



Standing Order Template for Reportable STDs

November 2024

Definitive Treatment Guidelines for Reportable Sexually Transmitted Diseases (STDs)

Definition

Non-Patient Specific Standing Orders are written instructions, orders, rules, regulations, or procedures prepared by a physician and designed for a patient population with specific preventative care or screening needs. Standing Orders are distinct from specific orders written for a particular patient.

Purpose

These standing orders provide definitive treatment guidelines, including specific medication orders and dosages, for the management of reportable STDs across various healthcare settings. These guidelines can be viewed on the CDC website at: <https://www.cdc.gov/std/treatment-guidelines/STI-Guidelines-2021.pdf>

Standing orders must be authorized by a prescriber who oversees care at the location where treatment will be administered. Treatment should be administered by a certified or licensed healthcare professional to patients diagnosed with chlamydia, gonorrhea, or syphilis.

Authorization and Administration

This Standing Order gives the authorized registered nurse authority to perform the acts described in this Standing Order in consultation with **[Insert Local Health Officer or the site Medical Director]** as needed. It is the intent of all parties involved that all procedures conform to the West Virginia State Laws and the 2021 CDC STD Treatment Guidelines.

Adaptation for Local Use

This document serves as a model for standing orders. Local health departments, clinics, and other treatment locations should adapt these orders to suit their specific needs and protocols.

These standing order protocols are to be initiated by a registered nurse, or to be initiated by a registered nurse and delegated to a licensed practical nurse to act on.

Positive lab results and treatment for gonorrhea, chlamydia, and syphilis must be reported to the West Virginia Department of Health - STD Program

STANDING ORDERS FOR TREATMENT OF CHLAMYDIA

PURPOSE

This standing order is in place to allow treatment for chlamydia for patients with positive culture, clinical symptoms, or identified sexual partner(s).

PROCEDURE

- Assess the need for treatment for chlamydia based on a positive lab result or intercourse with someone known to be infected.
- Contraindications of treatment include allergy to the medication.
- Provide education to the patient before administering medication.

PATIENT EDUCATION

- Repeating infection of chlamydia is common.
- People with chlamydia should abstain from sexual activity for seven days after single dose treatment or until completion of a seven-day course of treatment to prevent spreading the infection to partners.
- It is essential to take all the medications prescribed to cure chlamydia. Medication for chlamydia should not be shared with anyone.
- If symptoms continue for more than a few days after receiving treatment, the patient should return to a health care provider to be retreated.
- It is recommended that the patient retests three months after treatment of the initial infection, even if the partner received treatment as well.
- Chlamydia is easily cured but can make pregnancy difficult if left untreated.

Risk Category	Recommended Regimen	Alternatives
Adults and adolescents.	Doxycycline 100 mg orally 2x/day for seven days.	Azithromycin 1 gm orally in a single dose OR levofloxacin 500 mg orally 1x/day for seven days.
Pregnancy.	Azithromycin 1 gm orally in a single dose.	Amoxicillin 500 mg orally 3x/day for seven days.
Expedited Partner Therapy.	Doxycycline 100 mg orally 2x/day for seven days.	Azithromycin 1g orally in a single dose.

STANDING ORDERS FOR TREATMENT OF GONORRHEA

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PURPOSE

This standing order is in place to allow treatment for gonorrhea for patients with a positive culture, clinical symptoms, or identified sexual partner(s).

PROCEDURE

- Assess the need for treatment for gonorrhea based on a positive lab result or intercourse with someone known to be infected.
- Contraindications of treatment include allergy to the medication
- Provide education to the patient before administering medication

PATIENT EDUCATION

- It is essential to take all prescribed medications, or gonorrhea infection may return.
- Treatment may be oral antibiotics or a single intramuscular (IM) injection
- Do not have sexual intercourse while being treated. If you decide to have sexual intercourse, stay with one partner and use condoms. Inform your sexual partners they may need to be treated as well. Gonorrhea can cause permanent damage to the pelvic and sex organs.
- Gonorrhea can make women unable to have children.
- Gonorrhea may cause pain and swelling in the knees or other joints, small red blisters on the skin, and heart problems.
- Pregnant women with gonorrhea can pass it on to the baby during pregnancy or childbirth.

Risk Category	Recommended Regimen	Alternatives
Adults and adolescents.	Ceftriaxone 500mg IM single dose.	Gentamicin 240 mg IM in a single dose PLUS azithromycin 2 gm orally in a single dose. Cefixime 800 mg orally in a single dose.
Pregnancy.	Ceftriaxone 500mg IM in single dose.	
Conjunctivitis.	Ceftriaxone 1 gm IM in a single dose.	
Expedited Partner Therapy (sexual partner(s) within the last 60 days).	Ceftriaxone 800 mg orally in a single dose Education handouts should be given to the partner to share with the partner who is not present during the visit.	

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STANDING ORDERS FOR TREATMENT OF SYPHILIS

PURPOSE

This standing order is in place to allow treatment for syphilis for patients with both a positive treponemal test and a nontreponemal test or reporting exposure to someone known to be infected.

PROCEDURE

- Assess the need for treatment for syphilis based on a positive lab result or intercourse with someone known to be infected.
- Contraindications of treatment include allergy to the medication.
- Provide education to the patient before administering medication.

PATIENT EDUCATION

- Take medication as exactly instructed. Otherwise, the infection may come back.
- Return for a follow-up test to ensure the infection is gone if instructed.
- If syphilis is left untreated, it can cause severe illnesses such as arthritis, blindness, heart disease, mental health issues, and even death.
- Get tested for other sexually transmitted infections, including human immunodeficiency virus (HIV). Syphilis may put you at greater risk for HIV.
- Do not have sexual intercourse until the infection is gone.
- If you decide to have sexual intercourse, stay with one partner and use condoms. Syphilis can harm a pregnant woman's unborn child.
- If more than a single dose is required, return to receive ALL your scheduled doses.

Risk Category	Recommended Regimen	Alternatives (CAN NOT BE USED IN PREGNANCY)
Primary, secondary, and early latent adults	Benzathine Penicillin G 2.4 million units IM in a single dose.	Doxycycline 100mg orally 2 times daily for 14 days
Late latent adults	Benzathine Penicillin G Three doses of 2.4 million units IM each at 1-week intervals.	Doxycycline 100mg orally 2 times daily for 28 days
Neurosyphilis, ocular syphilis, and otosyphilis.	Aqueous Crystalline Penicillin G 18-24 million units per day, administered as 3-4 million units by IV every four hours or continuous infusion for 10-14 days.	Procaine Penicillin G 2.4 million units IM 1x/day **PLUS** Probenecid 500 mg orally 4x/day, both for 10-14 days.

Note: the clinician must evaluate symptoms and duration to determine the stage of syphilis. If the duration is unknown and the stage cannot be determined, the clinician should treat for late latent syphilis. Positive lab results and treatment for gonorrhea, chlamydia, and syphilis must be reported to the West Virginia Department of Health - STD Program

adequately identified, use the recommended regimen for late latent syphilis. . If a patient reports a penicillin allergy, determine if this is a true allergy causing an anaphylactic reaction. If not, proceed with the recommended treatment. If so, refer to the alternative treatment guidelines. There is no alternative treatment for pregnant patients. If a patient has a penicillin allergy, desensitization is required.

Date and Signature of the Authorizing Physician. This Standing Order shall become effective on the date that it is signed by the authorizing physician, below, and will remain in effect until it is either rescinded, upon a change in the authorizing physician.

Authorizing Physician's Signature: _____

Authorizing Physician's Title: _____

Printed Name: _____

Effective Date: _____

Emergency Contact Information: _____

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