

Louisiana School-Based Health Centers

2017-2018

INSTRUCTION MANUAL for

STD, HIV and Cervical Cancer (Pap Smear) Screening in School-Based Health Centers

GOAL: To decrease the incidence of STDs and cervical cancer among youth in Louisiana through education, screening, testing, and treatment of sexually transmitted diseases in Louisiana school-based health centers (SBHCs).

PLAN: Participating school-based health centers (SBHCs) will screen, test, diagnose and treat students for sexually transmitted diseases including chlamydia, gonorrhea, syphilis, HIV, and cervical cancer (Pap smears).

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FORMS

Gonorrhea/Chlamydia and Syphilis Submission Forms are all on one form and should be printed as needed. See attachment.

SHP Clinical Testing Specialist or HIV Training Coordinator (504) 568-7474

***SBHC will need to complete the STD/HIV Test Form Part 1 for all HIV test regardless of test results.**

*OPH SHP will support HIV testing (oral, serum, and/or Oraquick ADVANCE Rapid HIV Test and 2 other Rapid HIV antibody test Unigold and Clearview and as of July 1, the STD/HIV program will support the use of INSTI Rapid HIV antibody test) at SBHCs where the healthcare professional(s) conducting the testing have completed the required training to conduct HIV testing. These requirements include:

- *1/2 Day HIV Testing for Healthcare Professionals Training* – for SBHC RNs, NPs, & MDs only. **Must be a minimum of 4 participants for the training to be scheduled.**
- *2 Day Combined HIV Counseling and Rapid Testing Training* – for SBHC social workers and LPCs

RNs, NPs, and MDs may also choose to attend the 2 Day training instead of the 1/2 Day training if they prefer more intense instruction on counseling at risk youth and on giving HIV positive test results. Contact the SHP Clinical Testing Specialist or the HIV Training Coordinator to register for the training and for information on meeting this requirement before beginning HIV testing at your site. Online registration is also available for the 2 day training by going to: www.hiv411.org.

When registering for either of the HIV trainings, be sure and tell them you are with OPH/ASHP and the SBHC Program. The HIV Testing Forms requires additional information, i.e. contact and risk information. Persons trained by the SHP Clinical Testing Specialist or the HIV Training Coordinator will already know how to fill out this portion of the form as instruction on completing the reporting forms is provided during the trainings.

Each SBHC provider will be issued his/her own **tester number** after undergoing the training as outlined above and can begin testing as soon as he/she receives his/her tester number.

To become a **certified HIV testing counselor**, however, providers must be observed providing HIV counseling to a student by an OPH certified HIV counselor. Contact OPH/ASHP for a list of certified counselors in your area if you wish to arrange for this observation. Being certified as a testing counselor is not a requirement for providing HIV testing onsite.

Pap Smears

SBHCs wanting to perform Pap smears onsite will need to make their own arrangements with an outside lab. As of July 1, 2008, OPH will no longer be able to pay for the cost of processing Pap smears collected in SBHCs. OPH encourages SBHCs to work closely with their local Parish Health Unit to determine how best to assure that students receive reproductive health services, including Pap smears, if indicated. Parish Health Units (PHU) will make every effort to see students that are referred by SBHCs promptly.

One way to expedite students being seen at the PHU is to make use of the PHU "Quick-Start Program". The Quick-Start Program allows students to immediately obtain needed reproductive health services at the PHU without the need to first schedule a complete physical exam and lab testing. (The decision to do this is made by the PHU clinician.)

Below are the steps to follow to make use of the PHU Quick-Start Program:

1. SBHCs obtain blank FP-1A, 1B, and 1C forms from the local PHU.
2. Complete FP-1A, 1B and 1C forms for students being referred to the PHU, indicating the parts of the physical exam that have been completed at the SBHC and any laboratory work done, including STD screening.
3. Call PHU and set up an appointment for the student.

Fax and also mail the completed forms to the PHU.

TUBES

Plastic* serum separator tubes must be used for collecting blood specimens for HIV and syphilis. These (tiger top) tubes are red/gray in color. The OPH Lab does not supply these tubes.

***NO Glass Tubes.**

Be sure and check the expiration date on vacutainer tubes before using. Federal regulations prohibit the use of expired reagents, drugs, or test supplies and OPH WILL NOT process the test if expired tubes are used.

RE: CLIA Mandated Changes to Blood Collection Procedures.

First, the BD SST vacutainer tubes will need to be completely filled. This means that during phlebotomy the tube cannot be removed from the tube holder prior to complete filling. BD tubes are designed by the manufacturer to have enough vacuum to draw the required amount of blood. If a syringe or butterfly needle is used to collect the blood the vacutainer tube must still be completely filled. To accommodate patients with poor veins, pediatric patients and other patients from whom it is difficult to draw blood clinics may want to consider having alternative sizes of blood collection tubes available. The OPH Laboratory will accept completely filled alternate sizes of vacutainer tubes as long as sufficient serum is collected to complete the testing requested.

The OPH Laboratory will be required by CLIA to reject any incompletely filled vacutainer tubes that are received. To accomplish this OPH Laboratory will be required to measure the amount of the blood in the tube and to document the rejection of incompletely filled tubes.

Second, all BD-SST tubes will need to be spun down in the clinic prior to being shipped to the laboratory. Any BD SST tubes that have not been spun will have to be rejected. This is because BD has a clause in their FDA-approved package insert that reads "Gel separation tubes should be spun down no later than 2 hours after collection". **The OPH Laboratory will be required by CLIA to reject any tubes that we receive that are not spun down.**

Third, once removed from the original vacutainer and decanted into a cryovial or freezer tube the specimen must be clearly marked as being serum or plasma. Once the specimen reaches the OPH Laboratory we will not be able to tell and CLIA requires that we document this information. This means that unmarked tubes will have to be rejected.

Fourth and finally, the OPH Laboratory will no longer be able to accept hemolyzed, lipemic or icteric serum for some types of testing. In the past the OPH Laboratory was able to use specimens that had some degree of hemolysis, lipids or bilirubin. Now if the serum is visually hemolyzed (slightly pink to red), visually lipemic (slightly cloudy to milky) or visually icteric (slightly fluorescent yellow to brightly fluorescent yellow) we will have to reject the specimen for most testing. This includes testing for antibodies to syphilis, and clinical chemistry testing. We need to make the change because the FDA approved package inserts for our testing kits make these limitations and CLIA is requiring that we follow these package inserts to the letter. We will post this information on the OPH Laboratory website and will also send out subsequent memorandum as tests are added that have this restriction.

To summarize:

- 1) Fill vacutainer tubes completely; partially filled tubes will be rejected.
- 2) Centrifuge (spin) all BD SST tubes prior to shipping them to the laboratory.
- 3) Mark any specimens that have been poured over into a second container to indicate what type of a specimens they are (serum or plasma).
- 4) Re-draw blood specimens from patients whose serum is found to be hemolyzed, lipemic or icteric when the specimen is spun down. This may require having the patient return for blood collection when they are fasting.

Unfortunately, test kits cannot be shipped within Region 1 (Orleans, Jefferson, and St Bernard) and therefore SBHCs in these parishes will need to pick up their test kits. Call Phyllis Ricard, the Purchasing and Supply Coordinator for OPH SHP, the day you plan to pick up the kits. Her telephone number is: (504) 568-7474. (She will need to have received and reviewed the supply order form before pick up.)

For HIV and Syphilis testing one tube must be sent for **EACH** test that is ordered at the state lab. **Please review this document for further instructions;**

<http://dhh.louisiana.gov/index.cfm/page/2254>

ORDERING SUPPLIES

Lab supplies, which include APTIMA Unisex Swab Specimen Collection Kit (swab for gonorrhea & chlamydia) and APTIMA Unisex Urine Specimen Collection Kit (for urine testing for gonorrhea & chlamydia) (but not vacutainer tubes and urine collection cups) can be ordered by completing the Lab Supply Order Form found in Appendix B and faxing your request to:

Address: **Baton Rouge Laboratory**
1209 Leesville Avenue
Baton Rouge, LA 70802
Attention: Ha Tran
Fax: (225) 219-4903

For problems and/or questions, contact the OPH/Baton Rouge lab:

- Ha Tran (225-219-5268)

For HIV Oraquick Test Kits & Oraquick ADVANCE Kit Controls:

Must be ordered directly through the OPH HIV-AIDS Program (SHP) by completing the HIV Testing Supply Order Form (obtained at the HIV testing trainings) and faxing to the OPH SHP Program at 504-568-7044 (fax).

For questions, call the SHP Clinical Testing Specialist or the HIV Training Coordinator at (504) 568-7474. Remember, HIV testing cannot be done through OPH until the SBHC healthcare professional has undergone the required ½ day training.

Be conservative when ordering kits and only order as many as you will need over the next 3 months as the Oraquick test kits are expensive and the shelf life is only 8 months after manufacture, and likely much less by the time the SBHC receives the kit.

URINE SPECIMEN & UNISEX SWAB COLLECTION

URINE SPECIMEN COLLECTION FOR Nucleic Acid Amplification Test (NAAT) for Gonorrhea and Chlamydia

- The client should not have urinated for at least 1 hour prior to specimen collection.
- Female patients should not cleanse the labial area prior to providing the specimen.
- Instruct patient to provide first-catch urine (approximately 20 mL to 30 mL of the initial urine stream) in a plastic disposable urine collection cup. Collection of larger volumes of urine may result in specimen dilution that may reduce test sensitivity.
- **Immediately** transfer urine sample to the urine specimen transport tube. Remove the cap from the urine transport tube and transfer 2 mL of urine into the tube using a disposable pipette (provided in the collection kit). **The correct volume of urine has been added when the fluid level is between the black fill lines on the urine specimen transport tube label.**
- Re-cap the urine specimen transport tube tightly.
- Label the tube with the patient name and a 2nd unique identifier such as a medical record number. Alternately, label the specimen with the barcode generated by STARLIMS.
- Pack the specimen as per the transportation preparation directions below.
- The completed lab form or manifest should be placed in a separate polybag.

Please note, all urine samples MUST be transported to the laboratory in the GEN-PROBE APTIMA URINE transport tube. Urine specimens are only accepted if they are in the Aptima urine transport media.

Transport and store the GEN-PROBE APTIMA URINE transport tube with the urine specimen at 2° to 30°C (35.6° to 86°F) until tested.

Urine specimens must be received in the laboratory within 30 days of collection.

UNISEX SWAB SPECIMEN COLLECTION FOR Nucleic Acid Amplification Test (NAAT) for Gonorrhea and Chlamydia

Female endocervical swab specimen collection

- Remove excess mucus from the "cervical os and surrounding mucosa using the cleaning swab (white shaft swab in the package with the red printing). DISCARD THIS SWAB.
- Insert the specimen collection swab (blue shaft swab in the package with the green printing) into the endocervical canal.
- Gently rotate the swab clockwise for 10 to 30 seconds in the endocervical canal to ensure adequate sampling.
- Withdraw the swab carefully; avoid any contact with the vaginal mucosa.
- Immediately place the specimen collection swab into the transport tube. Carefully break the swab shaft against the side of the tube at the scoreline and discard the top portion of the swab shaft; use care to avoid splashing contents. Cap the tube tightly.

Male Urethral swab specimens

- The patient should not have urinated for at least 1 hour prior to sample collection.
- Insert the specimen collection swab 2 to 4 cm into the urethra.
- Gently rotate the swab clockwise for 2 to 3 seconds in the urethra to ensure adequate sampling.
- Withdraw the swab carefully.
- Immediately place the specimen collection swab into the transport tube. Carefully break the swab against the side of the tube at the scoreline and discard the top portion of the swab shaft; use care to avoid splashing contents. Cap the tube tightly.

Male and Female Urine Specimens

- The patient should not have urinated for at least 1 hour prior to specimen collection.
- Direct patient to provide a first-catch urine into a urine collection cup free of any preservatives
- Female patients should not cleanse the labial area prior to providing the specimen.
- Transfer 2mL of urine into the urine specimen transport tube using the disposable pipette provided. The correct volume of urine has been added when the fluid level is between the black fill lines on the urine specimen transport tube. Cap the tube tightly.

Male and Female Rectal Swabs

- Gather collection materials and use the small APTIMA testing swab, not the larger cleansing swab.
- Insert the swab approximately 3 – 5 cm into the rectum and rotate against the rectal wall several times (at least 3 times).
- Swabs that are grossly contaminated with feces should be discarded and the collection repeated.
- Carefully remove the swab, and insert the swab into the APTIMA transport tube.
- Break off the swab at the score line and discard the top portion of the swab shaft; use care to avoid splashing contents. Cap the tube tightly.

Male and Female Throat Swab Collection

- Gather collection materials and use the small APTIMA testing swab, not the larger cleansing swab.
- Using a tongue depressor, insert the swab and vigorously rub the tonsils and the posterior pharynx.
- Carefully remove the swab, not touching any area of the mouth.
- Insert the swab into the APTIMA transport tube and break off the swab at the score line.
- Cap the tube tightly.

LABELING

Label the tube with the patient name and a 2nd unique identifier such as a medical record number. Alternately, label the specimen with the barcode generated by STARLIMS.

STORAGE, HOLDING TIME, & TRANSPORT PREPARATION

All specimens should be packed in the Red LA OPH Lab Clinical Specimen Cooler(s). It is the responsibility of the submitter to pack the specimens properly.

Packaging Specimens/Packing the Cooler:

1. Place each tube into a separate pocket of the bubble wrap.
2. Roll the bubble wrap with specimens inside of the roll.
3. Secure the roll with self-adhesive tape.
4. Place a 3" 50 mL capacity absorbent strip and the wrapped specimens into a polybag.
5. Add additional absorbent strips if the total volume of samples exceeds 50 ml.
6. Place all laboratory testing request forms into a separate polybag.
7. Place 1 frozen U-Tech Cold pack inside of the cooler.
8. Place all specimen and testing request form polybags on top of the cold pack.
9. Place the second frozen cold pack on top of the polybags.
10. Place a transportation waybill inside of the packing list envelope on top of the cooler.
11. Each cooler requires a separate waybill to ensure that it reaches its proper testing location.

The coolers and packaging materials can be ordered using the STD Lab Supply Order Form found in Appendix B. It is recommended that SBHCs order 3 coolers initially. The courier will return empty coolers with packaging materials & therefore additional coolers will likely not need to be ordered after the initial order.

Unisex swabs for gonorrhea/chlamydia must be received in the laboratory **within 60 days** of collection. It is strongly recommended that swabs be sent via courier the same week as the specimen is collected. Swabs may be stored at 2° to 30° C (35.6° to 86° F) for 60 days.

Urine specimens for gonorrhea/chlamydia must be received by the laboratory **within 30 days** of collection. Specimen must be stored and transported at 2° to 30°C (35.6° to 86°F) until tested.

Syphilis and HIV blood specimen tubes . Spin all BD SST tubes prior to shipping them to the laboratory. Serum specimens must be **received in the laboratory within 5 days** of collection. It is strongly recommended that serum specimens be sent via courier the same day or the next day after the specimen is collected. Syphilis and HIV serum specimens **must be kept refrigerated during storage and transport.** They may also be kept frozen but only after first pouring off the serum into another tube.

If sending frozen samples, document on the LIMS manifest or STD/HIV form the date and time the samples were frozen and the date and time the samples were removed from the freezer unless samples are shipped on dry ice.

BATCHING

If possible, SBHCs should “batch” GC/CT specimens and call the courier no more than once a week. Some weeks, however, an extra pick-up may be necessary, particularly if the SBHC has serum specimens (syphilis and HIV) to be processed.

LABORATORY DELIVERY & SHIPPING

All OPH Processed Specimens

OPH is now requiring, (as of August 2006), that all specimens sent to an OPH Lab for processing be delivered by courier. Mailed specimens, of any kind (blood, urine, swabs), will no longer be accepted for processing.

Statewide Transport, Inc. will pick-up and transport specimens from the SBHCs in the afternoon and deliver to the OPH laboratories by the next working day. All specimens should be placed in the Red LA OPH Lab Clinical Specimen Cooler(s).

OPH laboratories are not open Saturdays so there will be no pick-ups on Fridays. The contact information for Statewide Transport, Inc. is as follows:

Donnie Campisano
Statewide Transport, Inc
Ph- 985-230-0700
fax-985-230-0821
donnie@statewidetransportation.com

ASK FOR “DISPATCH” WHEN CALLING FOR A PICK-UP.

OPH LAB LOCATIONS

STD lab specimens will be processed at the Baton Rouge Lab:

RECEIVING RESULTS OF TESTS

Once a secure fax form as been completed for a submitter, lab results will be faxed to the submitter/contact person indicated on the requisition form or STARLIMS record.

The following are the estimated turn-around times for receiving results:

Unisex Swabs and Urine Specimens for GC/CT–5-7 working days from when sample is received by the OPH laboratory. Swabs are generally processed within 24 hours of receipt.

Syphilis – 5 working days from when sample is receive by the OPH laboratory.

HIV EIA- 5 working days from when sample is received by the OPH laboratory.

STARLIMS

The OPH Laboratory has deployed a new web-based Laboratory Information Management System (STARLIMS) in the parish health units. STARLIMS is also present in the SBHCS. For more information regarding STARLIMS, contact Wayne King, email: wayne.king@la.gov.

The STAR LIMS system is a web interface that:

- (1) Allows tests to be ordered electronically.
- (2) Allows submitters to check on the status of submitted samples and to obtain results.
- (3) Allows submitters to obtain patient histories that include all test results.

The OPH Laboratory will be able to automatically send reports to submitters. This will allow the submitter to receive results more quickly and hopefully save money. Options for receiving reports include fax and electronically.

FOLLOW-UP FOR ABNORMAL PAP SMEARS

It is critical that the SBHCs have referral systems in place before implementing cervical cancer screening (Pap smears) in the SBHCs. Specialists must be available to see students in referral for follow-up of abnormal Pap smears (colposcopy) when indicated. Contact the OPH-ASHP Office if assistance is needed to locate specialists, 504-568-8164.

FOLLOW-UP POSITIVE HIV TEST

Anyone testing positive for HIV should be referred to an HIV/infectious disease specialist. (See: HIV Best Practice.) You will need to conduct a second rapid test if the first rapid test is reactive if you are using a rapid/rapid algorithm or collecting a specimen to be sent to the state lab for confirmatory testing if the SBHC is using lab testing to confirm a rapid test. This is the OPH-STD/HIV Program testing protocol.

STD MEDICATIONS

All STD medication are dispensed from the LDH OPH Pharmacy Services. All pharmaceuticals should be stored at controlled room temperature (68-77°F) except Bicillin which needs to be refrigerated at (36-46°F). Please contact Pharmacy Services at 504-568-5022 for additional information and STD medication ordering forms.

(1) See the attached letter from Jimmy Guidry, M.D. State Health Officer/DHH Medical Director OPH Medical Director.

(2) Follow CDC Guidelines for treatment of STDs.

Reporting STDs

By law, cases or suspected cases of STDs must be reported to the OPH.

2:004 "It is hereby made the duty of every physician practicing medicine in the State of Louisiana to report to the State Health Officer, through the Health Unit of the parish or municipality wherein such physician practices, any case or suspected case of reportable disease which he is attending, or has examined, or for which such physician has prescribed. The report shall be made promptly at the time the physician first visits, examines or prescribes for the patient, and such report shall state the name, age, sex, race, usual residence, place where the patient is to be found, the nature of the disease and the date of onset."

THE HEALTH DEPARTMENT DOES NOT FOLLOW-UP PATIENTS WITH GONORRHEA OR CHLAMYDIA UNLESS REQUESTED BY THE PHYSICIAN.

SBHCs can report cases or suspected cases of STDs (other than HIV) through the following methods:

Mail/Fax - STDs may be reported using the "Louisiana Confidential Report of Sexually Transmitted Diseases" form (STD 43). http://dhh.louisiana.gov/assets/oph/HIVSTD/hiv-aids/2014/STD_HIV_Reporting/Form_STD_43_2014_FINAL_with_instr.pdf

STD/HIV Program

Louisiana Office of Public Health
PO Box 60630
New Orleans, La 70160
(504) 568-7474 (telephone)
(504) 568-8384 (confidential fax)

Phone - Reports of early syphilis cases should be made by phone to the number above, or to your regional STD Program staff.

Electronic - STDs and HIV can be reported electronically through the Infectious Disease Reporting Information System (**IDRIS**), operated by the Infectious Disease Epidemiology Program. For information on setting up IDRIS reporting at your facility, contact:

Christina Romalewski

Infectious Disease Epidemiology Program
(504) 568-8302
Christine.romalewski@la.gov

SBHCs can report cases or suspected cases of HIV infection by phone or email to your regional HIV Field Epidemiologist, or electronically via IDRIS (see above). For further information you may also contact:

Betsy Shepard, Field Epi. Supervisor
STD/HIV Program
1450 Poydras St, Suite 2136
New Orleans, LA 70112
(504) 568-7526

OR

- (2) (for gonorrhea and Chlamydia only) Completing the *Confidential Case Report* found on the reverse side of the gonorrhea/Chlamydia requisition form (LAB 15) and submitting it to the OPH Lab at the time the lab specimen is submitted.

PERFORMING MICROSCOPIC PROCEDURES

In order to perform such microscopy procedures as wet mounts and KOH preparations, the SBHC must upgrade their CLIA waiver to *Provider Performed Microscopy Procedures* or PPMP. PPMP allows physicians, physician assistants, and nurse practitioners to perform a limited number of non-waived testing using the microscope. The PPMP certificate costs \$200 for a two-year certification period as opposed to \$150 for a CLIA Waiver certificate. For further information on this and other CLIA regulations, go to www.cms.hhs.gov/clia. The CLIA contact person for Louisiana is:

Staci Glueck
Department of Health & Hospitals
Health Standards Section
500 Laurel Street, Suite 100
Baton Rouge, LA 70801
(225) 342-9324 tel

All school based health centers in middle and high schools must perform microscopic procedures.

Provider Performed Microscopy Procedures (PPMP) or equivalent testing approved by OPH-ASHP is required. Testing performed on site using PPMP should include:

- a. vaginal wet mounts to visualize trichomonads and clue cells.
- b. KOH slides to visualize yeast cells.
- c. visualization of high number of white blood cells.

To obtain a waiver from the PPMP requirement, the SBHC must submit proof that the alternate method adequately tests for trichomoniasis, bacterial vaginosis, and yeast infections.

PARTNER TREATMENT

In order to prevent re-infection, it is imperative that the sexual partners of infected patients be appropriately treated for STDs as well. There are different approaches one might take to accomplish this goal. One option is listed below:

Patients can notify their partners by sending e-cards at: www.inspot.org

R.S. 40:1064.1 EXPEDITED PARTNER THERAPY

SB 238 was introduced during the 2008 Legislative Session was passed. See the following for protocol and explanation:

Louisiana Office of Public Health/Adolescent School Health Program School Based Health Centers EXPEDITED PARTNER THERAPY PROTOCOL

A. PURPOSE

The gold standard for interrupting the chain of transmission of STDs is to examine, perform diagnostic testing and appropriately treat all sex partners of persons diagnosed with a sexually transmitted disease. An intervention called “**patient delivered partner therapy (PDPT)**” has been demonstrated to be effective in reducing the rates of persistent or recurrent infections in Chlamydia and Gonorrhea. PDPT utilizes an **expedited strategy** that involves dispensing medication, or a prescription for medication, to patients infected with an STD for delivery to sex partner(s).

To respond to the increasing numbers of sexually transmitted diseases reported in Louisiana, the **Department of Health and Hospitals, Office of Public Health, has amended LAC 51:II.117 as authorized by Act 449 of the 2008 Regular Session of the Louisiana Legislature. This Rule was promulgated in accordance with the Administrative Procedure Act, R.S. 49:950 et seq. Act 449 of the 2008 Regular Session of the Louisiana Legislature.** It directs the Secretary of the Department of Health and Hospitals to allow as a legitimate alternative for the provision of medication or prescription by any physician that practices medicine, any advanced practice registered nurse, or any physician assistant, licensed to practice and has prescriptive authority in this state, to individuals who may have been exposed to Chlamydia or Gonorrhea. This legitimate alternative, known as **expedited partner therapy (EPT)**, is authorized absent a doctor-patient relationship and absent clinical assessment.

Definition:

Expedited partner therapy (EPT), in Louisiana, is the practice of treating the sex partner(s) of persons with sexually transmitted diseases (STD), specifically, Chlamydia or Gonorrhea without the partner(s) receiving medical evaluation from a healthcare provider.

Patient delivered partner therapy (PDPT) occurs when the healthcare provider and patient assess how likely it is that the sex partner(s) of a patient diagnosed with Chlamydia and/or Gonorrhea will visit a health care provider for evaluation and/or treatment. PDPT utilizes an expedited strategy that involves dispensing medication, or a prescription for medication, to patients infected with an STD for delivery to sex partner(s).

B. EPT PROCEDURES

Selecting appropriate patients for EPT:

EPT is clinically indicated for the following patients:

- Patients with a clinical diagnosis of sexually transmitted Chlamydia and/or Gonorrhea, confirmed by a positive laboratory test; **or**
- Patients without laboratory confirmation when the provider has a high clinical suspicion for Chlamydia and/or Gonorrhea based on symptoms and is concerned about loss to follow-up; **and**
- The patient and clinician determine that it is difficult for the exposed partner(s) to receive a medical evaluation and/or treatment.

OPH clinicians (physicians and advance practice nurses) will attempt to bring partners in for evaluation, testing, and treatment. Clinical services ensure treatment; confirm the diagnosis; examine the patient; test for other STDs, HIV and pregnancy; provide needed vaccinations; and offer risk-reduction counseling and community referrals. These services constitute the standard of care for all partners of patients infected with a sexually transmitted disease. EPT is useful when this is not feasible or practical.

EPT is not recommended for the following partners, but full medical evaluation from a health care provider should be sought:

- If pregnant,
- If at risk for severe medication allergies,
- If are men who have sex with men (MSM),
- If are co-infected with STDS not covered by EPT, and
- If there is a situation, in which the patient's safety is in doubt.

C. EPT TREATMENT RECOMMENDATIONS

Infection diagnosed in index patient	Recommended medication for EPT
Chlamydia only NAAT test known negative for Gonorrhea OR sexual contact was with person infected only with Chlamydia	. Azithromycin 1 gram (250mg tablets x 4) orally once
Uncomplicated Gonorrhea only (cervical or urethral) NAAT test known negative for Chlamydia OR sexual contact was with person infected with only Gonorrhea	Follow 2010 CDC Guidelines for Gonorrhea Treatment
Chlamydia and Gonorrhea (includes situations in which the Chlamydia and/or Gonorrhea test results are not yet available in patient with clinical signs of urethral or cervical discharge) OR sexual contact was with a person whose test results for Chlamydia and Gonorrhea were both positive.	. Azithromycin gram (250mg tablets x 4) orally once, PLUS Follow 2010 CDC Guidelines for Gonorrhea Treatment

D. SPECIFIC OPH PROCEDURES

1. Patients diagnosed with Chlamydia and/or Gonorrhea should be given the choice of contacting their sexual partner(s) and providing them with a referral to a public health clinic or to their own provider, or if they prefer, to be provided with a prescription to take to their partner(s).
2. All sex partners in the **60 days prior to diagnosis** should be considered at risk for infection and should be treated.
3. The doctor or nurse practitioner in the SBHC will make the determination to use EPT.
4. The prescribing clinician, having decided to use EPT, should provide the index patient with one or more prescriptions for the partner(s) with the name of each partner written on a separate prescription blank. If the index patient is not able or willing to provide the partner(s) name(s), then up to two (2) blank prescription(s) may be written without a patient's name. The index patient must be informed that the pharmacist filling the prescription(s) at a drug store may insist on having the name of the person for whom the medicine is intended written on the prescription blank. **Stock supply medication may not be utilized to treat sex partners by EPT.**
5. An appropriate EPT informational sheet must accompany each prescription provided about the STD being treated. Counsel patients to encourage their partners to read the information sheet carefully before taking the medication.
6. Prescriptions for EPT should be provided for all sexual partners within two months prior to diagnosis or, if there were no partners in the past two months, the most recent sexual partner. **Prescriptions should not be provided to treat sexual partners of those partners being given EPT.** Ideally, to avoid confusion, the partner should be treated for the same infections as the patient has. Other partners of a partner given EPT should be encouraged to seek medical evaluation.
7. There is no need to initiate a medical record for sex partners who are not present and who are not a student enrolled in the SBHC. Document the number and description of prescriptions provided for named partner (s), or any contact information, if provided, in the index patient's medical record.
8. Re-testing and Test of Cure – Except in pregnant women, test-of-cure (i.e., repeat testing 3–4 weeks after completing therapy) is not advised for persons treated with the recommended or alternative regimens, unless therapeutic compliance is in question, symptoms persist, or reinfection is suspected. Moreover, the validity of chlamydial diagnostic testing at <3 weeks after completion of therapy (to identify patients who did not respond to therapy) has not been established. False-negative results might occur in the presence of persistent infections involving limited numbers of chlamydial organisms. In addition, nucleic acid amplification testing (NAAT) conducted at <3 weeks after completion of therapy in persons who were treated successfully could yield false-positive results because of the continued presence of nonviable organisms (197).
9. Report adverse reactions or any problems resulting from EPT to the Office of Public Health, Adolescent School Health Program. Address to Cassandra Bookman, at P.O. Box 60630, New Orleans, Louisiana.70160-0630, 504-568-8164.

Put this on your own School Based Health Center Letterhead

You have been IN contact WITH a person with Gonorrhea.

You should immediately:

(1) Be examined by a medical care provider - your physician, nurse practitioner or physician's assistant.

Or

(2) Take this prescription given to you by the person you had contact with and have it filled at a drug store of your choice, unless you know YOU are allergic to penicillin. If you are **allergic**, see your medical care provider as soon as possible for examination and treatment with another type of medicine. Take this letter with you.

If you have difficulty breathing after taking this medication, seek medical attention immediately. If you develop a rash after taking this medication, see a medical care provider.

If you are pregnant, do not take this medication. See your health care provider who is taking care of you during your pregnancy for an examination and treatment. Take this letter with you.

DO NOT GIVE THIS MEDICINE TO ANYONE ELSE.

DO NOT HAVE SEX FOR 7 DAYS. IT TAKES 7 DAYS TO BE CURED. In order to minimize the risk for re-infection, person treated for gonorrhea and Chlamydia should be instructed to abstain from sexual intercourse for seven days after a single-dose therapy or until completion of a 7-day regimen, and until all of their sex partners are treated

(**Optional text:** The surest way not to transmit or contract sexually transmitted diseases is to abstain from sexual contact)

If you need to schedule an appointment, call your health care provider or the public health clinic. If you have questions, you may call (put in the School Based Health Center phone number) and ask to speak to a nurse.

Put this on your own School Based Health Center Letterhead

You have been IN contact WITH a person with Chlamydia.

You should immediately:

(1) Be examined by a medical care provider - your physician, nurse practitioner or physician's assistant.

Or

(2) Take this prescription given to you by the person you had contact with and have it filled at a drug store of your choice, unless you know YOU are allergic to azithromycin. If you are **allergic**, see your medical care provider as soon as possible for examination and treatment with another type of medicine. Take this letter with you.

If you have difficulty breathing after taking this medication, seek immediate medical attention. If you develop a skin reaction after taking the medication, see your medical provider.

If you are pregnant, do not take this medication. See your health care provider who is taking care of you during your pregnancy FOR EXAMINATION AND TREATMENT and take this letter with you.

DO NOT GIVE THIS MEDICINE TO ANYONE ELSE.

DO NOT HAVE SEX FOR 7 DAYS. IT TAKES 7 DAYS TO BE CURED. In order to minimize the risk for re-infection, persons treated for GC and CT should be instructed to abstain from sexual intercourse for seven days after a single-dose therapy or until completion of a 7-day regimen, and until all of their sex partners are treated.

(Optional text: The surest way not to transmit or contract sexually transmitted diseases is to abstain from sexual contact.)

If you need to schedule an appointment, call your health care provider or the public health clinic. If you have questions, you may call (**put in the SBHC phone number**) and ask to speak to a nurse confidential. In addition, professionals can call the number and request patient education brochures the names of agencies that provide confidential HIV testing and can also provide names of health professionals who treat HIV, STDs and TB. All calls are completely confidential. Louisiana Statewide AIDS/STD Information Line is available to anyone with questions about HIV, STDs, and tuberculosis (TB).

HIV/STD Information Line
1 (800) 992-4379 or 1 (800) 99 AIDS 9
(English & Spanish available)

APPENDIX A

State Laws pertaining to Dispensing of Medications

This document can be downloaded at: <http://legis.la.gov/legis/Law.aspx?d=94524>

APPENDIX B

FAX REQUEST FOR OPH LABORATORY SPECIMEN SHIPPING SUPPLIES

Request Date: _____

SHIP THE FOLLOWING SUPPLIES (Fill in the requested amounts)

STD SPECIMEN SUBMISSION

We supply CT/GC collection kits, Ice Chests and Ice Chest refurbishment supplies.

OPH does not supply serum separator tubes (tiger top tubes) for collecting blood specimens or urine collection cups.

For STD/HIV Laboratory Forms, print directly from the lab website (www.lab.dhh.louisiana.gov).

DESCRIPTION	QUANTITY	UNIT OF MEASURE
Collection Kits		
APTIMA Unisex Swab Specimen Collection Kits for Gonorrhea/Chlamydia		BOX OF 50 SWABS
APTIMA Urine Specimen Collection Kits for Gonorrhea/Chlamydia		BOX OF 50 TUBES
Extra Ice Chest Refurbishment Supplies (for high volume submitters)		
Bubble Pouches		BOX OF 25 POUCHES
Biohazard Specimen Bags and Absorbent		SET OF 25 EACH

SHIP SUPPLIES TO THE FOLLOWING ADDRESS

FACILITY NAME	
STREET	
ROOM/BUILDING	
CITY, STATE, ZIP	
CONTACT PERSON	
PHONE# (with area code)	

For STD/ICE CHEST supplies, FAX the order to 225-219-4903 – ATTENTION: Molecular Lab

APPENDIX C

OPH Program Contacts

A listing of the OPH STD/HIV program staff can be found at:
<http://ldh.louisiana.gov/index.cfm/page/919>

Select Program Contacts under Additional Resources and
Contacts.

APPENDIX D

Bobby Jindal
GOVERNOR



Bruce D. Greenstein
SECRETARY

State of Louisiana
Department of Health and Hospitals
Office of Public Health

**PUBLIC HEALTH ALERT
RESISTANT GONORRHEA**

MEMORANDUM

To: Medical Providers

From: Jimmy Guidry, M.D.
State Health Officer/DHH Medical Director 

Date: May 9, 2012

Subject: Cases of Resistant Gonorrhea

The Louisiana Office of Public Health, which administers the CDC-funded Gonococcal Isolate Surveillance Project (GISP) in New Orleans, is alerting Louisiana physicians that isolates of *Neisseria gonorrhoeae* (the causative organism of gonorrhea) from several patients in the New Orleans area have shown laboratory culture resistance to oral cephalosporins. Additionally, one isolate has been shown to be at the upper limit of sensitivity to ceftriaxone; i.e. near the level to be labeled resistant to ceftriaxone. Resistance to these drugs has been shown in other areas of the United States and abroad.

The latest recommended treatment from the United States Centers of Disease Control and Prevention (CDC) for persons with gonorrhea and their sexual partners/contacts is:

Ceftriaxone 250 mg IM STAT and Azithromycin 1 gm PO STAT

IF ALLERGIC TO PENICILLIN: Azithromycin 2 gm PO STAT

It should be noted that the recommended treatment for persons with gonorrhea is applicable to cervical, urethral, pharyngeal and anal/rectal infection.

If you are interested in learning more about this topic, there will be a live webinar presented by the CDC regarding resistant gonorrhea on May 15, 2012 at 12:00 noon (cst). To register, go to: www.cdc.gov/about/grand-rounds. Additionally, the recent CDC STD Treatment Guidelines can be found at www.cdc.gov/std/treatment/2010/default.htm.

APPENDIX E

STD MEDICATION ORDER FORM Sexually Transmitted Diseases Formulary Louisiana Office of Public Health/Pharmacy

Determine, based on a conservative estimate, the quantity of STD medications needed for a 2-month period. Please do not over order and please take into account breaks when your clinic is closed.

Medication	<i>Strength</i>	Units-of-Issue (Dose)	# of Doses Requested
Bicillin LA Injection	1.2 mil Unit/Tubex	Tubex	
Ceftriaxone (ROCEPHIN) Injection	250 mg	1 vial	
Doxycycline Capsules	100 mg	14 capsules per bottle	
Gentamycin (GARAMYCIN)Injection	80ml/2ml	3 2ml vials per RX	
Metronidazole Tablets	250 mg	8 tablets per bottle	
Metronidazole Tablets	250 mg	28 tablets per bottle	
Azithromycin Tablets (ZITHROMAX) 250 mg	250mg	4 tabs= 1gm dose	
Fluconazole (DIFLUCAN)	150 mg	1 tablet per card	
NACL 0.9% Bacteriostatic Injection	0.9%	Vial	
Sterile Water Bacteriostatic Injection	N / A	Vial	

Name of Clinic(s) _____

Contact Person _____

Email Address _____

Address where you want meds mailed:

Signature (MD or NP) _____ Date _____

Fax to: OPH Pharmacy – Attention : Michelle Warren-Swanson
Office:504-568-7097
Fax : (504) 568-8306

