## ATECHNICAL REVIEW

## Clinical Practice Algorithms for Evaluation of Liver Function Chemistry Tests Clinical Guideline from American College of Gastroenterology

## Introduction

In January 2017, the American College of Gastroenterology (ACG) published a newly developed clinical practice guideline regarding the evaluation of abnormal liver chemistry tests.

As a general rule, it is recommended that before initiation of evaluation of abnormal liver chemistry tests, the provider should repeat the laboratory panel and/or perform a clarifying test to confirm that the liver chemistry actually is abnormal. In addition, the provider should recognize that most reference intervals are established at a confidence interval of 95%, meaning that 2.5% of all healthy individuals will have test values both slightly above and slightly below the reference interval.<sup>1</sup>

Included here in Figures 1-5 are a number of clinical practice algorithms recommended by ACG depending on the liver chemistry test that is abnormal, degree of elevation, and possible combination of test results.

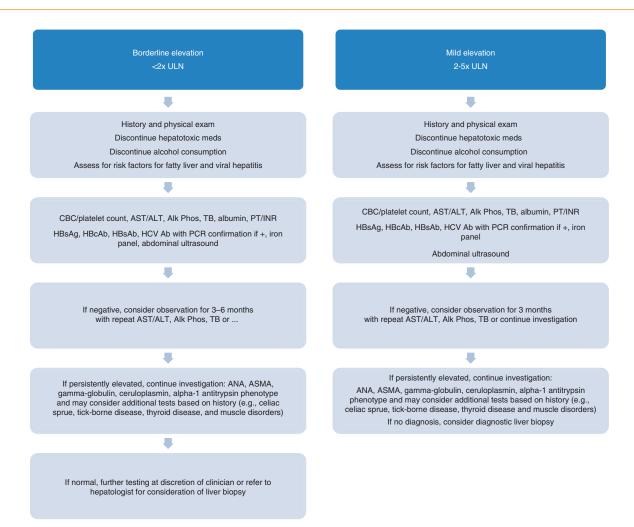
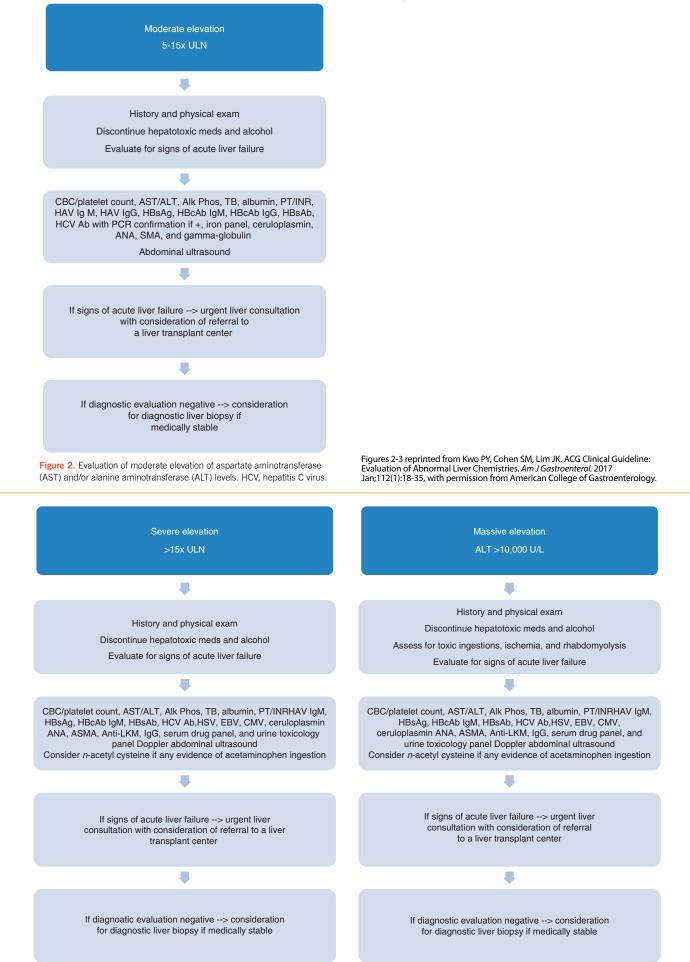


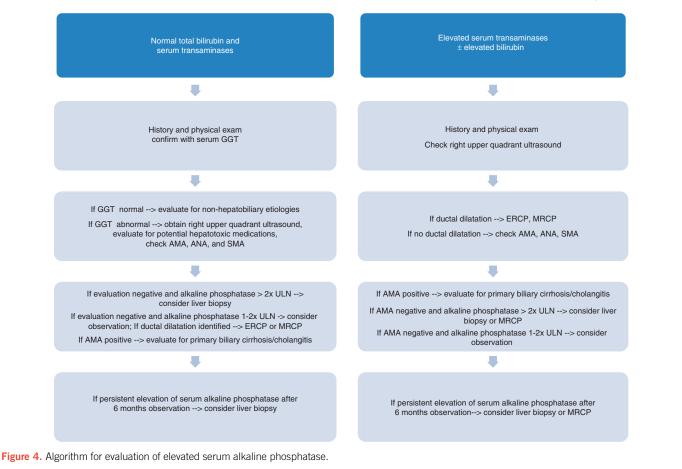
Figure 1. Algorithm for evaluation of aspartate aminotransferase (AST) and/or alanine aminotransferase (ALT) level. HCV, hepatitis C virus.

Figure 1 reprinted from Kwo PY, Cohen SM, Lim JK. ACG Clinical Guideline: Evaluation of Abnormal Liver Chemistries. Am J Gastroenterol. 2017 Jan;112(1):18-35, with permission from American College of Gastroenterology.

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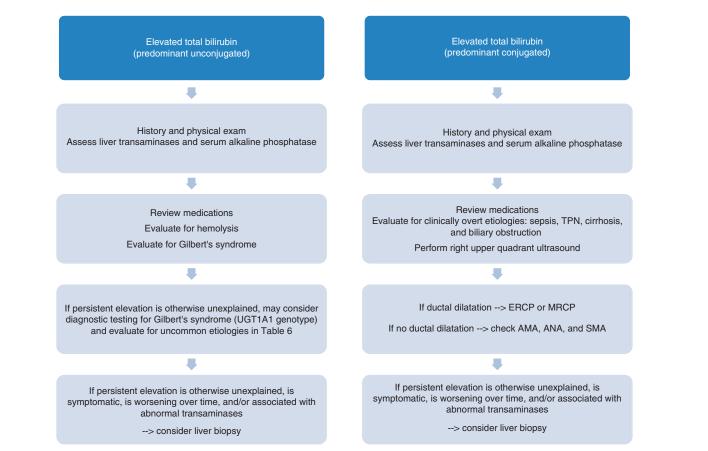


Figure 5. Algorithm for evaluation of elevated serum total bilirubin.

Figures 4-5 reprinted from Kwo PY, Cohen SM, Lim JK. ACG Clinical Guideline: Evaluation of Abnormal Liver Chemistries. *Am J Gastroenterol.* 2017 Jan;112(1):18-35, with permission from American College of Gastroenterology.

**Reference:** 1. Kwo PY, Cohen SM, Lim JK. ACG Clinical Guideline: Evaluation of Abnormal Liver Chemistries. *Am J Gastroenterol.* 2017 Jan;112(1):18-35.

