficient sample or an inaccurate test result.
• Our laboratory must receive blood samples of adequate size and quality to complete testing.
• Your blood sample is perishable. If not received within 14 days of collection, it may not be tested.
• Use by persons under 18 years of age has not been evaluated.
• You must have your Personal Identification Number (PIN) to get your results.
• Use this kit before the “Use By” Date printed on the outside of the kit.

CHECKING YOUR KIT

Contents

1 Instructional Insert
1 “Answers to Frequently Asked Questions about Hepatitis C” Insert
1 Blood Sample Collection Card with Personal Identification Number (PIN)
1 Alcohol Prep Pad
1 Gauze Pad
2 Lancets
1 Adhesive Bandage
1 Sample Return Pouch
1 Cardboard U.S. Mail Envelope
A. PREPARE TO TAKE THE TEST
Read the information provided in the "Answers to Frequently Asked Questions about Hepatitis C" regarding antibodies to the Hepatitis C virus and for explanations of the types of results that you might receive from this testing service. Read the important information found in the Limitations of the Service section and the Informed Consent section of these instructions. Once you agree to these conditions, proceed to Step B.

B. REGISTER YOUR PERSONAL IDENTIFICATION NUMBER (PIN)
1. Carefully tear off the yellow portion of your Blood Sample Collection Card at the perforation. It contains your fourteen-digit, Personal Identification Number (PIN). You alone are responsible for your PIN number. If you lose it, you will not be able to get your test result! Keep your PIN number in a safe place.

2. Before collecting your blood sample, call 1-800-442-7708 or 1-847-310-4224 to register your PIN. 24 hours a day, seven days a week (except holidays). Follow the instructions you will hear during the phone call.

C. COLLECT YOUR BLOOD SAMPLE
3. To collect a large enough blood sample, read and carefully follow all instructions. Failure to follow all instructions may result in your sample not being tested.

4. Place your Blood Sample Card on a clean, dry surface. The laboratory may not be able to test a soiled or wet card.

5. Write the date you collect your blood sample in the space provided on the Blood Sample Card

6. Before you collect your blood sample, wash your hands with soap and very warm water. Dry your hands completely. Rubbing your hands will warm them and help more blood come to your fingertip. This will help you obtain enough blood to complete testing.

WARMING YOUR HANDS IS THE MOST IMPORTANT THING YOU CAN DO TO OBTAIN
7. Before you collect your blood sample, uncover the printed circle on the Blood Sample Card by lifting up the protective flap.

8. Choose a puncture site on the \textbf{PAD} of your fingertip, preferably your middle or ring fingertip. Avoiding callused areas will increase your ability to collect the blood sample required for testing.

9. Clean the selected puncture site on your fingertip with the alcohol prep pad and wipe off the excess alcohol with the gauze pad.

10. Let your hand with the finger you intend to puncture hang at your side for about 30 seconds. With your hand still pointed downward, vigorously shake it back and forth for a few seconds to increase the blood flow.

11. Carefully remove the clear safety cap. DO NOT touch the \textbf{RED BUTTON} while removing the cap; this can cause the lancet to discharge. \textbf{Place the lancet on the table or countertop with the RED BUTTON facing up}. Do not lift the lancet off tabletop or countertop. Place the pad of your selected fingertip over the hole on the \textbf{RED BUTTON} and push down firmly. This will activate the lancet.
12. After piercing your finger, allow a large drop of blood to form. To increase blood flow, use your thumb and first finger on your other hand to gently apply pressure around the puncture site (as shown). Once a large drop of blood has formed, touch the blood drop gently inside the circle printed on the Blood Sample Card. **Apply blood drops side-by-side inside the circle until it is completely filled. DO NOT touch the card with your punctured finger as this may cause your blood to clot and stop further blood flow.** If you have trouble collecting blood with the first lancet, call us at 1-800-442-7708 or 1-847-310-4224 for help.

13. Apply blood drops inside the circle on the FRONT side of the card until it is **COMPLETELY FILLED** and soaked through to the back. **DO NOT APPLY BLOOD TO THE BACK OF THE CARD.**

**If you have trouble collecting blood:**

- Before repeating steps 8-13 with the second lancet, call 1-800-442-7708 or 1-847-310-4224 for help. Trained healthcare counselors are available to help you.
- Make sure your hands are warm.
- Stand up while collecting your blood sample, keeping your hand lower than your heart; however, if you tend to faint or get dizzy, sit down but keep your hand lower than your heart.
- A little activity (walking short distances, etc.) can increase blood flow.
- Firmly wipe the puncture site with the gauze pad if your blood clots. This will cause the bleeding to start again. Then allow a large drop of blood to form before touching the blood droplets on the card.

14. To make sure you have enough blood on the Blood Sample Card, pull back the protective cover and look at the circle on the back (See diagram). If there are any areas where the blood has not soaked through, place more drops on the FRONT side of the circle until the back is completely filled. Try not to place the drops on top of one another. It’s okay to have extra blood outside of the circle, **but the circle itself must be filled.**

15. After completely filling the circle with blood, apply an adhesive bandage to the puncture site. Lancets and all other materials may be safely disposed of in your
16. ALLOW BLOOD SAMPLE TO AIR DRY FOR 30 MINUTES. DO NOT TOUCH THE SAMPLE AREA. After the blood sample is dry, place the Blood Sample Card into the Blood Sample Return Pouch. USE THE BLOOD SAMPLE RETURN POUCH PROVIDED OR YOUR SAMPLE WILL NOT BE TESTED.

17. Peel the adhesive cover at the top of the Blood Sample Return Pouch. Fold down along the perforation. Press down hard along the back of the fold to seal it tightly.

18. Place the sealed Blood Sample Return Pouch in the Cardboard U.S. Mail Envelope. To seal the Cardboard U.S. Mail Envelope, peel off the adhesive cover, fold down the flap, and press down hard on the flap.

19. Take the sealed Cardboard U.S. Mail Envelope to any U.S. Post Office Mailbox. This envelope has been printed with prepaid postage.

E. GETTING YOUR RESULT

20. You will need your PIN to get your test result. Dial 1-800-442-7708 or 1-847-310-4224 for test results 24 hours a day, seven days a week (except holidays). You can call 10 business days (Monday - Friday) after you mail your sample. The automated system or a healthcare counselor will give you your result. After you have received your result, you may request a written copy be sent to you electronically or by U.S. Mail. The written copy will include special information for your physician. You have the option to speak with a healthcare counselor at all times.

Read the information provided in the “Answers to Frequently Asked Questions about Hepatitis C” for an explanation of your test results. Your results will be available for 6 months after your sample has been tested.
AVAILABILITY OF RESULTS
If your sample is not received within fourteen (14) days after shipment, lost in transit, or not tested, you may be eligible for a refund or replacement kit. You may call Home Access Health for assistance and/or counseling seven days a week. However, telephone access to your result is limited. Negative test results are available to clients for a period of 30 days after receiving the result for the first time. Within that 30 day period, clients with a negative result can access their result and talk to a counselor by telephone a total of three times. Positive and indeterminate test results are available to clients for a period of one year after receiving the result for the first time. Within that one year period, clients with a positive or indeterminate result can access their result and talk to a counselor by telephone a total of six times. All other results are available to clients for 30 days.

INFORMED CONSENT
1. I authorize Home Access Health Corporation to use a certified laboratory to test my blood sample for the presence of antibodies to the Hepatitis C virus.
2. I understand that a negative result means that the blood sample I submitted did not show antibodies to the Hepatitis C virus.
3. I understand that a positive result means that I should consider myself infected with the Hepatitis C virus and I must take precautions not to infect others.
4. I understand that an "indeterminate" result is neither "negative" nor "positive" and that further evaluation by a physician is needed.
5. I understand certain demographic information that would not identify me, required by law, may be reported to the U.S. Public Health Service and the Health Department of the state from which I am calling.
6. I agree that Home Access Health Corporation may report non-identifying demographic information such as age, gender, Hepatitis C exposure factors, etc., for the purpose of statistical reporting.
7. I understand I may request that Home Access Health Corporation provide me with a referral to physicians or mental health practitioners with experience in Hepatitis C in my area, from whom I may seek care. Home Access Health Corporation makes no warranty or representation concerning the qualifications of any such physician or mental health practitioner, and Home Access Health Corporation shall have no liability or responsibility with respect to the acts or omissions of any such mental health practitioner or physician.
8. I understand that Home Access Health Corporation bears no responsibility to provide me medical or psychological care regardless of my test result.
9. I understand that failure to strictly adhere to all recommended procedures may result in an inaccurate result or my blood sample not being tested.
10. I agree that any liability of Home Access Health Corporation and its employees, physicians and counselors shall be limited to the purchase price of this blood sample collection kit.
11. By using a test furnished to me by any healthcare provider, I understand I am authorizing Home Access Health Corporation to confidentially report my Hepatitis C Check™ result back to that provider.
12. I understand that by sending my blood sample for testing I am consenting to having my blood tested for antibodies to the Hepatitis C virus and that I have read, understand, and agree to these instructions and to the provisions above.
13. I understand that if I have any questions about how this informed consent may apply to me, I am encouraged to speak to a Home Access Health Corporation Healthcare Counselor by calling 1-800-442-7708 or 1-847-310-4224.

HOME ACCESS® HEPATITIS C CHECK™
IS A SERVICE OF

HOME ACCESS
THE LEADER IN TELEMEDICINE
PROVIDING FAST AND CONVENIENT AT-HOME MEDICAL TESTING AND CONSULTATION.

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