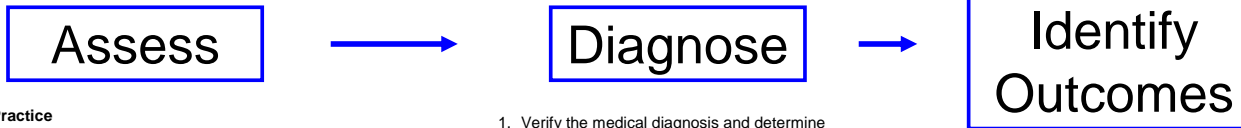


Sexually Transmitted Disease (STD)



- Pertinent Healthy People 2010 Leading Health Indicators:**
- Responsible Sexual Behavior
 - Mental Health
 - Injury and Violence
 - Access to Health Care

Nursing Practice

1. Review referral when received from Public Health Nursing Supervisor (PHNS) in Casewatch @ and in the Nursing Practice Management System (NPMS). Document Date/Time/Signature on referral when received from PHNS.
2. Analyze report for:
 - a. Type of disease
 - b. Site of infection
 - c. Laboratory data
 - d. Age of client (If case is under 14 yrs of age a child abuse report should be completed in accordance with the Child Sexual Assault Reporting requirements)
 - e. Specific treatment
3. Conduct record search with STD program, if necessary.
4. Assess case/contact(s) per PHN assessment criteria

Diagnose

1. Verify the medical diagnosis and determine priority of action:
 - a. Review Section/page D5 of the Public Health Nursing Practice Manual for the priority per the STD program or determine priority of action in collaboration with the PHNS as needed. Document priority selected.
2. Consider the client's/contacts' need for nursing interventions based on the medical diagnosis.
3. Consider the client's/contacts' need for nursing intervention to promote health, facilitate well being, foster healing, alleviate suffering, and improve quality of life.

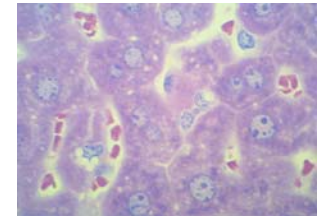
Identify Outcomes

Outcome Objective:

1. Prevent the spread of sexually transmitted diseases in Los Angeles County.
2. Case and contacts are free of STD.

Nursing Practice:

1. Determine & document specific health needs/goals for client/contact situation:
 - a. Determine appropriate timeline for attainment of the outcomes according to the assessment and diagnoses.
 - b. Ensure the client's treatment is completed and partner(s) is referred for follow up as indicated.



Other References

- Health Education Materials
- Public Health Nursing Practice Manual
- Sexually Transmitted Diseases Program



Plan for the following Public Health Nursing Interventions:

1. Disease and Health Event Investigation

- a. Review:
 - Symptoms & Incubation period
 - Source
 - Period of communicability
 - Specific treatment
 - Control measures
 - Sexually Transmitted Disease Procedure Manual
- b. Obtain STD educational and resource materials.
- c. Analyze actual/potential for spread of disease.
- d. Determine psychological, socioeconomic, and cultural influences and attitudes.
- e. Determine risk factors for infection/re-infection.
- f. Client visit:
 - Provide identification and explain the purpose of the visit to client
 - Secure private setting for interview
 - Ensure client confidentiality
 - Elicit epidemiological data

2. Health Teaching/Counseling:

- a. Determine client's understanding of the disease, transmission, treatment and prevention.
- b. Educate client regarding the STD using culturally sensitive and age appropriate information (verbal and written).
- c. Provide risk reduction education and impact on fetus, if applicable.

Suspected Child Abuse Cases:

- a. Explain the importance of medical evaluation of household members to the parent(s)/guardian(s), as indicated.
 - b. Explain the involvement of law enforcement and the Department of Children and Family Services (DCFS) in cases of suspected child abuse, if appropriate, using professional judgment.
- 3. Case Finding:**
- a. Interview client for contact(s).
 - b. Initiate appropriate form(s). Document on contact form:
 - Date of initial contact
 - Epidemiological data
 - Potential for spread of disease and re-infection
 - Education/counseling provided
 - Plan of action for case and susceptible contacts
 - c. Maintain a desk card on child abuse cases and those cases requiring more than one month of follow-up.

4. Referral and Follow-up:

- a. Complete PHN Assessment and make referrals as needed.
- b. Refer client/contact(s) for testing and treatment, if applicable.

5. Other:

- a. Plan interventions needed to assist case/contact(s) with concerns identified in the PHN Assessment.

1. PHN interventions are implemented as stated in the plan.
2. Document all consultations, collaborations, interventions, and client encounters in Casewatch @ field notes or progress notes, and in the NPMS.

1. Evaluate effectiveness of interventions on the health of the client/contact(s); e.g. document client understands the disease process and prevention of transmission.
2. Determine and document client/contact(s) adherence:
 - a. Medical evaluation is obtained.
 - b. Treatment is completed.
3. Determine action for non-adherent client/contact(s):
 - a. Consult with PHNS.
4. Document in Casewatch @:
 - a. Disposition and close case within 14 days of receipt of referral or within timeframe agreed upon in consultation with PHNS.
5. Document in the NPMS:
 - a. File a copy of the PHN Assessment per the PHN Assessment Form instructions.
6. Evaluate client satisfaction:
 - a. Give client satisfaction form to the client for completion and submission in a pre-addressed, stamped envelope.