

the United States, yet most cases are still undiagnosed (Torrone, Papp, Weinstock, et al, 2014). In women, chlamydial infections are difficult to diagnose; the symptoms are nonspecific and the organism is expensive to culture. These infections are highly destructive, causing PID, increased risk of ectopic pregnancy, and tubal factor infertility. Manifestations, treatment, and nursing considerations of *C. trachomatis* are listed in Table 16-2.

TABLE 16-2
Selected Sexually Transmitted Infections*

Manifestations	Therapy	Nursing Care Management
Gonorrhea (<i>Neisseria gonorrhoeae</i>)		
<p><i>Male:</i> Urethritis (dysuria with profuse yellow discharge, frequency, urgency, nocturia) or pharyngitis</p> <p><i>Female:</i> Cervicitis (postpubertal); may be associated with discharge, dysuria, dyspareunia, vulvovaginitis (prepubertal), or pharyngitis</p>	<p>For uncomplicated urogenital and anorectal gonorrhea:</p> <p>Single intramuscular dose of ceftriaxone <i>plus</i> Single oral dose of azithromycin</p>	<p>Instruct patient to abstain from sexual intercourse for 7 days after single-dose treatment.</p> <p>Test and treat for other STIs.</p> <p>Find and treat sexual contacts.</p> <p>Educate young people regarding facts of the disease and its spread.</p> <p>Encourage use of condoms in sexually active young people.</p>
Chlamydia (<i>Chlamydia trachomatis</i>)		
<p><i>Male:</i> Meatal erythema, tenderness, itching, dysuria, urethral discharge; or no symptoms</p> <p><i>Female:</i> Mucopurulent cervical exudate with erythema, edema, congestion; or no symptoms</p>	<p>Single oral dose of azithromycin <i>or</i> 7 days of oral doxycycline administered twice daily</p> <p>If pregnant—azithromycin</p>	<p>Same as above.</p> <p>Rescreen pregnant women 3 weeks after treatment.</p> <p>Repeat infection elevates risk for PID.</p>
Syphilis (<i>Treponema pallidum</i>)		
<p><i>Primary stage:</i> Chancre, a hard, painless, red, sharply defined lesion with indurated base, raised border, eroded surface, and scanty yellow discharge; usually located on the penis, vulva, or cervix</p> <p><i>Secondary stage:</i> Systemic influenza-like symptoms; lymphadenopathy; rash; usually appears few weeks to months after healing of chancre</p>	<p>Single intramuscular dose of benzathine penicillin G</p>	<p>Instruct patients to use condoms to avoid spread or infection with other organisms.</p> <p>Identify sexual contacts of infected person(s).</p> <p>Test women in pregnancy and prior to delivery (VDRL and RPR).</p> <p>Evaluate newborn for presence of disease if mother is untreated.</p>