# Sexually Transmitted Infection - Treatment

Associated Power Plans: EDP/Inpatient STI CPG, Teen Ambulatory STI and Title X Teen Ambulatory STI Positive, Ambulatory STI CPG



HIV

See HIV CPM for

recommendations

**Evidence Based Practice** 

### **Inclusion Criteria:**

Patients that have tested positive for STI

#### **Exclusion Criteria:**

• Pre-pubertal child -

# Call SCAN provider on call

- Treatments of the following diagnoses:
  - Pelvic inflammatory disease
  - Epididymitis, orchitis, or proctitis
  - Immunocompromised patients
  - Hepatitis
- Alternative treatments are not included in this guideline
  - Please refer to the <u>CDC STI</u> <u>Pocket Guide</u>

# Does pubescent pt test positive for STI? Negative test results for STI: Follow-up as needed with primary care provider Discontinue empiric treatment

CM lab will notify Infection Control for the following reportable STIs: Gonorrhea, Chlamydia, HIV, and Syphilis

Yes

#### Positive test results for STI:

- Continue to use **protected note types** as appropriate
- If pt is no longer in the care setting, contact pt using information on their **Confidential Information Form** (found in orders or ad hoc forms).
  - Pt lost to follow-up

# Treatment guides

# Chlamydia

- Preferred:
- <u>Doxycycline</u> 100 mg PO BID x 7 days

#### OR

 Alternative - to be considered in cases of pregnancy, poor adherence, or RX pickup issues:

Abbreviations (laboratory &

CDC = Centers for Disease Control CPM = Care Process Model

HIV = Human Immunodeficiency Virus

STI = Sexually Transmitted Infection

radiology excluded):

BID = two times a day

IM = intramuscular

PO = by mouth

RX = prescription

pt = patient

Azithromycin 1 g PO x 1 dose

# Gonorrhea

- Preferred: Ceftriaxone
  - $\circ$  500 mg IM x 1 for pts < 150 kg
  - 1000 mg IM x 1 for pts > 150 kg
     OR
- <u>Alternative</u> for cephalosporin allergy:

Gentamicin 240 mg IM in a single does **PLUS** Azithromycin 2 g orally in a single dose

lf Chlamydia infection has not been excluded, treat for chlamydia also

#### **Trichomoniasis**

- Metronidazole
- Females: 500 mg PO BID x 7 days
- Males: 2000 mg PO x 1 dose

# Syphilis

Penicillin G 2.4 M units IM x 1

 Refer to Infectious Diseases for follow up testing

## Discharge Planning:

- Provide pt STI education
- Recommend partner notification
- Age < 17 years: Consider age of pt and partner
  - Consult Social Work
- Use <u>confidential documentation</u> processes
- Refer to <u>Confidentiality Tips</u>

#### Gonorrhea, Chlamydia, or Trichomoniasis:

 Follow-up with PCP or CM Adolescent Specialty Clinic HIV or Syphilis:

Clinic referral to Infectious Diseases





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Link to: synopsis and references