**TREATMENT GUIDELINES FOR HEALTH STAFF**

**CHLAMYDIA INFECTION**

Authorized health and wellness staff may treat laboratory-confirmed chlamydia\* infection as follows:

1. Recommended regimen: administer doxycycline 100 mg po twice daily for 7 days directly observed therapy with fluids or snack.
2. Alternative regimens: administer azithromycin 1 g po once as a single dose or levofloxacin 500 mg po once daily for 7 days.
3. If pregnant administer azithromycin 1 g po once as a single dose. Alternative regimen: amoxicillin 500 mg po three times a day for 7 days.
4. Instruct student to return for re-treatment if vomiting occurs within 4 hours of treatment.
5. Discuss contact(s) treatment, screening for other STDs as appropriate, health department reporting requirements, and prevention of STDs and pregnancy (offer condoms and contraceptives as appropriate).
6. Consider expedited partner therapy (EPT) if permitted by state law. A summary of state EPT laws can be found at: http://www.cdc.gov/std/ept
7. Instruct student to abstain from sexual intercourse for 7 days and until all sex partners have been treated.
8. Schedule chlamydia retesting in 1-3 months due to high prevalence of repeat infection in people recently diagnosed and treated for chlamydia.

9. Due to the risk of chlamydia infection during pregnancy, perform a test of cure 1

 month after treatment and repeat testing 3 months later due to high prevalence of

 repeat infection.

\* Extragenital chlamydia screening (rectal) should be considered based on sexual behavior.

**WHEN TO REFER TO THE CENTER PHYSICIAN**

* If the student has rectal pain suggestive of proctitis
* If the female student has pelvic pain suggestive of pelvic inflammatory disease
* If the male student has scrotal pain suggestive of epididymitis or lower back pain suggestive of prostatitis
* If the student has an allergy or other contraindication to listed medications and the use of a fluoroquinolone antibiotic needs to be considered