

**April 2016**

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# CHELAN-DOUGLAS PUBLIC HEALTH



Current Conditions of Interest

*"Always Working for a Safer and Healthier Community"*

**TO REPORT A  
NOTIFIABLE  
CONDITION:**

Phone (509) 886-6400

Fax (509) 886-6478

**After hours call:**  
(509) 886-6499

## How Healthcare Providers Can Talk. Test. Treat.



While it's simple, the idea of **Talk. Test. Treat.**, STD prevention and treatment is not one-size-fits-all. CDC's evidence-based resources ensure that you're using the most effective methods, while also allowing you to tailor your counseling messages, testing, and treatment options to your patient's specific needs. STD Awareness Month provides a refresher on the many ways that you can empower your patients to take charge of their sexual health.

### April is STD Awareness Month

CDC is calling on individuals and healthcare providers to take three simple actions:  
***Talk. Test. Treat.***

### TALK

**Providing the best medical care possible means talking to your patients about sexual health.**

Taking a sexual history should be a part of routine care.

- Talking about sexual health can be challenging but studies show that patients want to be asked about sex.
- Create an environment that is open to an honest discussion around your patient's sexual history—success in this area can garner important information that will allow you to provide the best care possible.

Counsel your patients on safe sex, and ensure that they know about today's many prevention options. With condoms, hepatitis B and HPV vaccines, and even a [daily medication to prevent HIV infection](#) – there has never been more ways for your patients to protect themselves.

Certain STD diagnoses can cause fear and anxiety in your patient.

Use CDC counseling messages in the [2015 STD Treatment Guidelines](#) to help alleviate these concerns.





## How Healthcare Providers Can Talk. Test. Treat.

### TEST

#### Test your patients for STDs as recommended.

In-depth [STD screening recommendations](#) for different patient populations are available. Below is a brief overview.

- Syphilis, HIV, chlamydia, and hepatitis B screening for all **pregnant women**, and gonorrhea screening for at-risk pregnant women starting early in pregnancy, with repeat testing as needed, will protect the health of mothers and their infants (NOTE: Detailed [screening recommendations for pregnant women are also available here](http://www.cdc.gov/std/pregnancy/stdfact-pregnancy-detailed.htm)(<http://www.cdc.gov/std/pregnancy/stdfact-pregnancy-detailed.htm>.)
- Annual chlamydia and gonorrhea screening of all **sexually-active women** younger than 25 years, as well as older women with risk factors such as new or multiple sex partners, or a sex partner who has an STD.
- Screening at least once a year for syphilis, chlamydia, and gonorrhea for all **sexually active gay, bisexual, and other men who have sex with men (MSM)**.
- MSM who have multiple or anonymous partners should be screened more frequently for STDs (i.e., every three to six months).
- **All adults and adolescents** from age 13 to age 64 should be tested at least once for HIV.
- Sexually-active gay and bisexual men may benefit from more frequent testing (i.e., perhaps every three to six months).

Keep in mind that screening recommendations are sources of clinical guidance, not prescriptive standards. Always consider a patient's sexual history and the burden of disease in their community.

### TREAT

#### Follow CDC's STD Treatment Guidelines to ensure appropriate treatment and care.

The 2015 STD Treatment Guidelines are the most current recommendations for treating patients who have, or who are at risk for STDs.

- Download the [free STD Tx Guide app](#) to your Apple or Android devices to easily access the guidelines any time you need them.

#### Important treatment topics that you need to be aware of:

Expedited Partner Therapy (EPT) may be an option in cases where a patient's partner is unwilling or unable to access care.

Learn about EPT on [CDC's website](#) or contact your [state or territorial health department](#) to obtain jurisdiction-specific information.

[Drug-resistant gonorrhea](#) is an immediate public health threat requiring urgent and aggressive action.

- Preserve our last treatment option by only treating your patients with the [recommended dual therapy](#) (ceftriaxone 250mg intramuscularly in a single dose PLUS azithromycin 1g orally in a single dose).



## Other STD Information

### Legal Reporting Requirements for Washington State:

1. **Health care providers:** notifiable to local health jurisdiction within three (3) work days. Cases should be reported using the [Sexually Transmitted Disease \(STD\) Morbidity Report Form](#).
2. **Hospitals:** notifiable to local health jurisdiction within three (3) work days. Cases should be reported using the STD Morbidity Report Form.
3. **Laboratories:** notifiable to local health jurisdiction within two (2) work days.

#### **Resources:**

- [Chelan-Douglas STD Reporting Form](#)
- [List of Notifiable Conditions Guidelines](#)
- [Notifiable Conditions Posters](#)
- [CDC 2015 STD Treatment Guidelines](#)



### STD Awareness Month - Resources