

Name: DOB: Gender: Facility: Provider:

Panel: STI
Sample ID:
Collection Date:
Reported Date:

DETECTED PATHOGENS

Chlamydia trachomatis Detected - High >10° copies/mL | Pathogenic organism; sexually transmitted infection.

DETECTED RESISTANCE GENES

sul1 Detected

Confers resistance to TMP/SMX. Expressed only by gram-negative organisms.

PHARMD TREATMENT CONSIDERATIONS

Regimens based on organisms most likely to be pathogenic. Microbial load considered when available.

Medication	Dose/Duration	Renal Adjustment	Considerations
Doxycycline (Vibramycin)	100 mg PO BID x 7 d	None	Coverage for: Chlamydia trachomatis • \$8-19 for 7 day course (coupon pricing) • Take 2 hrs before or 6 hrs after taking antacids, calcium supplements, magnesium, or iron containing products
OR			
Azithromycin (Zithromax)	1 g PO x 1 dose	None	Coverage for: Chlamydia trachomatis • \$9-14 for treatment course (coupon pricing) • May increase risk for QTc interval prolongation
OR			
Levofloxacin (Levaquin)	500 mg PO daily x 7 d	CrCl < 50 mL/min: 500 mg PO every other day	Coverage for: Chlamydia trachomatis • \$10-23 for 7 day course (coupon pricing) • FQ class-wide warnings include: CNS toxicity, peripheral neuropathy, myasthenia gravis, aortic dissection, tendinopathy, QT interval prolongation, C.difficile colitis

Reviewed by: Max Dudenkov, PharmD Date: 8/13/2024 (PS57804)

The following regimen (s) are based on generally accepted and peer-reviewed antimicrobial activity of specific agents against defected pathogens, resistance genes, and presumed diagnosis based on specimen source and resulting pathogens. Antimicrobial activity and efficacy of agents for treatment of detected pathogens is not guaranteed. Medication selection, dosages, durations, and considerations are in congruence with clinical practice guidelines (IDSA, CDC, AAP, etc), when guidance is available, Additional patient factors including but not limited to HPI, comorbidities, concomilant medications, etc. should be carefully evaluated in conjunction with listed freatment considerations. Clinica correlation and appropriate medical judgment is warranted prior to prescribing a course of treatment.



Have a question about a report? Scan the QR code to chat with a pharmacist or call 904-618-3554.



Disclaimer: Treatment considerations and therapeutic guidance is generated by ChoicePharmD, LLC and is not affiliated with the testing laboratory.



STI Panel

Collection: Urine vacutainer

Signs/Symptoms

Urethritis Epididymitis Chlamydia Gonorrhea Syphilis

Vaginal candidiasis Genital herpes Genital warts M. genitalium Trichomoniasis Chancroid

Diagnoses

R10.2 N76.0 R30.0 N89.8 R35.0 Z20.89 R82.90 Z79.899 Z11.3 Z20.2 Z72.51 Z72.89 F11.20 A64 F10.20

Common ICD-10 codes

Tested Pathogens:

Core Pathogens

Bacterial:

Dysuria

Pruritus

Pelvic pain

Vaginal discharge/odor

Penile discharge

Genital sores

Chlamydia trachomatis
Haemophilus ducreyi
Mycoplasma genitalium
Mycoplasma hominis
Neisseria gonorrhoeae
Treponema pallidum
Trichomonas vaginalis
Ureaplasma urealyticum

Viral:

Herpes simplex virus (HSV1) Herpes simplex virus (HSV2)

Additional Pathogens

Bacterial:

Gardnerella vaginalis Ureaplasma parvum

Fungal:

Candida Albicans Candida auris Candida Glabrata Candida Tropicalis

Viral:

Cytomegalovirus

HPV 16 HPV 18

Human herpesvirus 4 (EBV) Human herpesvirus 6

Defined as pathogens most commonly detected and most likely to be clinically significant for panel type.

Medical literature (IDSA, Johns Hopkins Abx guide, CDC) along with clinical discretion was utilized to determine core pathogen lists.