

Know the patient, know the symptoms, **know the test**

Identifying STIs during an acute care visit

Sexually transmitted infections are increasing in prevalence

In the U.S., the number of sexually transmitted infections (STIs) is at a record high, despite progress in awareness, detection, and testing.^{1,2}

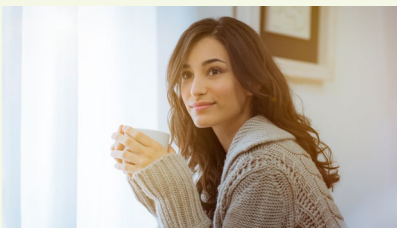
Left untreated, STIs, such as chlamydia and gonorrhea (CT/NG), trichomoniasis (trich), and syphilis, can lead to pelvic inflammatory disease; infertility; conditions such as urethritis, cervicitis, and vaginitis; and, in the case of syphilis, damage to the brain, nerves, and heart.^{1,2} Without treatment, these infections and diseases will continue to spread.

Identifying symptomatic patients during acute care visits

To better serve those patients already infected—and to keep the number of new cases from increasing—it's vital to know what testing protocols are recommended when a patient presents with symptoms of an STI. Organizations such as the Centers for Disease Control and Prevention (CDC) provide necessary guidelines.

Meet the patients

The following 3 profiles* introduce patients with different backgrounds and medical histories, all visiting their doctors for a specific reason. Each patient profile includes relevant STI guidelines and solutions that can help practices provide the recommended testing for the right patient at the right time.



Carla

24-year-old woman with symptoms of vaginal irritation and odor



Lindsay

Newly divorced, menopausal, and sexually active 58-year-old with vaginal discomfort



Omari

20-year-old man whose partner has tested positive for chlamydia

*Image content features models and is intended for illustrative purposes only.



Knowing your patient's symptoms and history allows you to zero in on the appropriate STI testing protocol for the patient, enabling you to make the right diagnosis sooner—for better treatment and improved patient outcomes.

Carla

24-year-old female

Reason for visit

- Burning sensation when urinating
- Abnormal vaginal odor

Background

- Graduate student
- Hasn't had a pap test

Sexual history

- Recently in a new relationship
- Not consistently using condoms/birth control

Further questioning may help assess risk

- Any additional relationships for her or her partner?
- Condoms used always, sometimes, or never?

Risk factors

- Highest infection rates for CT/NG are among women ages 15–24¹
- Has never been screened for cervical cancer

Among women ages 15–24:



~86% don't think they're at risk for CT/NG³

Tests to consider

CT/NG	Trich	Pap	BV	Candida
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Address her acute care needs

Carla needs both STI testing and standard-of-care testing for her general health. Quest Diagnostics can help you address all of these needs by providing solutions, including:

- **It's Best to Test**—this program can support your routine CT/NG screening protocol by providing materials and resources for you and your patients
- **Smart Codes**—these use her age to determine which combination of HPV, CT/NG, and trich testing should be performed, along with an Image-Guided Pap

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¹Routine testing for all sexually active female patients under 25 is also recommended by the American Academy of Pediatrics, the American College of Obstetricians and Gynecologists, the American Academy of Family Physicians, and the United States Preventive Services Task Force.



“I’m having some symptoms. I think I’m okay, but I’m not sure. I assume my doctor will order the tests I need.”

CDC guidelines and recommendations

- CT/NG testing for sexually active women under 25 years of age^{4†}
- Test-of-cure 3–4 weeks after CT/NG treatment and re-testing within 3 months⁴
- Trich testing for patients at high risk for infection⁵
- Cervical cancer screening for women ages 21–29 every 3 years⁴

Lindsay

58-year-old female

Reason for visit

- Vaginal discomfort and discharge
- Over-the-counter yeast medicine ineffective

Background

- Busy professional
- Menopausal
- Regularly visits her doctor

Sexual history

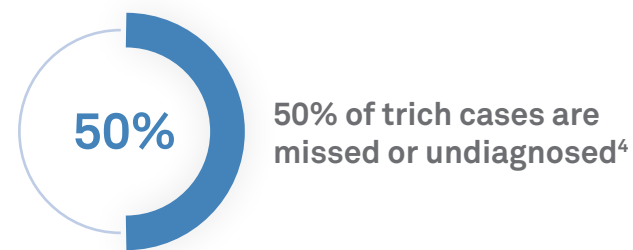
- Recently divorced and sexually active
- Didn't use a condom during one recent encounter

Other questions to consider

- Did former spouse have other sexual partners?
- How long/how many times was over-the-counter medicine used?

Risk factors

- Trich is more prevalent in older women^{5,6}
- Women >25 with a new sex partner or multiple sex partners are at increased risk for CT/NG²



Tests to consider

CT/NG	Trich	HPV	Pap
HIV	BV	Candida	



“I thought I was being responsible but may have put myself at risk. I trust my doctor to know what's best.”

CDC guidelines and recommendations

- Trich testing for women seeking care for vaginal discharge⁵
- Screening all women at risk for CT/NG²
- HIV testing at least once a year for anyone who has unsafe sex⁴
- Re-testing ~3 months after treatment for patients who have been treated for CT/NG and trich²

A continuum of care for Lindsay

Quest Diagnostics can help you meet the specific needs of your female patients, like Lindsay, with solutions such as:

- **A complete women's health test menu** for her, across the continuum of care
- **Smart Codes**—these use Lindsay's age to determine which combination of HPV, CT/NG, and trich testing should be performed, along with an Image-Guided Pap; they also take into consideration tests for patients with risk factors independent of age

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Omari

20-year-old male

Reason for visit

- Wants to be tested for chlamydia

Background

- College student
- Doesn't regularly see a doctor

Sexual history

- Partner has tested positive for chlamydia
- Bisexual
- Doesn't always use condoms

Further questioning may help assess risk

- Condoms used always, sometimes, or never?
- How many partners in the past year? Male and/or female?
- Has partner been tested for other STIs, including HIV?

Risk factors

- Inconsistent condom use increases risk for STIs
- STIs are often asymptomatic in men^{7,8}
- Having a partner with an STI increases risk for other STIs
- Men who have sex with men (MSM) have higher rates of STIs, including syphilis and HIV⁹

26.8% 
INCREASE

From 2012 to 2016, 26.8% increase in reported cases of chlamydia¹

Tests to consider

CT/NG

Trich

HIV

Herpes

Syphilis



“My partner has chlamydia, so I want to make sure I don't have it—or anything else. Better safe than sorry.”

CDC guidelines and recommendations

- CT/NG testing for patients at increased risk⁴
- CT/NG testing for MSM every 3–6 months⁴
- Re-testing ~3 months after treatment for patients who have been treated for CT/NG and trich²
- Annual syphilis testing for MSM; every 3–6 months if at increased risk⁴
- HIV testing for all men who seek evaluation and treatment for STIs⁴
- Herpes testing for men with multiple sex partners⁴

Respond to Omari's needs with the right solutions

Quest Diagnostics can help you deliver the highest quality of care to patients like Omari, from STI screening through follow-up.

- **Quantum™ for Healthcare Professionals portal**—view historical trend reports and compare Omari's results over time to provide a continuum of care
- **Extensive menu of STI tests**—aligned with guidelines from leading organizations, including the CDC

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Supporting your clinical and operational needs

Quest Diagnostics offers a broad array of services designed to help you deliver the best patient care while improving the operational efficiency of your practice:

- **Quantum™ for Healthcare Professionals portal**—order tests online, see when we've received your order, and know when to expect results
- **MyQuest™ patient portal and app**—gives patients easy access to test results and allows them to share health information with other providers
- **Patient Service Centers**—provide patients with convenient phlebotomy services, with some locations in retail stores
- **Pricing transparency and Patient Assistance Programs**—we estimate out-of-pocket costs for patients and provide tailored solutions for the underinsured
- **Broad health plan coverage**—for improved patient satisfaction



Interested in learning more?

Visit **Provider.QuestDiagnostics.com/STDawareness** to request more information from a Quest sales representative.

References

1. Centers for Disease Control and Prevention. Sexually transmitted disease surveillance 2016. Atlanta, GA: US Department of Health and Human Services; 2017.
2. Workowski K, Bolan G. Sexually transmitted diseases treatment guidelines, 2015. Centers for Disease Control and Prevention. *MMWR Recomm Rep*. 2015;64(RR-3):1–137.
3. Quest Diagnostics. Universal STI testing research among young women and moms: topline report. December 2017.
4. Centers for Disease Control and Prevention. 2015 sexually transmitted diseases treatment guidelines. Available at www.cdc.gov/std/tg2015/screening-recommendations.htm. Accessed March 7, 2018.
5. Centers for Disease Control and Prevention. Trichomoniasis. Available at www.cdc.gov/std/tg2015/trichomoniasis.htm. Accessed March 7, 2018.
6. Ginocchio CC, Chapin K, Smith JS, et al. Prevalence of *Trichomonas vaginalis* and coinfection with *Chlamydia trachomatis* and *Neisseria gonorrhoeae* in the United States as determined by the Aptima *Trichomonas vaginalis* nucleic acid amplification assay. *J Clin Microbiol*. 2012;50(8):2601–2608.
7. Centers for Disease Control and Prevention. CDC fact sheet: reported STDs in the United States, 2016. Available at www.cdc.gov/nchhstp/newsroom/docs/factsheets/std-trends-508.pdf. Accessed March 20, 2018.
8. Sherrard J, Barlow D. Gonorrhea in men: clinical and diagnostic aspects. *Genitourin Med*. 1996;72:422–426.
9. Centers for Disease Control and Prevention. Sexually transmitted diseases: gay, bisexual and other men who have sex with men (MSM). Available at www.cdc.gov/std/life-stages-populations/msm.htm. Accessed April 5, 2018.

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