

# LOCAL HEALTH DEPARTMENT DISEASE INVESTIGATION STEPS

NC REPORTABLE DISEASE/CONDITION		INFECTIOUS AGENT (S)
<b>NON-GONOCOCCAL URETHRITIS (NGU)</b>		<p style="text-align: center;"><b>CLINICAL DIAGNOSIS BASED ON EXCLUSION OF GONORRHEA</b></p> <p><i>POTENTIAL AGENTS INCLUDE : C. TRACHOMATIS, UREAPLASMA UREALYTICUM, MYCOPLASMA GENITALIUM OR TRICHOMONIASIS)</i></p>
<b>PREPARING FOR INVESTIGATION</b>		
<b>KNOW THE DISEASE/CONDITION</b>	<ul style="list-style-type: none"> <li>• See the case definition for NGU in the CD Manual.</li> <li>• Refer to CDC MMWR: Sexually Transmitted Diseases Treatment Guidelines, 2006. August 4, 2006; 55 (RR11); pp 35 - 37. Available from: <a href="http://www.cdc.gov/mmwr/PDF/rr/rr5511.pdf">http://www.cdc.gov/mmwr/PDF/rr/rr5511.pdf</a></li> <li>• Refer to the Sexually Transmitted Disease Assessment, Prevention and Treatment Protocols, July 2008. Available at: <a href="http://www.epi.state.nc.us/epi/hiv/stdmanual/toc.html">http://www.epi.state.nc.us/epi/hiv/stdmanual/toc.html</a></li> <li>• Study APHA Control of Communicable Diseases Manual, 19<sup>th</sup> ed., page 119 and 262 (second paragraph).</li> <li>• Print and review reporting forms:</li> </ul> <p style="text-align: right;"><i>Part 1: Confidential Disease Report (DHHS 2124)</i></p>	
<b>CONDUCTING INVESTIGATION</b>		
<b>COLLECT CLINICAL INFORMATION</b>	<ul style="list-style-type: none"> <li>• Verify completeness of form DHHS 2124. If data is incomplete, contact provider for missing information.</li> </ul>	
<b>REVIEW LABORATORY INFORMATION</b>	<ul style="list-style-type: none"> <li>• Review laboratory report(s) specific to this disease.</li> <li>• Evaluate laboratory results to determine if requirements of the case definition are satisfied.</li> </ul>	
<b>APPLY THE CASE DEFINITION</b>	<ul style="list-style-type: none"> <li>• Use the case definition to determine if clinical and laboratory findings meet the case definition criteria.</li> </ul>	
<b>IMPLEMENTING CONTROL MEASURES</b>		
<b>ATTEMPT TO IDENTIFY SOURCE OF EXPOSURE</b>	<p><i>IN A LOCAL HEALTH DEPARTMENT SETTING:</i></p> <ul style="list-style-type: none"> <li>• Patient record should reflect a risk assessment which includes documentation of number of sexual contacts who will need testing and treatment.</li> <li>• Patient record should reflect documentation that the provider of treatment issued notification cards to patient to share with all sex partners from the last 60 days.</li> <li>• <b>Note: It is assumed that the private provider has discussed partner referral with the patient.</b></li> </ul>	

<p><b>IMPLEMENT CONTROL MEASURES TO PREVENT ADDITIONAL EXPOSURES</b></p>	<ul style="list-style-type: none"> <li>• Refer to the Sexually Transmitted Disease Assessment, Prevention, and Treatment Protocols, July 2008, <i>“Management Protocols: Non-Gonococcal Urethritis (NGU)” pp 1- 2.</i></li> <li>• Refer to CDC MMWR: Sexually Transmitted Diseases Treatment Guidelines, 2006. August 4, 2006; 55 (RR11); page 36.</li> <li>• See 10A NCAC 41A .0204 (b) 1-3.</li> <li>• <b>It is assumed that the private provider has discussed control measures with the patient</b></li> </ul> <p><i>IN A LOCAL HEALTH DEPARTMENT SETTING:</i></p> <ul style="list-style-type: none"> <li>• Assure there is documentation in the patient record of counseling by the treating provider regarding prevention of further transmission or re-exposure (i.e. condom use, partner notification, behavior modification).</li> </ul>
<p><b>REPORTING INVESTIGATION</b></p>	
<p><b>REPORT TO NC COMMUNICABLE DISEASE BRANCH (CD)</b></p>	<ul style="list-style-type: none"> <li>• Enter the Part 1 Communicable Disease Report into NC EDSS as a new event, or update the existing event if already entered.</li> <li>• Assign event to State Disease Registrar when case investigation complete.</li> </ul>
<p><b>CASE FINDING</b></p>	<ul style="list-style-type: none"> <li>• Refer symptomatic/asymptomatic contacts to healthcare provider/health department for evaluation and treatment.</li> </ul>
<p><b>SPECIAL CONSIDERATIONS</b></p>	
<p><b>STATE LABORATORY OF PUBLIC HEALTH (SLPH) TESTING</b></p>	<ul style="list-style-type: none"> <li>• The SLPH will perform follow-up testing for gonorrhea if there is evidence of treatment failure or drug resistance.</li> </ul>
<p><b>PERSONAL PROTECTIVE MEASURES</b></p>	<ul style="list-style-type: none"> <li>• See Control Measures above.</li> </ul>
<p><b>RISK COMMUNICATION</b></p>	<ul style="list-style-type: none"> <li>• Educate the patient on the risks associated with NGU (i.e. PID, infertility, epididymitis, exposure to HIV).</li> </ul>
<p><b>NON-GONOCOCCAL = <u>NOT</u> GONORRHEA</b></p>	<ul style="list-style-type: none"> <li>• A patient cannot have gonorrhea and nongonococcal urethritis (NGU) as a dual diagnosis. NGU is diagnosed only when gonorrhea is ruled out as the cause of urethritis symptoms. Thus <b>NGU should not be reported unless the test for gonorrhea is negative.</b></li> </ul>