



Department
of Health

Expedited Partner Treatment (EPT) New York State

Presentation for Family Planning Providers

Office of Sexual Health and Epidemiology
New York State Department of Health
AIDS Institute

Overview of EPT and Sexually Transmitted Infections

What is Expedited Partner Treatment?

Expedited Partner Treatment* or 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 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)

**EPT is also known as Expedited Partner Therapy*

Sexually Transmitted Infections (STIs)


- 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 for those who have been exposed

Chlamydia, gonorrhea, and trichomoniasis (trich) are STIs caused by bacteria that can enter the body through 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

Infects the genitals (penis or vagina)

Can cause pre-term deliveries and low birth weights



2023 Sexually Transmitted Infection Diagnoses

Highlights for New York State (excluding New York City)

CHLAMYDIA

+ 6.2%

2022: 39,844 | 2023: 42,329

2 consecutive years of increases

8.0%

increase in males

5.3%

increase in females

63.9%

of diagnoses among females

11.9%

increase

in the Capital Region*



GONORRHEA

- 3.6%

2022: 14,061 | 2023: 13,552

3 consecutive years of decreases

3.2%

decrease in males

4.2%

decrease in females

40.5%

of diagnoses among females

12.3%

decrease

in the Capital Region*



EARLY SYPHILIS

- 15.0%

2022: 2,489 | 2023: 2,116

First decrease after 2 consecutive years of increases

17.5%

decrease in males

4.6%

decrease in females

21.8%

of diagnoses among females

29.8%

decrease

in Long Island*



CONGENITAL SYPHILIS

+ 3.1%

2022: 32 | 2023: 33

7 consecutive years of increase

72.7%

of potential congenital syphilis cases were averted in 2023



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 (laboratory confirmed or clinically diagnosed).
 - *The provision of EPT is **not** permissible for persons diagnosed with syphilis in New York State.*
- 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**.

EPT IN THE CLINICAL SETTING

EPT Recommended Treatments:

Chlamydia

Oral doxy 100mg
BID x 7 days or
Azithromycin
1 g orally
in a single dose

Gonorrhea

Where Chlamydia HAS
been excluded

Cefixime 800 mg
orally in a single
dose

Gonorrhea

Where Chlamydia HAS
NOT been excluded

Cefixime 800 mg
AND
Oral doxy BID x 7
days

Trichomoniasis

Metronidazole 2 g
OR
Tinidazole 2 g
orally in a single
dose

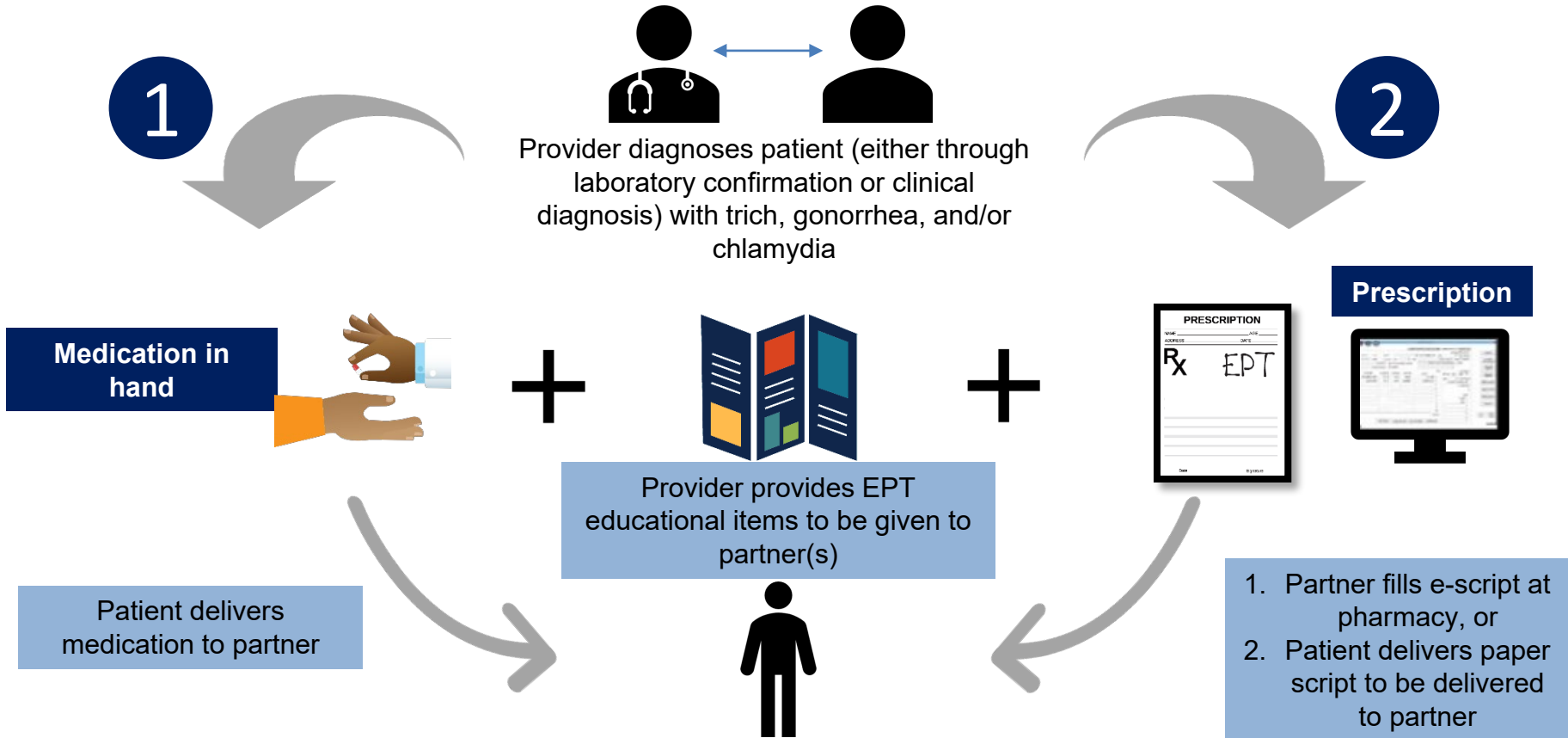


PLEASE NOTE:

- If a patient is coinfectd with gonorrhea and chlamydia, **EPT for gonorrhea will work to cure chlamydia as well**. However, EPT for chlamydia ALONE will not cure both chlamydia and gonorrhea.
- Use a proactive, integrated, **patient-centered approach** to sexual health. Encourage the patient to discuss all sexual activities and experiences. Depending on responses, additional treatment may be needed for the patient and partner(s).
- Offer and provide **three-site testing**, also known as **extragenital testing**, entails appropriate screening of the throat, penis, and rectum.
 - ✓ *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.*

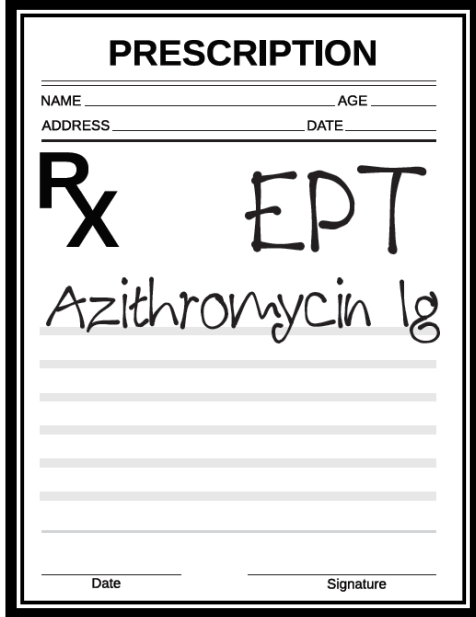
The CDC guide to Taking a Sexual History is available [here](#).

EPT can work in two ways:



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 3/24/2025, renewed annually.



A sample prescription form for EPT (Epidemiology and Prevention Treatment) for chlamydia. The form is titled "PRESCRIPTION" and has fields for NAME, AGE, ADDRESS, and DATE. The prescription is written in the body of the form as "Rx EPT Azithromycin 1g". The form also has fields for Date and Signature at the bottom.

Sample EPT Script (for chlamydia)

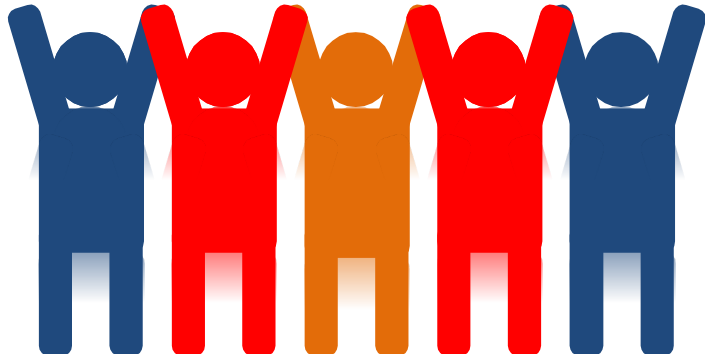
Medication-in-Hand

- 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)

EPT IN THE COMMUNITY

Community Engagement:

The multidisciplinary subcommittee includes:



County health departments

Partner Services staff

Providers

Pharmacists

AIDS Institute

The goal of the EPT Subcommittee is to increase awareness, education and usage of EPT statewide. Since 2017, the EPT Subcommittee has collaborated and brainstormed on:

- EPT Position Statements,
- Branding/materials development,
- Earned and paid media opportunities
- Community partnerships,
- Expert recommendations,
- Technical support,
- Research,
- Community clinical practices, and
- Cross-jurisdictional collaborations.

To join the subcommittee email us at: ept@health.ny.gov

The Issue:

EPT legal since 2009 for chlamydia, updated in 2020 to include gonorrhea and trichomoniasis, yet not being utilized enough.

Focus Group Findings:

- Expedited Partner Therapy (EPT) was non-existent.
- No participant could define or describe what EPT is.
- The word “therapy” is unclear/misleading— evokes thoughts of relationship counseling rather than a clinical intervention.

Practice-Based Name Change, August 2023:

- To Expedited Partner *Treatment*.
- Reduces confusion/better defines EPT to educate patients, partners, and providers about how they can use EPT.
- Allows us to maintain brand consistency (e.g., the EPT acronym).
- Clear communication of the practice critical for promotion and acceptability of EPT.



EPT

**Expedited
Partner
Treatment**



health.ny.gov/ept



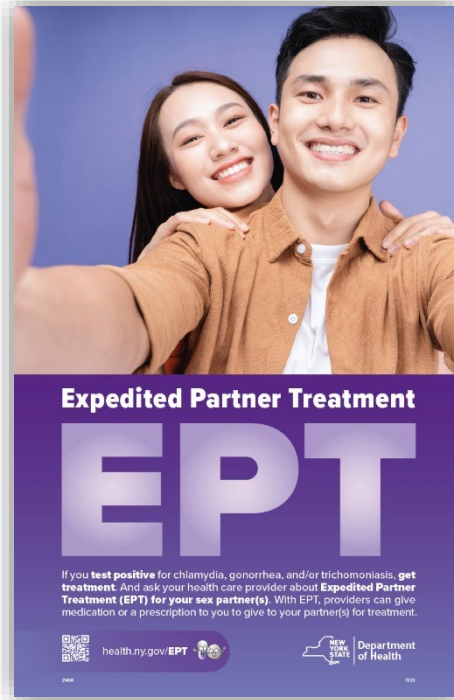
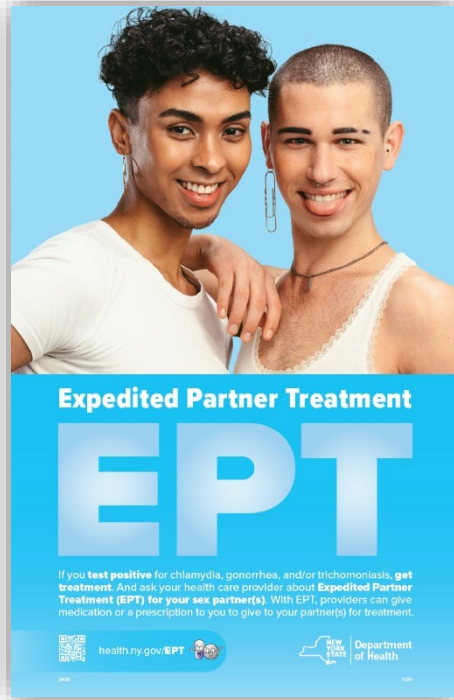
Expedited Partner Treatment Media Campaign 2024

- Focus groups
- Press release
- Social media
- Banner ads
- Search ads
- Dating apps
- Landing page
- Brochures

Expedited Partner Treatment

EPT

Campaign Visuals



- social media
- landing page
- email signatures
- zoom backgrounds
- posters
- branded materials

Campaign Visuals



Expedited Partner Treatment


EPT

If you **test positive** for chlamydia, gonorrhea, and/or trichomoniasis, **get treatment**. And ask your health care provider about **Expedited Partner Treatment (EPT) for your sex partner(s)**. With EPT, providers can give medication or a prescription to you to give to your partner(s) for treatment.

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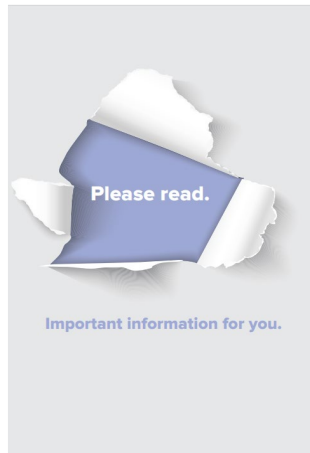
health.ny.gov/EPT

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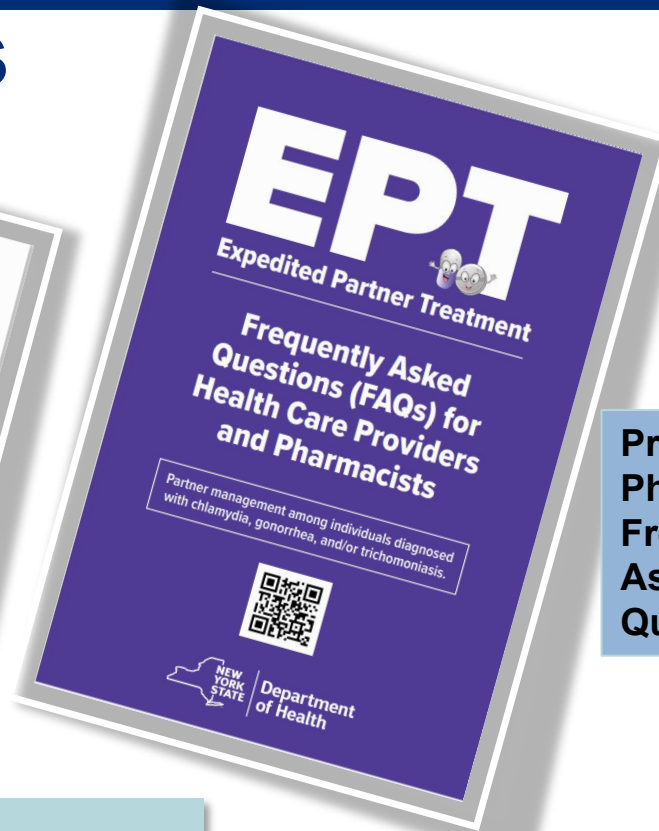
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- social media
- landing page
- email signatures
- zoom backgrounds
- posters
- branded materials

Campaign Brochures



Partner Brochures



Provider and Pharmacy Frequently Asked Questions

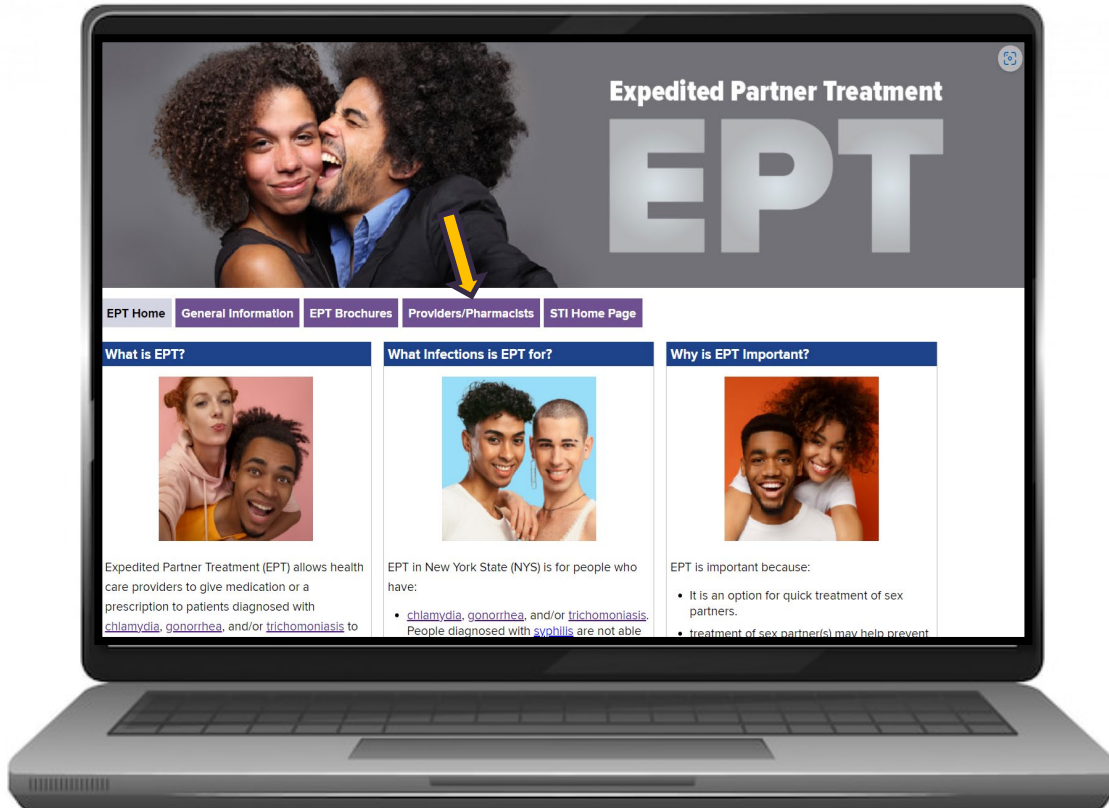
Publication Order Numbers:

EPT FAQs for Health Care Providers and Pharmacists- (21282)
 EPT Partner Brochures- (Chlamydia- 21284) (Gonorrhea- 21288) (Trich- 21286)

https://www.health.ny.gov/forms/doh_publication_order_form.pdf

Landing Page

Health.ny.gov/ept



EPT New York State Department of Health webpage includes:

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

EPT is endorsed by the following:

- American College of Obstetricians and Gynecologists (August 2011)
- Centers for Disease Control and Prevention (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)

FREQUENTLY ASKED QUESTIONS



- Sexually transmitted infections are a significant public health problem, with over **103,000* cases** reported annually in New York State (including New York City).
- 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.

*2022 Annual Surveillance Report



- 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 the New York State Education Law to diagnose and prescribe medication to treat 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: doxycycline 100 mg orally twice a day for 7 days or a single dose of azithromycin 1 g orally (e.g., 250 mg x 4)

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.
- Providers may order prescription pads at: <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 _____ |
| R_x EPT | |
| Doxycycline 100mg PO BID x 7 days [or a single dose azithromycin 1 g orally(e.g. 250 mg x 4)] | |
| Date _____ | Signature _____ |

| PRESCRIPTION | |
|--|-----------------|
| NAME _____ | AGE _____ |
| ADDRESS _____ | DATE _____ |
| R_x EPT | |
| Cefixime 800mg PO x1 and Doxycycline 100mg PO BID x 7 days | |
| Date _____ | Signature _____ |

| PRESCRIPTION | |
|---|-----------------|
| NAME _____ | AGE _____ |
| ADDRESS _____ | DATE _____ |
| R_x EPT | |
| Metronidazole 2g PO x1 _____ _____ _____ _____ | |
| Date _____ | Signature _____ |



- 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.



10/16/2024

- If the patient's sexual partner(s) are pregnant or suspect possible pregnancy, some EPT medications may not be recommended.
- The partner(s) should seek medical care as soon as possible.
- Please review current CDC STD Treatment Guidelines for more information:
<https://www.cdc.gov/std/treatment-guidelines/default.htm>

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Contact

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