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Introduction

This resource was created to support the development of an STI clinic; it includes an overview of services an STI clinic should provide and additional items to consider. This is not intended to be a comprehensive list, but rather a starting place for clinics to explore. Additional resources are included at the end of the document.



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Clinic Flow - Steps to Consider

- 1. Intake
 - Registration
- 2. Waiting Room
 - Patient education?
 - Monitor/TV?
 - Screenings
 - Consider asking about symptoms that may indicate something contagious, like a cough or a rash
- 3. Vital Signs
 - Tech?
 - Nurse?
 - Provider?
- 4. PrEP education and evaluation
 - Benefits/payment?
- 5. Physician Visit
 - Who brings the patient into the room?
 - Documentation?
 - Orders?
- 6. Lab Work
 - Where does the patient go for labs?
 - Physician collect vs. self-collect?
 - Who draws the blood?
 - How does blood get to the lab?
 - Where are the labs done?
- 7. Lab Results
 - How are the results reported to the physician?
 - How are results reported to the patient?
- 8. Treatment
 - Injections
 - Where can they go?
 - Pills
 - Clinic pick-up
 - Pharmacy pick-up
 - Expedited partner therapy
- 9. Follow-up
 - When?
 - Who arranges?
 - How is it done?
 - Timing? What's feasible?
 - Frequency?
 - How do you remind patients?



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Checklists for STI Clinics

STI Clinics Should Provide Treatment for the Following Conditions (on-site or via prescription):

Gonorrhea Chlamydia Cervicitis Nongonococcal urethritis Proctitis PID Epididymitis **Syphilis** nPEP **PrEP** Provider-applied regimens for genital warts (cryo, TCA) Emergency contraceptive pills EPT for gonorrhea and chlamydia Herpes **Trichomoniasis** Mycoplasma genitalium Mpox (if treatment on site not possible, establish referral process to treatment center)

Diagnostics that STI Clinics Should Have On-Site or Regular Access To:

Urogenital NAAT for gonorrhea and chlamydia Extragenital (pharynx and rectum) NAAT for gonorrhea and chlamydia Quantitative nontreponemal serologic test for syphilis Treponemal serologic test for syphilis Fourth-generation antigen/antibody HIV test Serologic tests Hepatitis B and C Testing for pregnancy HSV viral culture or PCR Point of care testing for HIV and syphilis

<u>Extras</u>

Oncogenic HPV NAATs with Pap smear (when referral to colposcopy or anoscopy is available) Colposcopy and Anoscopy (when established referral for HSIL is available) HSV serology Serologic Test for Hepatitis A



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Medications that Should be Available in an STI Clinic:
Ceftriaxone
Doxycycline
Azithromycin
Cefixime
Gentamicin
Penicillin G
TDF/FTC
Raltegravir
Dolutegravir
Provider-applied regimens for genital warts (cryo, TCA)
Emergency contraceptive pills
Acyclovir
Metronidazole
Contraception (pills, ring)



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Suggested Lab Equipment for an STI Clinic*

Machine	Tests	Size	Tech Time	Time to Results
<u>Bio-Rad</u> <u>BioPlex 2200</u>	Syphilis (one-step syphilis testing) HIV Ag-Ab 5th gen Hepatitis in development	H: 4' 5" W: 4' 3" D: 2' 10" 1,032 lbs.	Load tubes - 8 hours of walk- away capability	Can process 100 samples/ hour. 40-60 minutes for first result, then approx. every 30 secs
<u>Abbott</u> <u>Architect</u>	Hep A, Hep B, Hep C HIV Ag/Ab Syphilis	<u>Different</u> <u>options</u> H: 48-49" W: 59-127" D: 30-49"	Capacity: 65- 285 samples	100-400 tests/hour
<u>Aptima Hologic</u> <u>– Panther</u> <u>Systems</u>	Chlamydia Gonorrhea Trichomoniasis Herpes BV Candida Vaginitis HPV HIV-1 RNA Hep B and C	<u>Different</u> options	Suggests minimal hands- on time needed and time saving technology	
<u>Cepheid</u> <u>GeneXpert</u> <u>Systems</u>	Chlamydia Gonorrhea Trichomoniasis	<u>Different</u> <u>options</u> W: 4-22.75" H: 12-25,80" D: 11.7-13.25"		Most test results within an hour

NYC PTC recommends sending out samples for:

• Anal and cervical paps: these are analyzed by a pathologist, not a machine *This list was developed in March 2022



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Resources

- 1. Recommendations for providing quality sexually transmitted diseases clinical services, 2020. MMWR Recommendations and Reports, 68(5), 1. CDC. <u>https://www.cdc.gov/mmwr/volumes/68/rr/rr6805a1.htm?s_cid=rr6805a1</u>
- Planning Toolkit for Using CDC's Recommendations for Providing Quality Sexually Transmitted Diseases Clinical Services, 2020. NACCHO. <u>https://www.naccho.org/uploads/downloadable-resources/NACCHO-STD-QCS-Planning-Toolkit.pdf</u>
- 3. Program operations guidelines for STD prevention (link to all publications). CDC Division of STD Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. <u>https://stacks.cdc.gov/view/cdc/40219/cdc_40219_DS1.pdf</u>
- 4. Program operations guidelines for STD prevention: medical and laboratory services. CDC Division of STD Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. <u>https://stacks.cdc.gov/view/cdc/40219/cdc_40219_DS1.pdf</u>
- 5. Why Screen for Chlamydia? A How-To Implementation Guide for Healthcare Providers, <u>http://chlamydiacoalition.org/pdfs/Why_Screen.pdf</u>
 - Pg. 9 of this document (Teen Friendly Office Tips) shows a "clinic flow" in a graphic
 - This graphic has considerations for different parts of the clinic visit

