Discussion: Sexually Transmitted Infections

The Centers for Disease Control and Prevention estimates that there are 19 million new cases of sexually transmitted infections every year in the United States (CDC, 2010b). STIs may present serious health implications for infected patients—especially for those who are unaware of their health condition. Studies show that women are not only at greater risk of contracting these infections, but they also tend to have more severe health problems resulting from infections than men (U.S. Department of Health and Human Services, 2009b). As an advanced practice nurse, you must educate female patients and emphasize the importance of prevention and STI testing for all women regardless of marital status, race, ethnicity, or socioeconomic status. For this Discussion, consider STI education strategies for the three patients in the following case studies:

Case Study 1:

A 19-year-old Asian American female comes into the clinic for a well-woman checkup. She states that about three weeks ago she had a non-tender sore on her labia that resolved without treatment. Her gynecologic exam is normal but she has maculopapular lesions on her trunk, neck, palms, and soles of her feet. The remainder of her exam was unremarkable.

Case Study 2:

A 31-year-old African American female is concerned about a white vaginal discharge. She has self-treated in the past with over-the-counter vaginal creams with some success. She has had no relief thus far for this episode.

Case Study 3:

A 21-year-old nulligravida comes to see you concerned about vague lower abdominal pain for two days associated with a yellowish, nonodorous, vaginal discharge. Past history reveals regular menstrual periods and no previous surgeries or significant medical problems. Her last menstrual period was normal and ended two days ago. She had a similar episode about eight months ago for which she did not seek care because of lack of health insurance. She is currently sexually active with one partner and has had two partners in the past year. She is not using any type of contraception. On physical exam you note a temperature of 38º C, a regular pulse of 100, and a BP of 110/65. Her abdomen is diffusely tender in both lower quadrants. Pelvic exam reveals a yellowish cervical discharge with cervical motion tenderness and a tender fullness in both adnexa.

**To prepare:**

* Review Chapter 20 of the Schuiling and Likis text and the Centers for Disease Control and Prevention article in this week’s Learning Resources.
* Review and select one of the three provided case studies. Reflect on the patient information.
* Consider a differential diagnosis for the patient in the case study you selected. Think about the most likely diagnosis for the patient.
* Think about a treatment and management plan for the patient. Be sure to consider appropriate dosages for any recommended pharmacologic and/or nonpharmacologic treatments.
* Consider strategies for educating patients on the treatment and management of the sexually transmitted infection you identified as your primary diagnosis.

By Day 3

**Post** an explanation of the differential diagnosis for the patient in the case study you selected. Provide a minimum of three possible diagnoses, and list them from highest priority to lowest priority. Explain which is the most likely diagnosis for the patient and why. Then, explain a treatment and management plan for the patient, including appropriate dosages for any recommended treatments. Finally, explain strategies for educating patients on the sexually transmitted infection.