

**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)  \_\_\_ Pneumonia  VISIT 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 #:** | | |  |  |  |