

Prospectus Proposal Gonorrhea and Chlamydia Screening in a Charter School

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The Centers for Disease Control (CDC)

Chlamydia Infection

- Chlamydia

- Most frequently reported bacterial STI in the US
- In 2006, In U.S. 1,030,911 cases were reported.
- Estimated 2,291,000 infections in 14-39 year olds.
- Re-infection is common if partners are not adequately treated at the same time or do not complete treatment.
 - Many providers refuse to treat partners without exam

Chlamydia Infection

- Sexually transmitted infection
- Can be a co-infection with Gonorrhoea
- Can be transmitted during childbirth
- Easily treated with antibiotics
- Diagnosis in lab specimen
 - Cervical or urethral swab
 - Urine sample tested for gonorrhoea and Chlamydia
- If untreated can lead to complications

Symptoms of Infection

- Symptoms

- Silent-75% of men and women have no symptoms
- Symptoms usually seen 1-3 weeks after exposure
 - Vaginal discharge or penile discharge
 - Abdominal pain
 - Burning with urination
 - Low back pain
 - Pain with intercourse
 - Painful menstrual cycles
 - Irregular bleeding

Complications if Untreated

- Can spread to uterus or fallopian tubes and lead to PID (pelvic inflammatory disease)
- PID can lead to chronic pelvic pain, infertility, and increased risk of ectopic pregnancy
- Women who have Chlamydia are 5x more likely to become infected with HIV, if exposed
- Rarely can lead to sterility in males, and Reiter's syndrome (arthritis, and inflammation of eyes and urethra)

Statement of the Problem

- Each successive Chlamydia infection can increase the rate of tubal infertility.
- Single episode of PID raises tubal infertility to 10%
- Each new episode of PID doubles that risk
- 40% of untreated Chlamydia cases will lead to PID
 - 10% will have an ectopic pregnancy
 - 20% will suffer from chronic pelvic pain

Statement of problem (cont.)

- Recognition of screening opportunity
- National recommendations for screening all women under 25 for Chlamydia on an annual basis.
- Many of the students of the charter school have had high risk social behavior that have guided them towards alternative education, which also may lead to other high risk behavior

Importance of Prospectus Project

- Charter school has diverse and underserved population of teens
- Teens frequently involved in high risk behaviors that lead to need for high school alternatives for completion of basic education
- No current screening available for these students except through traditional methods within the community

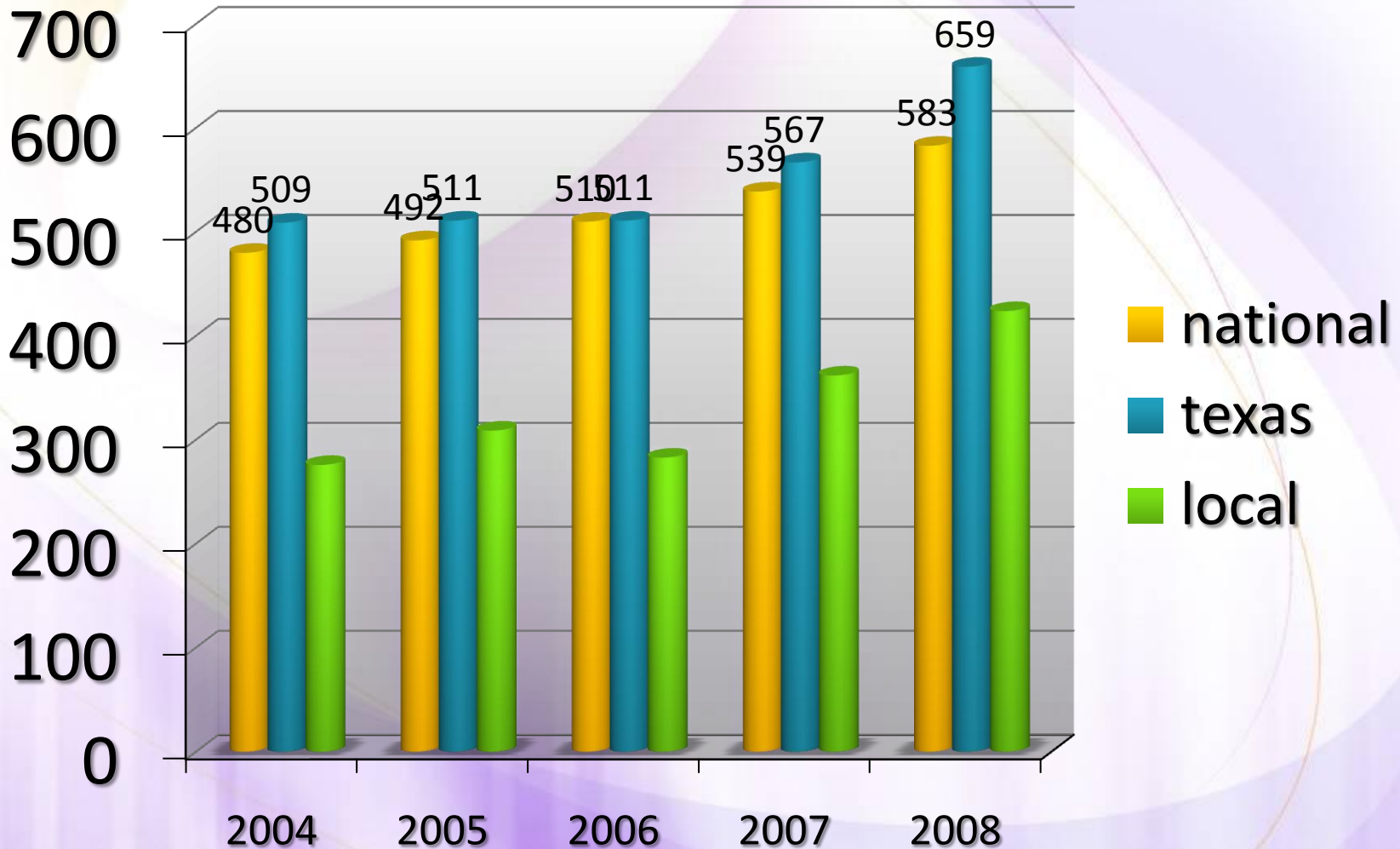
Prevention of Chlamydia

- Yearly Chlamydia screening in all sexually active women under age 25.
- Safer sex practices
- Encourage abstaining until in a mutually exclusive relationship
- Rapid treatment of symptomatic individuals
- Treatment of partners at the same time as the patient
- Avoiding intercourse until all partners treated

Centers for Disease Control (CDC) Infertility Prevention Project (IPP)

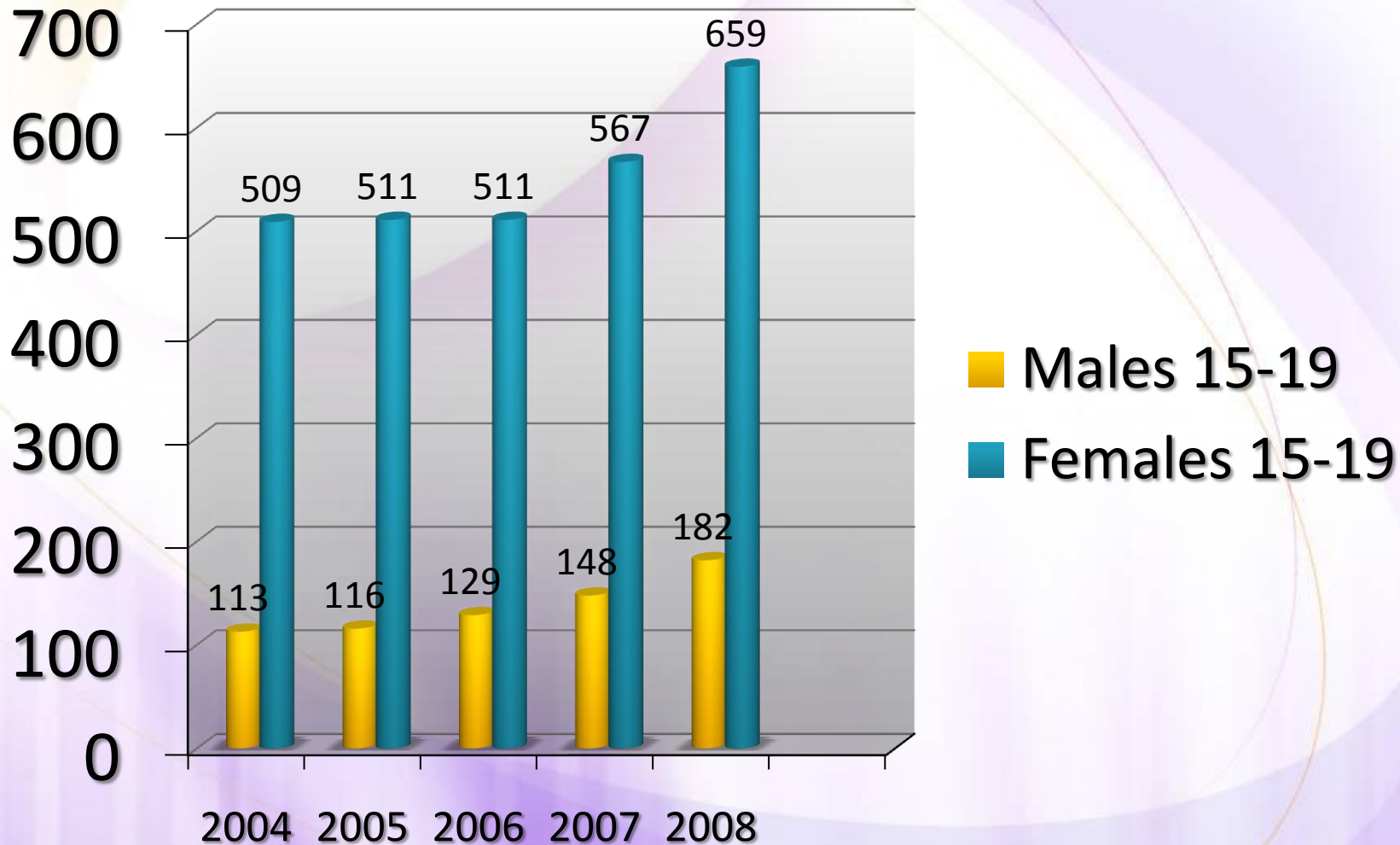
- Infertility Prevention Project
 - To fund Chlamydia screening and treatment for low-income, sexually active women in areas:
 - Family planning clinics
 - STD/STI clinics
 - Women's Health Clinics
 - Funding available for some other areas:
 - Charter schools (pilot studies)
 - Pregnancy test only screening (pilot studies)

Local and National Data Compared



Cases of Chlamydia per 100,000 women

Comparison of male/female rates



Cases Chlamydia per 100,000

Objectives of Project

- Determine Incidence rate at charter school among male and female students
- Provide treatment for positive results for patient as well as partner
- Facilitate decrease of Chlamydia rate among the students
- Assess the incidence rate of the above charter schools to provide community wide project
- Provide resources for referral for symptomatic as well as pregnant patients

Methods

- Consists of following staff
 - One Principle investigator-APRN DNP student
 - One new NP
 - 2 medical assistants
 - Administrators and staff of charter school
 - School nurses at the charter school
 - Statistician to assist in evaluation of data

Methods

- Preparation for screening
 - Meet with school administrators and staff
 - Encourage Participation from students and staff
 - Benefits of screening
 - Ease of screening
 - Cost savings for free screening
 - Free educational opportunity
 - Meet with students for short informative presentation
 - Present benefits, ease of screening, health information
 - Student expectations, and follow-up needed

Methodology

- On the day of screening
 - Each student visits area where clinic will be held
 - Receives free information
 - Is asked to participate and if participating
 - Will sign consent form and fill out demographic info.
 - Lab orders are completed
 - Get information regarding results
 - Make appointment for next week at same time
 - Participant will submit sample and it will be labeled and sent to lab for evaluation

Methodology

- Results of lab will be reviewed and followed up by APRN using standard protocol according to the CDC
 - If positive for CT student and any partners will be given Azithromycin 500 mg (#2) to take 2 PO all at once.
 - If positive for GC student and any partners will be given Azithromycin 500 mg (#4) to take 4 PO all at once.

Methodology

- Any positive results are reported to the local Department of Health
- Three attempts to reach the student if the results are positive.
- Discussion regarding positive results includes information regarding safer sex and partner treatment as well
- All screened individuals will be given information regarding STI's, safer sex, and contraceptive options.

Evaluation

- Rates of infection for this population will be discussed
- Once screening is completed results will be available for evaluation.
- Demographic information as well as a small questionnaire discussing high risk behaviors, symptoms, as well as perceived barriers to care will also be evaluated.

Budget

<i>Supplies given at screening</i>		<i>Cost</i>	<i>Count</i>	<i>Total</i>
Consent Form	Two sided	0.15/1	549	88.00
Urine Collection Cup	Lab provides	free	550	0.00
STI Information	Brochure	0.61/1	600	363.40
Referral Information	One sided	0.35/1	600	208.00
Appointment Card	One card	\$45/500	500	45.00

Budget

Staff		Pay Rate	# Hours	Total
2 APRN		50.00/hr	140	7000.00
3 FPA		15.00/hr	120	1800.00
Statistician		50.00/hr	8	400.00
Total Cost				18,490

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Summary

- Chlamydia is one of the leading preventable causes of infertility
- Current guidelines recommend screening yearly for those under age 25
- A prospectus project was generated to create a project to integrate screening for gonorrhea and Chlamydia into a charter school to evaluate the rate of Chlamydia within this high risk population, gather information regarding barriers to care, and demographic information about the students from the school.

References

- Centers for Disease Control and Prevention (2007) Sexually Transmitted Disease Surveillance, 2006. U.S . Department of Health and Human Services. November 2007.
- Curtiss, J. (2009) Chlamydia Challenge. Newsletter of the Region VI Infertility Prevention Advisory Committee (RIPAC). RIPAC. Center for Health Training.
- Us. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for HIV, STD and TB Prevention (NCHSTP), CDC WONDER, Online-Database, November 2009. Accessed on April 28, 2009 from <http://wonder.cdc.gov/controller/datarequest/D45;jsessionid=95887C5AF5EBB877E707AFA51C566BE8>