Expedited Partner Therapy (EPT)
New York State
OVERVIEW OF EPT AND STIs
What is Expedited Partner Therapy (EPT)?

EPT is a practice whereby health care providers can prescribe certain antibiotics to the sexual partner(s) of a person with a sexually transmitted infection (STI) without a prior medical evaluation or clinical assessment of the partner(s).

➢ It’s legal in New York State under New York State Public Health Law (PHL) §2312

➢ Can be prescribed to eligible partners of persons diagnosed with:
  ✓ Chlamydia
  ✓ Gonorrhea
  ✓ Trichomoniasis (Trich)
Chlamydia, gonorrhea, and trichomoniasis (trich) are STIs caused by bacteria that you can get from oral, vaginal, and/or anal sex without proper use of a condom or dental dam.

**Chlamydia**
- Infects the genitals (penis or vagina), the mouth, throat, or rectum
- Can lead to pelvic inflammatory disease, chronic pelvic pain, infertility, and ectopic pregnancy in females.

**Gonorrhea**
- Infects the genitals (penis or vagina), the mouth, throat, or rectum
- Can lead to pelvic inflammatory disease in females and can also spread to the blood and cause disseminated gonococcal infection (DGI)

**"Trich:” Trichomoniasis**
- Infects the genitals (penis or vagina)
- Can cause pre-term deliveries and low birth weights

- These infections can be passed during pregnancy causing complications for the newborn
- Many people experience no symptoms
- Untreated infections may increase the risk of acquiring HIV during sex if exposed
Chlamydia in New York State (excluding New York City) - 2019

2.0% increase
2018: 47,225 | 2019: 48,183

6 consecutive years of increases

3.3% increase among males
64.0% of diagnoses among females

7.1% increase in cases in the Rochester Region*

Compared to white non-Hispanic persons*, black non-Hispanic persons are...

6x more impacted by Chlamydia

*Regional data displays region with the largest percent increase

**Age-specific rates per 100,000 population
Gonorrhea in New York State (excluding New York City) - 2019

6.5%
2018: 11,194 | 2019: 11,923

6 consecutive years of increases

9.3%
increase among males

59.2%
of diagnoses among males

22.8%
increase in cases in the Rochester Region*

- Male
- Female

**Age-specific rates per 100,000 population

Compared to white non-Hispanic persons*, black non-Hispanic persons are…

10x more impacted by gonorrhea

*Regional data displays region with the largest percent increase
*Based on age-adjusted rates per 100,000 population

Rochester Region*

**Region data displays region with the largest percent increase

**Age-specific rates per 100,000 population
Trichomoniasis

➢ Trichomoniasis (Trich) is the number one cause of vaginal infections spread through sex.

➢ Approximately 3.7 million people have this STI each year.

➢ Infection and re-infection rates cannot be calculated directly nationally or in NYS as trichomoniasis is not a reportable STI.
The Goal of Expedited Partner Therapy is to Get: EVERY PARTNER TREATED

www.health.ny.gov/diseases/communicable/std/ept
**Benefits of EPT**

- Highly effective when administered properly
- High disease burdens, limited resources
- Repeat infection is common
- Asymptomatic partners may not seek care
New York State Laws and Regulations

- **EPT is authorized** under New York Codes, Rules, and Regulations (NYCRR) section 23.5, of Title 10, and Section 2312 of NYS Public Health Law

- Permissible for chlamydia, gonorrhea, and trichomoniasis (lab confirmed or clinically diagnosed)
  - EPT not used if patient is co-infected with syphilis

- Provider and pharmacist are **protected from liability**

- Patients must be given information materials to deliver to their sex partners along with EPT

- EPT may be dispensed by medication in hand or prescription form
EPT Recommended Treatments:

**Chlamydia**
- Azithromycin 1 g orally in a single dose

**Gonorrhea**
- Where Chlamydia HAS been excluded
  - Cefixime 800 mg orally in a single dose
- Where Chlamydia HAS NOT been excluded
  - Cefixime 800 mg AND Oral doxycycline 100 mg, 2X daily for 7 days

**Trichomoniasis**
- Metronidazole 2 g OR Tinidazole 2 g orally in a single dose
PLEASE NOTE:

1. If a patient is coinfect ed with gonorrhea and chlamydia, please note that **EPT for gonorrhea will work to cure chlamydia as well.** However, EPT for chlamydia ALONE will not cure both chlamydia and gonorrhea.

2. Be sure to ask about all areas that can be used for sex. If the sex partner(s) performed oral sex on the index patient who is diagnosed with gonorrhea, additional treatment may be needed for partner(s).

3. Offer and provide **3-Site testing.** Certain STIs, such as gonorrhea and chlamydia, can infect the genitals, throat, and rectum. Testing the genitals only may miss an infection the patient has elsewhere. Test at each body site where the patient has sex.
EPT can work in two ways:

1. Provider diagnoses patient (either through laboratory confirmation or clinical diagnosis) with trich, gonorrhea, and/or chlamydia

   - Medication in hand
   - Provider provides EPT educational items to be given to partner(s)
   - Patient delivers medication to partner

2. Prescription

   - Partner fills e-script at pharmacy, or
   - Patient delivers paper script to partner
EPT Prescription in New York State

• EPT must be written in the body of the prescription form

• EPT law overrides the requirement that prescriptions include a patient’s name, address, and age

• E-prescribing mandate has been waived for EPT until 3/24/2022, renewed annually

Sample EPT Script (for chlamydia)


Medication-in-Hand

The preferred method is dispensing in a pre-packaged “partner pack” that includes medication, informational materials, and clinic referral.

If a health care provider offers EPT directly to the index patient, for their partner(s), as a patient delivered therapy:

  EPT medication **must be** labeled with the name and address of the dispenser, directions for use, date of delivery, the proprietary or brand name of the drug and, the strength of the contents. (NYS Education Law Title VIII, Article 137: Section 6807).
Health Education Materials

NYS Public Health Law requires that health education materials must be distributed when providing EPT (medication and prescription).

EPT materials for the use of chlamydia, gonorrhea, and trichomoniasis are currently being developed. Until they are available, providers of EPT for gonorrhea and/or trichomoniasis must create their own educational materials that covers the following (for a complete list of requirements please refer to the EPT Interim Guidance)

• Adverse drug reactions
• Guidance for pregnant partners
• Protective and preventative measures for STIs and HIV
• Recommend further testing and provider consultation
EPT RESOURCES
The goal of the EPT Workgroup is to increase awareness, education and usage of EPT statewide!

The multidisciplinary workgroup includes:

- County health departments
- Partner Services staff
- Providers
- Pharmacists
- AIDS Institute

The workgroup is comprised of 3 subcommittees:

- **Providers**: To increase the provision of EPT among providers across the state.

- **Pharmacy**: To increase the dispensing of EPT among pharmacists and remove barriers in filling prescriptions.

- **School Based Health Centers**: To increase EPT usage among schools to reach the youth population, who are disproportionately affected by STIs.

To join the workgroup email us at: [ept@health.ny.gov](mailto:ept@health.ny.gov)
The subcommittee is currently developing posters that will incorporate messaging for gonorrhea and trichomoniasis.
Existing EPT Links and Handouts

EPT NYSDOH webpage includes:

- Information for providers and pharmacists
- Laws and letters
- Educational materials

https://www.health.ny.gov/ept
EPT is endorsed by the following:

- Centers for Disease Control (2006 White Paper, 2021 Treatment Guidelines)
- American Medical Association (June, 2006)
- American Bar Association (August, 2008)
- American Academy of Pediatrics (March, 2009)
- Society for Adolescent Medicine (September, 2009)
- American College of Obstetricians and Gynecologists (August, 2011)
FREQUENTLY ASKED QUESTIONS
Why is EPT important?

- Sexually transmitted infections are a significant public health problem, with over 60,000 cases reported annually in New York State (including NYC).
- Due to a high burden of infection and limited public health resources for Partner Services, it has been difficult for local health departments to investigate and notify persons who have been exposed to STIs.
- EPT helps to reduce STI reinfection rates.
- EPT provides an alternative strategy to ensure that exposed sexual partners get needed medication.
When should EPT be administered?

- The first-choice partner management strategy is to bring in sexual partners for a complete clinical evaluation, STI and HIV testing, and counseling and treatment as appropriate.

- EPT is a strategy that can serve as an alternative to referring sexual partners for clinical examination when they are unable, unlikely, or unwilling to seek care. Providers should use their best judgment to determine whether their patient's sex partner(s) will or will not seek treatment.
• Under Public Health Law, EPT may be used by health care providers authorized under Title 8 of NYS Education Law to diagnose and prescribe drugs for chlamydia, gonorrhea, or trichomoniasis infections. Such providers who reasonably and in good faith render EPT are not subject to civil or criminal liability. The use of EPT in such manner is not deemed unprofessional conduct.
What’s the preferred treatment?

The recommended drug regimen for EPT is:

**Chlamydia:** a single dose of azithromycin 1 g orally (e.g., 250 mg x 4) or doxycycline 100 mg orally twice a day for 7 days

**Gonorrhea:** Cefixime 800 mg in a single dose **PLUS**, when chlamydia is **not** ruled out, 100 mg of oral doxycycline twice daily for seven days

**Trichomoniasis:** Metronidazole 2 g **OR** Tinidazole 2 g orally in a single dose

The full CDC STI Treatment Guidelines (2021) are available [here](#).
At the time of publication, **EPT is exempt from the NYS electronic prescription mandate.** Paper prescriptions can still be used for EPT. Providers should check to verify that the exemption is still in place by visiting the following site and searching for Exceptions to Electronic Prescribing. [Electronic Prescribing](https://www.health.ny.gov/forms/doh-250)

Providers may order prescription pads at: [https://www.health.ny.gov/forms/doh-250](https://www.health.ny.gov/forms/doh-250)
How do I provide EPT?

• Some providers will opt to provide the patient directly with antibiotics for each eligible sex partner.

• Other providers may opt to provide written prescriptions for each eligible sex partner.
When writing a prescription for medication via EPT, the following efforts should be taken:

1. Write "EPT" in the body of the prescription form above the name of the medication and dosage.
2. If available, write the sexual partner's name, address, and date of birth in the designated areas of the prescription.
3. If the sexual partner's name, address, and/or date of birth are not available, the written designation of "EPT" shall be sufficient for pharmacists to fill the prescription.
4. Separate prescriptions must be provided for each eligible sex partner. Prescribing multiple doses on one prescription, intended for more than one person, is illegal.
Sample EPT Scripts

**PRESCRIPTION**

NAME: 
AGE: 
ADDRESS: 
DATE: 

Rx EPT
Azithromycin 1g

**PRESCRIPTION**

NAME: 
AGE: 
ADDRESS: 
DATE: 

Rx EPT
Azithromycin 1g

**PRESCRIPTION**

NAME: 
AGE: 
ADDRESS: 
DATE: 

Rx EPT
Azithromycin 1g

11/24/2021
All sexual partners exposed within the 60 days prior to the patient's first reported symptoms or receiving diagnostic test results (whichever occurs earlier) are eligible for EPT. If no sex partners from within the past 60 days are identified, EPT may be offered for the most recent sex partner. There is no limit to the number of sexual partners that may receive EPT.
Contacts

For more information about STIs and sexual health, contact: stdc@health.ny.gov

For more information about Expedited Partner Therapy, contact: EPT@health.ny.gov

If you have questions about Partner Services, contact: PS@health.ny.gov