Assess serum HBV-DNA and ALT at baseline and q3mos after starting therapy for 1yr, f/b q6mos (other baseline evaluation includes PT, PTT, CBC, CMP, ferritin, TIBC, iron, anti-HAV, anti-HCV, anti-HDV, anti-HIV, Rx until HBeAg becomes neg, anti-HBe+ and HBV DNA is undetectable on 2 occasions, 6mos apart. Assess pt for resistance to Rx. Suspect resistance if viral load increased > 1log10 IU/ml from the pt's lowest on-Rx level, occurring on 2 sequential occasions or clinical worsening such as increasing ALT or systematic symptoms. Evaluate for possible non-compliance or absorption problem of the medication. Refer to GI if resistance to Rx, cirrhosis, or HCC upon any stage of the treatment occurs.

* Definition of Normal ALT
ALT for Males = 30 IU/L
ALT for Females = 19 IU/L