

**FLORIDA CONFIDENTIAL REPORT OF**

**SEXUALLY TRANSMITTED DISEASES**

Florida Department of Health

1255 Brice Blvd.

Bartow, FL 33830

**STD Surveillance**

**Fax: 863-519-8737**

Wendy Rodriguez:

863-578-2201

Patient Name:

DOB:

SS#:

Address:

Phone:

🞎 Male

🞎 Female 🞎 Not Pregnant 🞎 Pregnant

Pregnancy due date

**RACE:** 🞎WHITE 🞎BLACK 🞎HISP 🞎NON-HISP 🞎OTHER 🞎 AM INDIAN/ALASKAN 🞎ASIAN/PAC ISLANDER

All DISEASES LISTED BELOW MUST BE REPORTED TO DOH-POLK/STD BY END OF NEXT BUSINESS DAY

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| CHLAMYDIA | GONORRHEA | SYPHILIS | OTHER |
| \_\_\_ Uncomplicated\_\_\_ Opthalmia\_\_\_ Pelvic Inflammatory Disease (PID)\_\_\_ PneumoniaVISIT OUR WEBSITE <http://www.mypolkhealth.org>FOR AN ELECTRONIC COPY OF OUR REPORTING FORM | \_\_\_ Uncomplicated\_\_\_ Disseminated Gonococcal\_\_\_ Opthalmia\_\_\_ Oral/Pharyngeal\_\_\_ Other resistant strain\_\_\_ Pelvic Inflammatory Disease \_\_\_ Penicillinase-Producing Neisseria Gonorrhea (PPNG)\_\_\_ Rectal | \_\_\_RPR 1:\_\_\_\_**Type of Confirmatory Test**\_\_\_ TP-PA positive\_\_\_ FTA-ABS positive\_\_\_ IgG-EIA positive \_\_\_ MHA-TP**Diagnosis**\_\_\_ Primary\_\_\_ Secondary\_\_\_ Early Latent (< l yr)\_\_\_ Late Latent\_\_\_ Tertiary \_\_\_ Congenital | \_\_\_Chancroid\_\_\_Granuloma Inguinal\_\_\_**Herpes Simplex****In infants up to 60 days old with disseminated infection with involvement of liver, encephalitis and infections limited to skin, eyes and mouth; anogenital in children < 12 yrs. old.**\_\_\_**Human Papillomavirus****HPV associated with laryngeal papillomas or recurrent respiratory papillomatosis in children < 6 yrs old; anogenital in children < 12 yrs old.**\_\_\_Lymphogranuloma Venereum\_\_\_Other (specify)  |
| Collection date | Collection date | Collection date | Collection date |
| Reporting laboratory | Reporting laboratory | Reporting laboratory | Reporting laboratory |
| **Treatment date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_🟋 **CDC Recommended Regimen**\_\_\_**Azithromycin 1 gm**🟋\_\_\_**Doxycycline 100 mg BID x 7 Days**🟋\_\_\_Levofloxacin 500 mg x 7 Days\_\_\_Ofloxacin 300 mg BID x 7 Days\_\_\_Amoxicillin 500 mg TID x 7 Days\_\_\_Erythromycin base 500 QID x 7 Days***IF PREGNANT*****\_\_\_Azithromycin 1 gm**🟋\_\_\_Erythromycin base 500 QID x 7 Days\_\_\_Amoxicillin 500 TID x 7 Days**Any tx used other than recommended treatment will need a TOC 3 weeks after completion of therapy. TOC less than 3 wks could yield false positive results.****PCN # 428,** 11/2016 | **Treatment date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_🟋 **CDC Recommended Regimen**Uncomplicated gonococcal infections of the cervix, urethra, rectum, pharynx, and pregnant females:**\_\_\_Ceftriaxone 250 mg IM**  **plus****\_\_\_AZ 1 gm (preferred**) or \_\_\_Doxy 100 mg BID x 7 days *Alternative regimens if**Ceftriaxone unavailable:*\_\_\_Cefixime 400 mg ***PLUS*** AZ 1 gm (preferred) **or** \_\_\_Doxy 100 mg BID x 7 days**or**\_\_\_ AZ 2 gm in a single oral dose***AND***  TOC in 3-4 weeks | **Treatment dates:**2.4 BIC #1\_\_\_\_\_\_\_\_\_\_\_\_2.4 BIC #2\_\_\_\_\_\_\_\_\_\_\_\_2.4 BIC #3\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Doxycycline 100 BID x 14 days **Date**\_\_\_\_\_\_\_\_\_\_\_\_Doxycycline 100 QID x 28 days **Date**\_\_\_\_\_\_\_\_\_ | c_lightgreen_zoomREPORTING:**STD Surveillance****863-578-2201****Fax: 863-519-8737****HIV Surveillance****863-578-2250****Fax:863-519-8737** **Hepatitis Surveillance****863-578-2256** **Fax: 863-519-8639** |

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| **Practice Name:** |  |  |  |
| **Address:** |  |  |  |
| **Area Code & Phone #:** |  |  |  |