Adapted from WA DOH Form 347-102

Fax Page 1 To: Public Health - Seattle & King County Confidential fax line: (206) 973-8505 and (206) 744-5622



Confidential fax line: (206) 973-8505 and (206) 744-5622 CONFIDENTIAL SEXUALLY TRANSMITTED INFECTION CASE REPORT

Report STIs within 3 work days (WAC 246-101-101/301)

PATIENT INFORMATION														
LAST NAME			FIRST NAME			MIDDLE NAM	ΛE	DATE OF BIRTH						
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□ Ophthalmia □ Rectum □ Disseminated □ Pharynx			 Doxycycline: 100 mg BID x 7 days Gentamicin: 240 mg 					Conge			or Luce			
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PRIVILEGED AND CONFIDENTIAL COMMUNICATIONS: The information contained in this message is privileged, confidential, or otherwise exempt from disclosure and is intended solely for the use of the individual(s) named above. If you are not the intended recipient, you are hereby advised that any dissemination, distribution, or copying of this communication is prohibited. If you have received this facsimile in error, please immediately notify the sender by telephone and destroy the original facsimile.

Gonorrhea or Chlamydia Infection: Partner Treatment

All partners should be treated as if they are infected.

The Washington State Department of Health strongly encourages providers to take responsibility to ensure partner treatment, by examining and treating all patient's sex partners from the previous 60 days.

If an examination is not possible, providers should offer to give patients with gonorrhea or chlamydia medication to give to their sex partners; this is sometimes called expedited partner therapy (EPT). Providers should **use caution** with providing EPT to treat partners at higher risk for HIV or syphilis (e.g., MSM, persons who use drugs, persons who are living homeless) since such patients should ideally be tested for HIV and syphilis, and in many instances, offered HIV Pre-Exposure Prophalaxis (PrEP).

Complete the partner management plan on the Confidential Sexually Transmitted Infection Case Report FAX form to define a partner management plan.

For copies of this case report or questions on how to fill it out, call Public Health - Seattle & King County: (206) 744-3590.

Other STIs: Partner Treatment

Per CDC treatment guidelines, sex partners of patients who are diagnosed with early syphilis (primary, secondary, or early latent) and may be incubating disease should be treated regardless of test results. Alternative treatment for penicillin allergy among non-pregnant patients, such as appropriate dosage of doxycycline, can also be found in the guidelines. Patients diagnosed with genital herpes should be advised to notify their sex partners and should be informed that their partners should contact their provider for testing.

RECOMMENDED REGIMENS FOR ANTIMICROBIALS LISTED ON REPORTS*

GONORRHEA -- Uncomplicated

Ceftriaxone 500 mg IM as a single dose for persons weighing < 150 kg (330 lbs), or 1 g IM as a single dose for persons weighing > 150 kg (330 lbs)^{\dagger}

Alternatives for uncomplicated infections of the cervix, urethra, or rectum:[‡]

Gentamicin 240 mg IM as a single dose PLUS azithromycin 2 g PO as a single dose **OR** Cefixime 800 mg orally as a single dose⁺

⁺ If treating with ceftriaxone or cefixime, and chlamydia infection has not been excluded, providers should treat for chlamydia with doxycycline 100 mg PO BID for 7 days. During pregnancy, azithromycin 1 g PO as a single dose is recommended to treat chlamydia.

[‡] Ceftriaxone is the only recommended treatment for pharyngeal gonorrhea. Consult an infectious disease provider or other STI expert for assistance if alternative treatment is required.

CHLAMYDIA -- Uncomplicated

Doxycycline 100 mg PO BID for 7 days **OR** Azithromycin 1g PO as a single dose

Alternatives:

Erythromycin (base) 500 mg PO QID for 7 days OR

Ethylsuccinate 800 mg PO QID for 7 days **OR**

Ofloxacin 300 mg PO BID for 7 days **OR**

Levofloxacin 500 mg PO for 7 days

SYPHILIS -- PRIMARY, SECONDARY, OR EARLY LATENT (<1 YEAR)

Benzathine penicillin G 2.4 million units IM in a single dose

SYPHILIS -- LATE OR UNKNOWN DURATION

Benzathine penicillin G 2.4 million units IM for 3 doses at 1 week intervals

* Refer to "STD Diagnostic and Treatment Guidelines" or the Centers for Disease Control and Prevention's (CDC's) website (<u>https://www.cdc.gov/std/treatment/default.htm</u>) for further information on treating pregnant patients, infections of the pharynx, patients with allergies, treatment of infants, and other details.

DOH 347-102, updated 08/30/2023 For persons with disabilities, this document is available on request in other formats. To submit a request, please call 1-800-525-0127 (TDD/TTY 1-800-833-6388).

List of Preferred Languages:

Instructions: Complete the *Preferred Language* section if the patient's preferred language is <u>not</u> English. Patient's preferred language shall be identified by the patient and reported using one of the below categories.

Language Identity Codes:

(L01) Amharic	(L18) Karen	(L35) Sign languages
(L02) Arabic	(L19) Khmer/Cambodian	(L36) Somali
(LO3) Balochi/Baluchi	(L20) Kinyarwanda	(L37) Spanish/Castilian
(L04) Burmese	(L21) Korean	(L38) Swahili/Kiswahili
(L05) Cantonese	(L22) Kosraean	(L39) Tagalog
(L06) Chinese (unspecified)	(L23) Lao	(L40) Tamil
(L07) Chamorro	(L24) Mandarin	(L41) Telugu
(L08) Chuukese	(L25) Marshallese	(L42) Thai
(L09) Dari	(L26) Mixteco	(L43) Tigrinya
(L10) Farsi/Persian	(L27) Nepali	(L44) Ukrainian
(L11) Fijian	(L28) Oromo	(L45) Urdu
(L12) Filipino/Pilipino	(L29) Panjabi/Punjabi	(L46) Vietnamese
(L13) French	(L30) Pashto	(L77) Other language
(L14) German	(L31) Portuguese	(L88) Patient declined to respond
(L15) Hindi	(L32) Romanian/Rumanian	(L99) Unknown
(L16) Hmong	(L33) Russian	
(L17) Japanese	(L34) Samoan	

Race Category and Identity Instructions:

Instructions: The patient's race may either be reported in the general *Race Category* section <u>or</u> the *Extended Race* section on page 1 of the case report. When completing the *Extended Race* section, please report using the codes provided in the list below. If the patient self-identifies as more than one race, each race code shall be reported within the *extended race* section. **Unknown** race can be documented within either one of the race sections.

Extended Race Codes:

(R01) Afghan	(R22) Fijian	(R43) Mexican/Mexican American	(R64) Tongan
(R02) Afro-Caribbean	(R23) Filipino	(R44) Middle Eastern	(R65) Ugandan
(R03) Alaska Native	(R24) First Nations	(R45) Mien	(R66) Ukrainian
(R04) American Indian	(R25) Guamanian or Chamorro	(R46) Moroccan	(R67) Vietnamese
(R05) Arab	(R26) Hmong/Mong	(R47) Native Hawaiian	(R68) White
(R06) Asian	(R27) Indigenous-Latina/o/x	(R48) Nepalese	(R69) Yemeni
(R07) Asian Indian	(R28) Indonesian	(R49) North African	(R77) Other race
(R08) Bamar/Burman/Burmese	(R29) Iranian	(R50) Oromo	(R99) Unknown
(R09) Bangladeshi	(R30) Iraqi	(R51) Pacific Islander	
(R10) Bhutanese	(R31) Japanese	(R52) Pakistani	
(R11) Black or African American	(R32) Jordanian	(R53) Puerto Rican	
(R12) Central American	(R33) Karen	(R54) Romanian/Rumanian	
(R13) Cham	(R34) Kenyan	(R55) Russian	
(R14) Chicana/o or Chicanx	(R35) Khmer/Cambodian	(R56) Samoan	
(R15) Chinese	(R36) Korean	(R57) Saudi Arabian	
(R16) Congolese	(R37) Kuwaiti	(R58) Somali	
(R17) Cuban	(R38) Lao	(R59) South African	
(R18) Dominican	(R39) Lebanese	(R60) South American	
(R19) Egyptian	(R40) Malaysian	(R61) Syrian	
(R20) Eritrean	(R41) Marshallese	(R62) Taiwanese	
(R21) Ethiopian	(R42) Mestizo	(R63) Thai	