

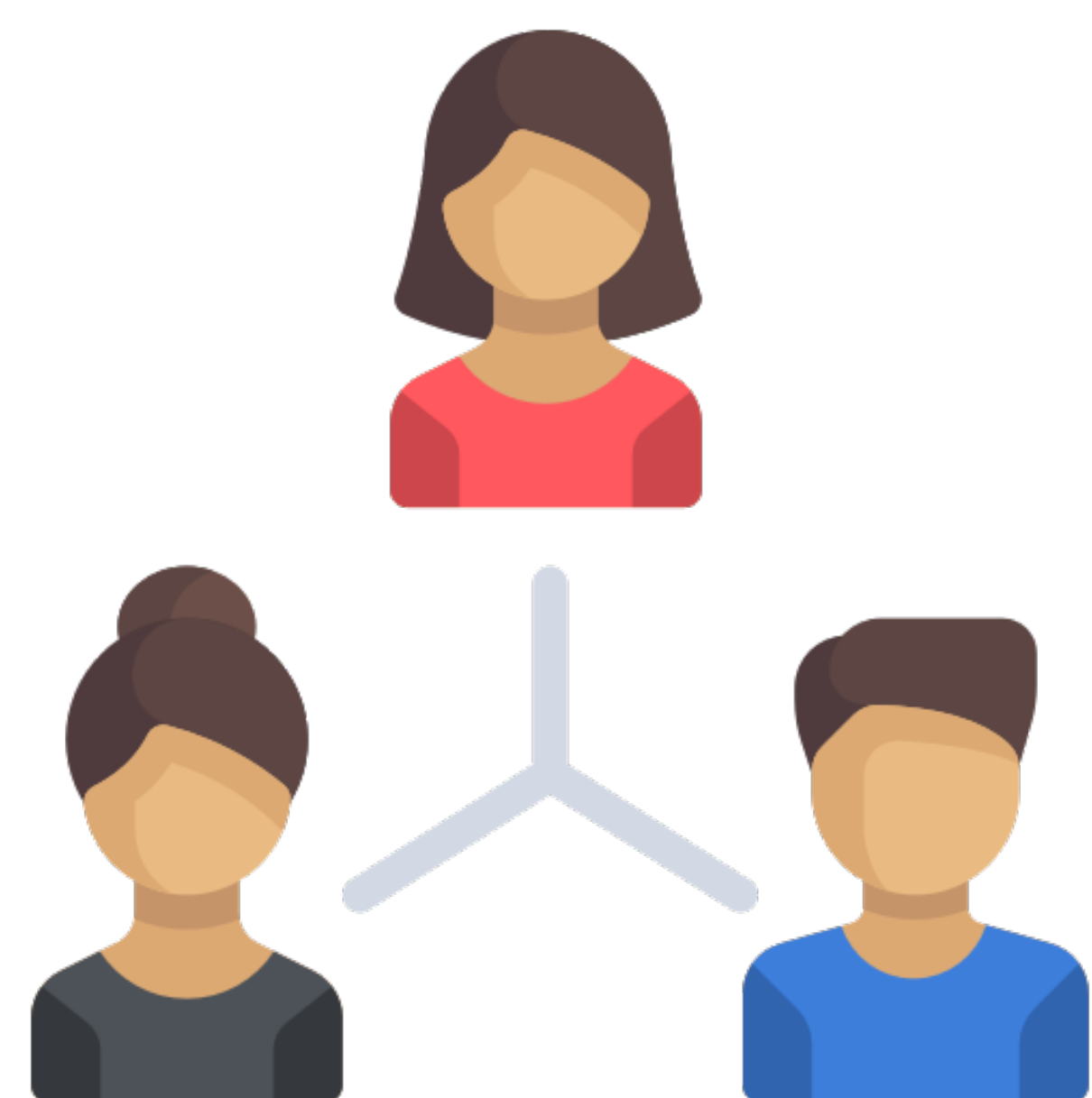


Improving Care of Adolescent Patients in the Emergency Department with Expedited Partner Therapy

Jessica Petrisko MS RN, Jennifer Obrecht DNP RN PCNS/BC CNL, Nina Muhammad DO MS

Clinical Issue

- In 2017, adolescents and young adults (ages 15-24) accounted for 62.6% of all reported chlamydia cases (CDC, 2018). Individuals in this age group are often less likely to receive proper treatment and are at a high risk for reinfection.



Expedited Partner Therapy

- Expedited partner therapy (EPT) entails giving patients who come in to be diagnosed and/or treated for STDs an additional prescription for their partner without the medical evaluation of that individual.
- It has been shown to decrease reinfection rates.
- EPT is supported by the CDC, the Society of Adolescent medicine, and the American Academy of Pediatrics.

Project Goal

- To increase the utilization of EPT in a pediatric emergency room setting by implementing a new clinical pathway and developing provider/RN education



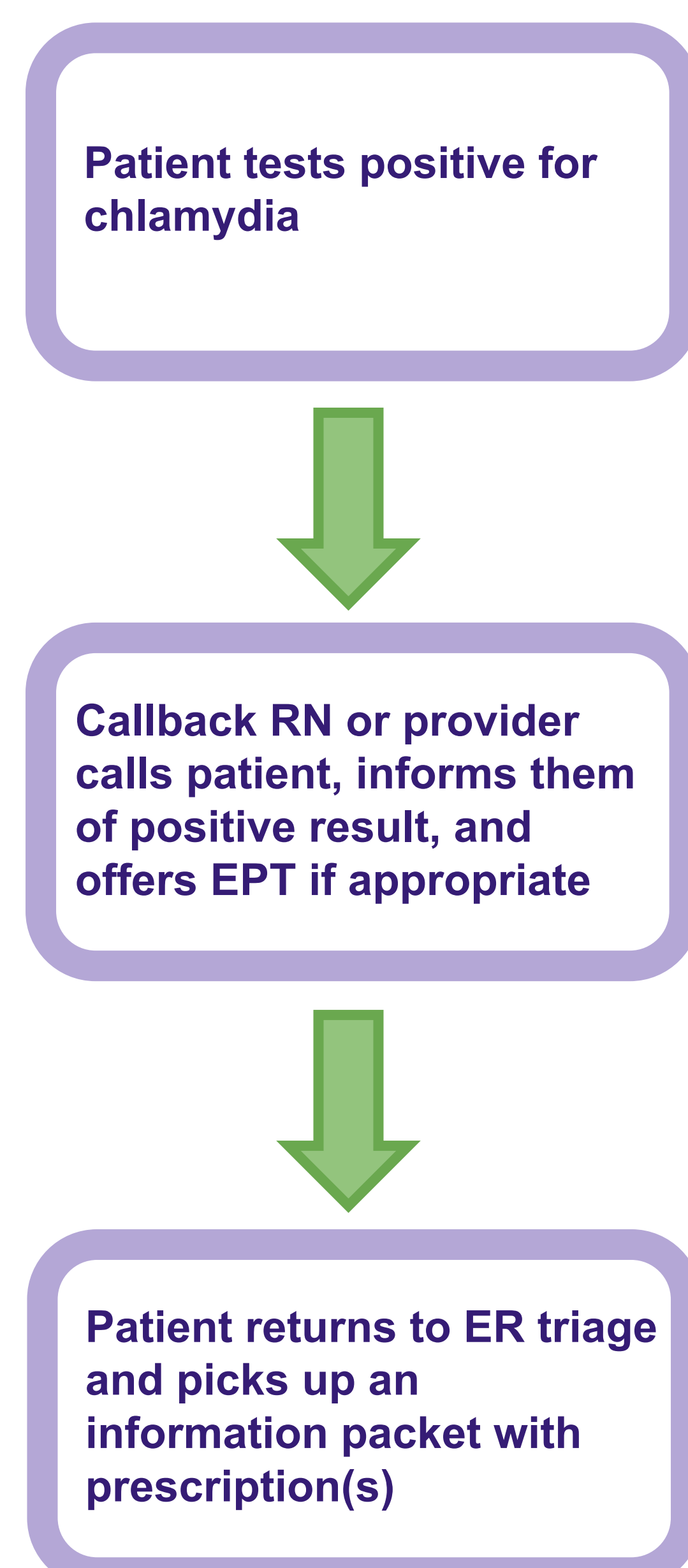
Summary of the Supporting Literature

- The CDC conducted four randomized control trials to determine the effectiveness of EPT
 - All of the studies that focused on reinfection rates among participants showed some degree of reduction in reinfection rates.
 - Patients tended to be more compliant with this intervention than traditional methods of partner notification and treatment.
 - Patients who received EPT in one of the studies were more likely to report that their partner had been treated.
- In 2006, the CDC released guidelines on utilization of EPT.
- The state of Illinois legalized EPT in January of 2010.
- Despite clear guidelines there is still great discrepancy in how and when providers choose to prescribe EPT
 - Concerns reported by providers include: lack of education on EPT, risk of allergic reaction to partner, lost opportunity to counsel partner, cost of medication to patients, and lack of institutional support

Project Implementation

- Provider education as well as a clinical pathway to prescribe EPT was implemented.
- Providers were surveyed pre- and post-education.
- A retrospective chart audit of patients with chlamydia was performed.

Process



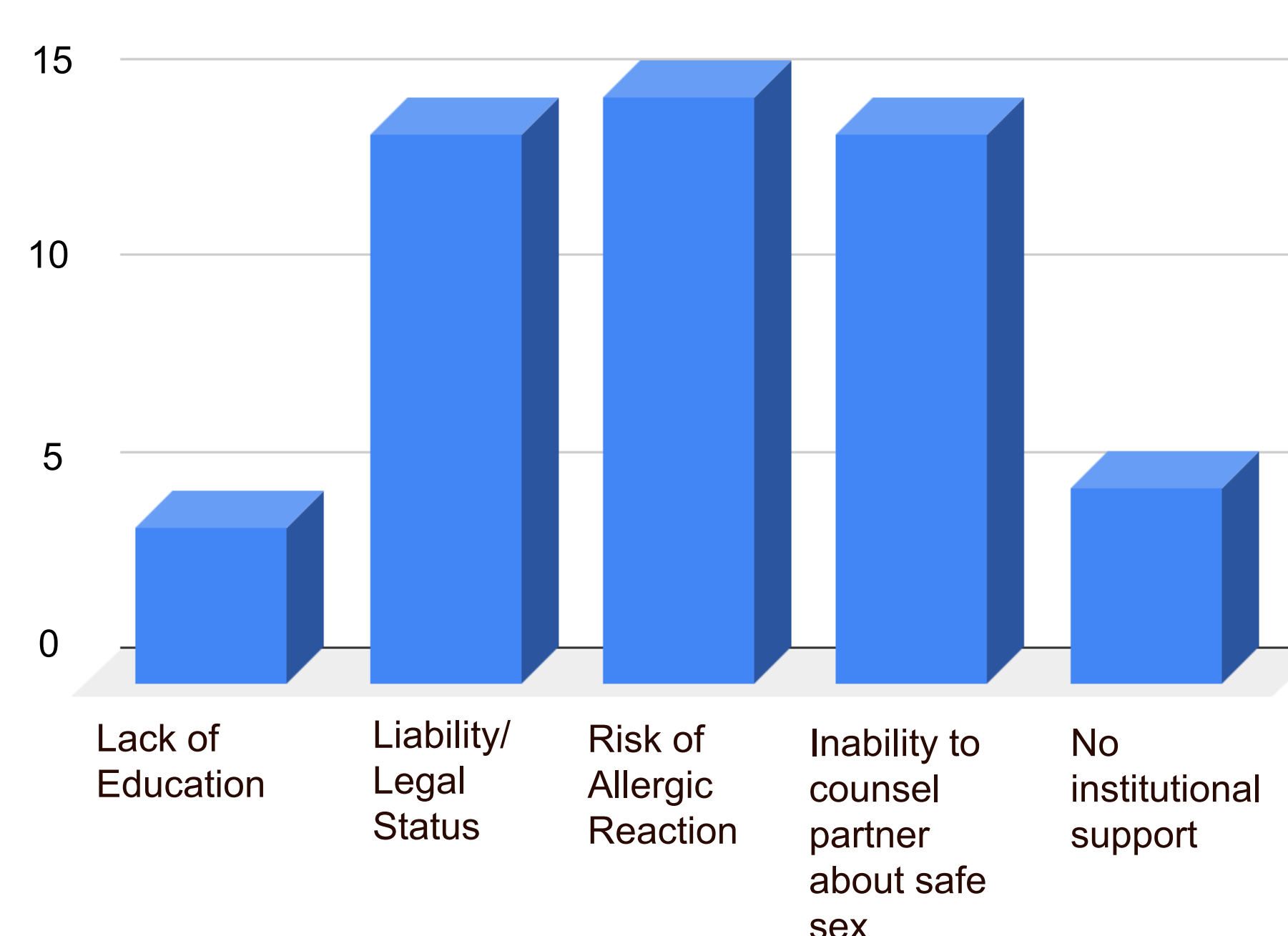
Contents of EPT Patient Packet

- Illinois Department of Public Health *Treatment Fact Sheet for Sex Partners of Persons With Chlamydia*
- PED handout for expedited partner therapy
- Micromedex Azithromycin Patient Information Sheet
- CDC Chlamydia Fact sheet
- Prescription

Initial Provider Survey

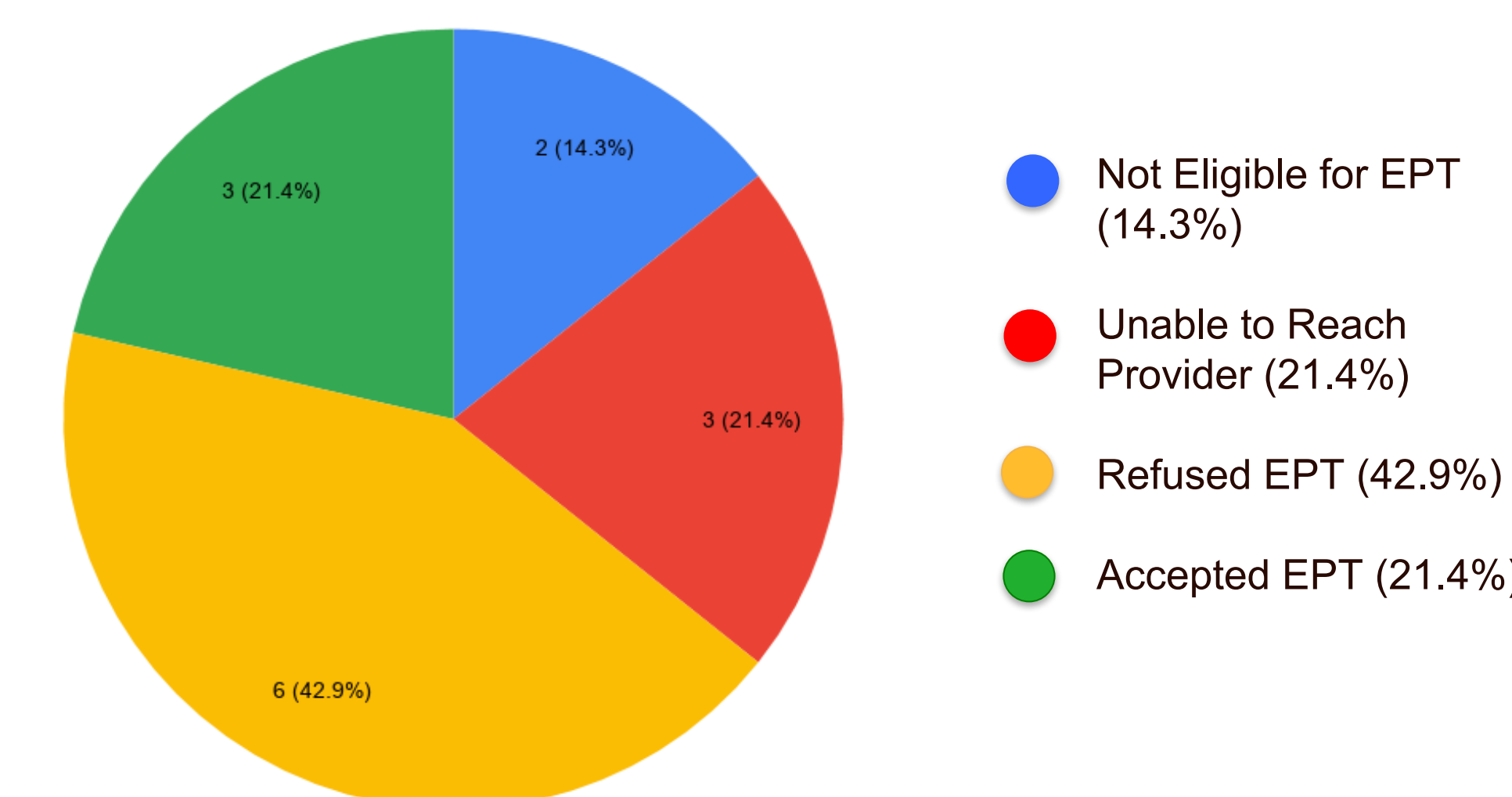
	Yes	No
Q1 - Are you familiar with the practice of expedited partner therapy?	16 (67%)	8 (33%)
Q2 - Are you aware that this practice has been legal in the state of Illinois since 2010?	8 (33%)	16 (67%)
Q3 - Are you aware that the legislature covers the use of expedited partner therapy in adolescents over 13 years of age?	10 (42%)	14 (58%)
Q4 - At this point in time, would you be likely to prescribe expedited partner therapy for an adolescent patient to ensure their partner was treated?	20 (83%)	4 (17%)

Q5 - In regards to prescribing expedited partner therapy, what are your biggest concerns? (Select all that apply)



Outcomes

- During the Implementation period, 14 patients over the age of 13 years old tested positive for chlamydia
- Of the 12 eligible patients, all were offered EPT
- 3 Patients successfully received EPT



Follow-up Provider Survey

	Yes	No
Q1 - Has your opinion of expedited partner therapy changed since viewing the new clinical pathway/the education provided?	4 (57%)	3 (43%)
Q2 - At this point in time, would you be likely to prescribe expedited partner therapy for an adolescent patient to ensure their partner was treated?	6 (86%)	1 (14%)

Clinical Implications for Practice and Next Steps

- While we were able to implement a system where all patients were offered EPT, many did not accept.
- Future projects could look at why patients are hesitant to accept this intervention.
- These projects will also have to find more reliable methods to contact patients after discharge.

Acknowledgements

I would like to acknowledge Dr. Obrecht and Dr. Muhammad for all the effort and time they spent helping me with this project. I would also like to acknowledge the staff at Advocate Children's Hospital Pediatric Emergency Department who were so open and willing to make this change to improve care for our patients. Finally, thank you to Sarah Maciolek for all the help and guidance.

Key References

- Centers for Disease Control and Prevention (2017). Chlamydia- CDC fact sheet. Retrieved from: <https://www.cdc.gov/std/chlamydia/stdfact-chlamydia.htm>
- Centers for Disease Control and Prevention (2006). Expedited partner therapy in the management of sexually transmitted diseases: Review and guidance. Retrieved from: <https://www.cdc.gov/std/treatment/epftfinalreport2006.pdf>
- Centers for Disease Control and Prevention (2018). STDs in adolescents and young adults. Retrieved from: <https://www.cdc.gov/std/stats17/adolescents.htm>
- Erika's Lighthouse. (2019). [Image]. Retrieved from: <https://www.erikaslighthouse.org/educators/>
- Golden, M., Whittington, A., Handsfield, H., Hughes, J., Stamm, W., Hogben, M., ...Holmes, K. (2005). Effect of expedited partner treatment of sex partners on recurrent or persistent gonorrhea or chlamydial infection. *The New England Journal of Medicine*, 352(7), 676- 685.
- [Image]. Retrieved from: <http://freevectorfinder.com/free-vectors/parent-child-holding-hands-icon/>
- Kissinger, P., Mohammad, H., Richardson- Alston, G., Leichter, J., Taylor, S., Martin, D., Farley, T. (2005). Patient- delivered partner treatment for male urethritis: a randomized, controlled trial. *Clinical Infectious Diseases*, 41, 623-629.
- Kissinger, P., Schmidt, N., Mohammed, H., Leichter, J., Gift, T., Meadors, B., ... Farley, T. (2006). Patient- delivered partner treatment for trichomonas vaginalis infection: a randomized controlled trial. *Sexually Transmitted Diseases*, 33(7), 445-450
- Pickett, M., Melzer- Lange, M, Miller, M., Menon, S., Vistocky, A., & Drendel, A. (2018). Physician adherence to center of disease control and prevention in the pediatric emergency setting. *Pediatric Emergency Care*, 34(1), 767- 773
- Schillinger, J., Kissinger, P., Calvet, H., Berman, S., Kent, C., Martin, D., ...Markowitz, M. (2003). Patient- delivered partner therapy with azithromycin to prevent repeated chlamydia trachomatis infection among women: A randomized controlled trial. *Sexually Transmitted Diseases*, 30(1), 49-56.