

Inclusion Criteria:

- · Signs and symptoms of STI
- · Risk factors for STI
- · Patients that request STI testing

Exclusion Criteria:

Pre-pubertal child

Call SCAN provider on call

- · Treatments of the following:
- Pelvic inflammatory disease
- Epididymitis, orchitis, or proctitis
- Immunocompromised patients
- Hepatitis
- Alternative treatments are not included in this guideline
 - Refer to the CDC STI Pocket Guide

Special Considerations:

(consult Social Work for the following scenarios)

- · Concern for abuse/assault
- · Concern for human trafficking
- If pt age is < 17 years consider age of partner
- · Patient has developmental delay
- · Patient with known pregnancy

Evaluate symptoms and/or risk factors to determine need for STI testing in pubescent patient Private, confidential screening and documentation is recommended **Optional Screening questions**

> Pt presents with signs/symptoms of STI

> **OR** asymptomatic with STI risk factors

OR requests STI testing

STI Testing:

- 1. Obtain verbal permission for testing from pt or caregiver
- 2. If confidential testing is requested:
 - · Use confidential order set
 - Use protected provider note
 - Complete *Confidential Information Form* (found in orders or ad hoc)

Title X Sites should follow site-specific processes

STI testing is not routinely performed in the urgent care clinic should follow steps below if testing is completed

STI Signs & Symptoms:

Female

- Vaginal pruritus
- · Vaginal discharge
- · Inter-menstrual bleeding or menorrhagia
- Dysuria
- Urinary urgency/frequency
- Genital lesions Genital Lesions CPM
- Abdominal/pelvic pain with no alternate diagnosis
- Cervical motion tenderness

- Urethral discharge
- · Unilateral testicular pain/swelling
- Dysuria
- Urinary urgency/frequency
- Painful ejaculation
- Genital lesions

STI Risk Factors:

- History of sexual activity
- Sexual assault
- Known or recent STI exposure
- Concern for pregnancy
- Concern for drug or alcohol use

*Considerations for additional test sampling:

- If testing for Gonorrhea and Chlamydia, test also for Trichomoniasis due to high prevalence in metro area
- Throat swab: Pharyngitis with sexual risk factors
- · Anal/rectal swab: Sexual risk factors (e.g., MSM)

TESTING*

Male

- · Gonorrhea and Chlamydia
- PCR by first catch urine
- Trichomoniasis (symptomatic only) PCR by first catch urine
- HIV

Antigen/Antibody Screen (blood)

Syphilis

Algorithm with reflex to RPR (blood)

TESTING*

Female

- Gonorrhea and Chlamydia PCR by either provider **OR** self-collected
 - vaginal swab **OR** first catch urine
- Trichomoniasis (symptomatic only)
- PCR by provider collected vaginal swab **OR** first catch urine
- HIV

Antigen/Antibody Screen (blood)

Syphilis

Algorithm with reflex to RPR (blood)

Emergency Contraception CPM

PCR by First Catch Urine · No void during previous

- No genital cleaning
- 20-30 mL sample: do not
- DO NOT order as add-on unless appropriate sample confirmed by lab

Abbreviations (laboratory & radiology excluded):

CPM = Care Process Model MSM = men having sex with men

PCR = polymerase chain reaction

pt = patient

RPR = rapid plasma reagin

STI = sexually transmitted infection

OR code for mobile view



- Determine if empiric treatment is indicated while awaiting results • If empiric treatment is NOT provided, must
 - ensure *Confidential Information Form* is completed (found in orders or ad hoc) **AND** that pt has access to care
 - Utilize setting-specific procedure for follow-up of pending labs
 - Pt lost to follow-up

STI treatment Last Updated: 1.20.23

Contact: EvidenceBasedPractice @cmh.edu

For additional information, link to synopsis

Are results

available before

discharge?

Yes

Complete treatment as indicated Provide patient STI education

Complete confidential documentation Provide condoms if supply is available Follow-up with specified healthcare provider