

Expedited Partner Therapy (EPT)

Decision Support Tool

Epic SmartSet: Expedited Partner Therapy



Children's Mercy
KANSAS CITY

Evidence Based Practice



QR code for
mobile view

Expedited Partner Therapy (EPT) treats sex partners of patients with certain STIs by providing medication or prescriptions without a prior medical evaluation.

Inclusion Criteria:

- Patient diagnosed with chlamydia, gonorrhea, or trichomoniasis

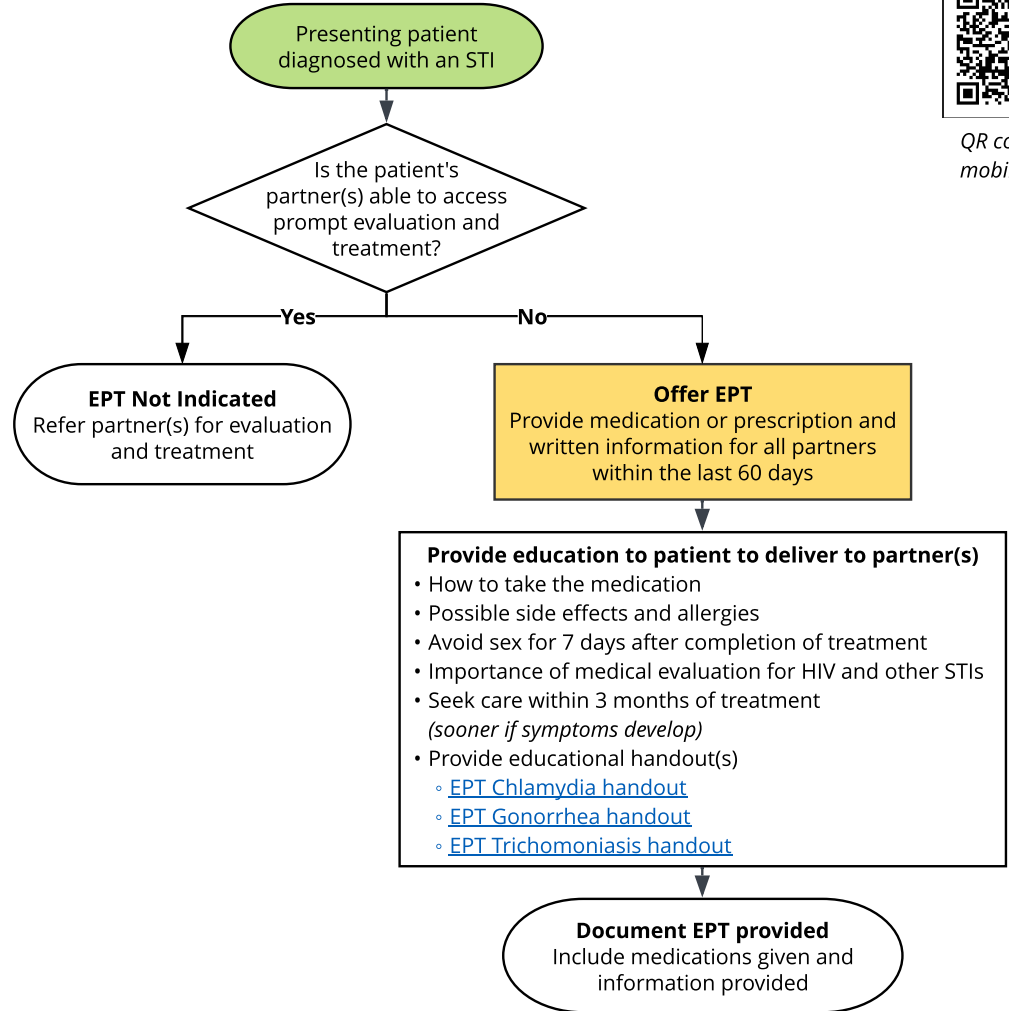
Key Principles

- Offer EPT for all sex partners within the past 60 days
- Routinely offer EPT for chlamydia and gonorrhea, as allowed by law
- Consider EPT for trichomoniasis
- Do not use EPT for syphilis
- Provide medication information and STI/HIV follow up guidance
 - EPT Chlamydia handout
 - EPT Gonorrhea handout
 - Trichomoniasis handout
- Advise partners to seek medical evaluation
- Document EPT in the medical record

Legal Considerations

- EPT is not prohibited in U.S. states and jurisdictions for chlamydia and gonorrhea
- Refer to the CDC EPT Legal Status for further clarifications
([United States Map](#)) ([Kansas](#)) ([Missouri](#))

[EPT EPIC Tip Sheet](#) (for CM providers)



Recommended EPT Regimens (for partners)

Chlamydia	Preferred: Doxycycline 100mg PO BID x7 days -or- Alternative: Azithromycin 1g PO x1 dose <i>To be considered in cases of pregnancy, poor adherence, or RX pickup issues</i>
Gonorrhea	Preferred: Ceftriaxone • 500mg IM x1 for pts < 150 kg • 1000mg IM x1 for pts > 150 kg -or- Alternative: for cephalosporin allergy • Gentamicin 240mg IM in a single dose -PLUS- • Azithromycin 2g PO in a single dose
Trichomoniasis	Metronidazole • Females: 500 mg PO BID x7 days • Males: 2000mg PO x1 dose
EPT is NOT recommended for SYPHILIS <i>Partners should be referred for full evaluation and treatment</i>	