

# Clinical Cases

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New York State  
Family Planning  
Training Center  
[nysfptraining.org](http://nysfptraining.org)

# Speakers

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# Learning Objectives

1. Learners will be able to evaluate and diagnose common sexual and reproductive health conditions (e.g., sexually transmitted infections, menstrual disorders, and contraceptive needs) and develop evidence-based management plans.
  
1. Learners will discuss key components to patient-centered care and addressing and addressing the sexual and reproductive health concerns of patients.

**Images of genitourinary system  
will be shared during this  
session**



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# Case 1

- 23 yo cis woman
- Desires routine STI testing
- Asymptomatic

# SRH History

- Cis male partners only
- 1 new partner in last month
- Vaginal and oral sex
- Happy with COCs for BCM
- Last STI testing about 1 year ago

# Labs

- GC/CT NAAT - vaginal, pharyngeal
- HIV ab/ag test
- Syphilis RPR

# Lab Results

- GC/CT NAAT: vaginal, pharyngeal
  - Vaginal: + CT, neg GC
  - Pharyngeal: neg/neg
- HIV ab/ag test: non-reactive
- Syphilis RPR: non-reactive



# Diagnosis

- Vaginal CT
  - Treat with doxycycline 100 mg by mouth twice daily x 7 days
  - Partner treatment offered, pt accepted
  - Condoms offered
- RTC in 3 months for re-screening

# 2 months later

- Client returns to clinic with vaginal symptoms
- Cc: yellowish, watery vag d/c x 2 weeks, occasional spotting
- History
  - Same male partner had at last visit 2 mos ago; partner is asx, and reports took EPT from prior visit
  - No new partners, no know exposures to STIs, HIV
  - Reports vaginal and oral sex
- Happy with COCs for BCM, reports no missed pills

# 2 months later - Exam

- External genital tissues intact
- Speculum exam: Yellowish/grey frothy vaginal dc
- Bimanual exam WNL
- No abd pain on exam
- Vitals WNL

# 2 months later - Labs

- GC/CT NAAT: vaginal, pharyngeal
- Wet prep in clinic
  - + mobile trich, + clue cells, +WBCs, pH 6, +whiff test
- Treat for TV with metronidazole 500 mg by mouth twice daily x 7 days
- Offer partner treatment of metronidazole 2 grams by mouth x 1, pt accepts
- Condoms offered
- GC/CT NAAT results as negative at both sites

# 1 month later

- Client returns to clinic with c/o painful vulvar sores x 1 day
- History
  - Same male partner had at last visit 1 mos ago; partner is asx, and reports took EPT from prior visit
  - No new partners, no know exposures to STIs, HIV
  - Reports vaginal and oral sex
- Happy with COCs for BCM, reports no missed pills

# 1 month later - Exam

- Multiple ulcerative sores to bilateral labia minora, tender with exam
- Bilateral inguinal lymphadenopathy
- Pt unable to tolerate speculum or bimanual exam

# 1 month later - Labs

- HSV NAAT collected
- GC/CT urine and pharyngeal collected (urine due to vulvar pain)
- Results:
  - + HSV-2
  - + GC urine

# What concerns do you have with this situation?



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# 1 month later - Treatment and follow-up

- Valacyclovir 500 mg by mouth twice daily x 10 days
- Ceftriaxone 500 mg IM X 1 given in clinic
- No sex x 10 days
- Recommend partner RTC for testing and treatment (GC)
- Conversation with patient about safety, sexual coercion, screened for human trafficking

# Case 2

- 26 yo cis-women
- Cc: irregular menses x 2 months
- Concerned about pregnancy and STI exposure
- Denies vaginal s/sx

# Case 2: History

- Reports 1 cisgender male partner x 8 mos, no other partners in last year
- Unsure if partner has additional partners
- Uses condoms and EC for contraception
- Reports vaginal and oral sex with partner
- LMP: 2 months ago, has had some spotting occasionally since then

# Case 2: Labs

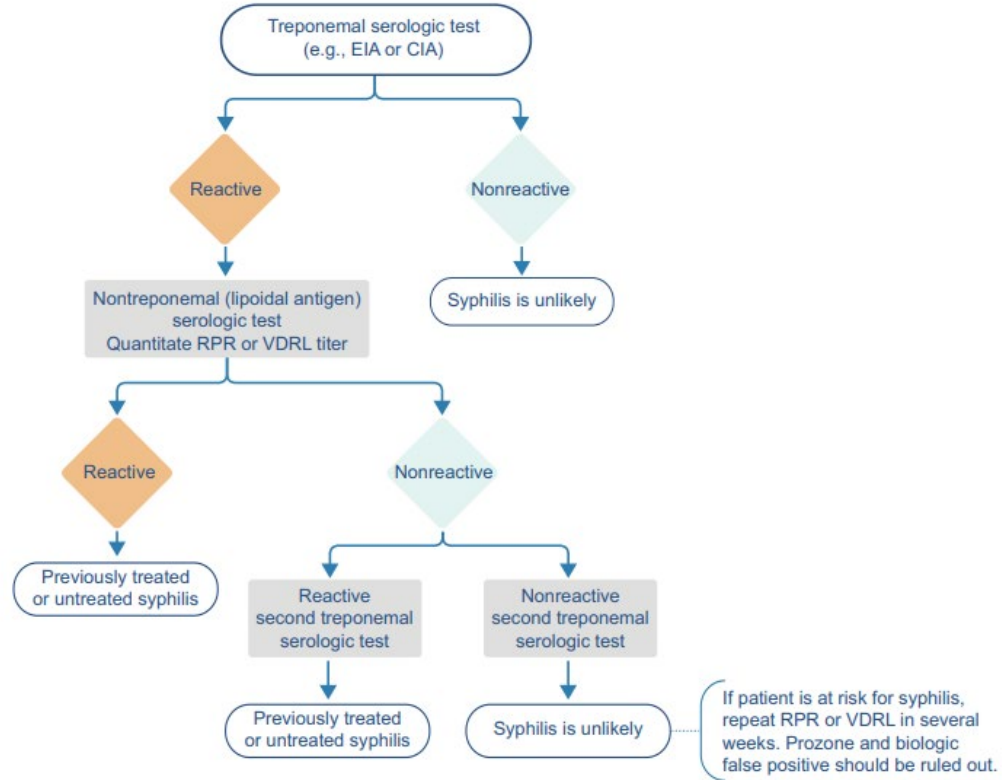
- Urine hCG
- GC/CT NAAT - vaginal, pharyngeal
- Rapid HIV
- Syphilis EIA

# Case 2: Lab results

- Urine hCG - **+positive, EGA 6 weeks**
- GC/CT NAAT (vaginal, pharyngeal) - **both sites negative**
- Rapid HIV - **non-reactive**
- Syphilis EIA - **positive**

# Case 2: Lab results

- Syphilis EIA - positive
- RPR - negative
- TPPA - positive



# What other data do you need?

Which of the following information could change your management of this case?

- Physical exam (skin, neuro, GU)
- Syphilis lab history
- Penicillin allergy history
- Partner's history, exam, syphilis serology
- HIV test results

# What other data to you need?

Which of the following information could change your management of this case?

- **Physical exam (skin, neuro, GU)**
- **Syphilis lab history**
- **Penicillin allergy history**
- **Partner's history, exam, syphilis serology**
- **HIV test results**



# Case 2: Assessment and plan

- 26 yo patient
  - 6 weeks gestation
  - 1 partner x 8 months
  - Syphilis EIA +pos; RPR neg; TPPA +pos
  - No history of syphilis or syphilis testing and normal exam
  - Partner has normal evaluation and negative syphilis EIA

# Case 2: Treatment

- 26 yo patient, no medication allergies
  - 6 weeks gestation
  - 1 partner x 8 months
  - Syphilis EIA +pos; RPR neg; TPPA +pos
  - No history of syphilis or syphilis testing and normal exam
- Partner has normal evaluation and negative syphilis EIA

## What's your treatment plan?

- A. Benzathine PCN G 2.4 mu IM x 1
- B. Benzathine PCN G 2.4 mu IM every 7 days x 3 doses
- C. No treatment and retest in 1 month

# Case 2: Treatment

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## What's your treatment plan?

A. Benzathine PCN G 2.4 mu IM x 1

**B. Benzathine PCN G 2.4 mu IM every 7 days x 3 doses**

C. No treatment and retest in 1 month

# Case 2: Alternate scenario

- 26 yo patient, no medication allergies
  - 6 weeks gestation
  - 1 partner x 8 months
  - Syphilis EIA +pos; RPR neg; TPPA +pos
  - **History of neg syphilis EIA 9 mos ago**
- **Partner was diagnosed and treated for secondary syphilis 1 mos ago**

## What's your treatment plan in this scenario?

- A. Benzathine PCN G 2.4 mu IM x 1
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**What's your treatment plan in this scenario?**

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C. No treatment and retest in 1 month

# Follow-up

What other services does this patient need?



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# Quick Take - 1



# Quick Take - 2





# Quick Take3 - 3



# Vision for future clinical case sessions

- Connect with each other
- Utilize the expertise across the network
- Low lift for you - NYS FP TC will organize/draft slides
- We want to hear your stories and situations!



# What knowledge areas would you like to cover in future sessions?

1. Tension between person centered counseling and effective BCMs
2. Antibiotic resistant STIs
3. Syphilis
4. Syphilis management in early pregnancy/Syphilis treatment at pregnancy detection
5. Managing recurrent vaginal infections (BV, Trich, yeast)
6. Expedited partner treatment (EPT)
7. DoxyPEP
8. PrEP
9. Abnormal uterine bleeding
10. Fibroids
11. Something else - write in the chat!

# What skill areas would you like to cover in future sessions?

- Tips and tricks for LARC insertions
- Endometrial biopsies - when to use?
- Vulvar biopsies
- Anoscopy
- Male genital exam skills
- Other - please enter in chat!

# Would you be willing to share a case at a future session?

Yes

No



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**How could we make this a better session? What is a value add for you?**



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# Q & A



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