Addendum

| Summary of Selected CDC STI Treatment Guidelines, 2021 | | |
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| Disease | Recommended Regimen | Alternative Regimen |
| Bacterial vaginosis | Metronidazole 500 mg PO BID for 7 days <i>Or</i> Metronidazole gel 0.75%, one 5 gm applicator intravaginally, QD for 5 days <i>Or</i> Clindamycin cream 2%, one 5 gm applicator intravaginally, at bedtime for 7 days | Clindamycin 300 mg PO BID for 7 days <i>Or</i> Clindamycin ovules 100 mg intravaginally at bedtime for 3 days <i>Or</i> Secnidazole 2 gm PO for 1 dose <i>Or</i> Tinidazole 2 gm PO QD for 2 days <i>Or</i> Tinidazole 1 gm PO QD for 5 days |
| Chlamydial Infections (Adults and adolescents) | Doxycycline 100 mg PO BID for 7 days | Azithromycin 1 gm PO for 1 dose <i>Or</i> Levofloxacin 500 mg PO QD for 7 days |
| Trichomoniasis | | |
| Women | Metronidazole 500 mg PO BID for 7 days | Tinidazole 2 gm PO in a single dose |
| Men | Metronidazole 2 gm PO in a single dose | Tinidazole 2 gm PO in a single dose |
| Acute Epididymitis | | |
| Most likely caused by sexually transmitted chlamydia and gonorrhea | Ceftriaxone 500 mg IM in a single dose PLUS doxycycline 100 mg PO BID for 10 days | No alternative mentioned |
| Most likely caused by chlamydia, gonorrhea, or enteric organisms (insertive partner in anal sex) | Ceftriaxone 500 mg IM in a single dose PLUS levofloxacin 500 mg PO QD for 10 days | No alternative mentioned |
| Most likely caused by enteric organisms only | Levofloxacin 500 mg PO QD for 10 days | No alternative mentioned |

Source: CDC. Sexually transmitted infections treatment guidelines, 2021, available at https://www.cdc.gov/std/treatment-guidelines/default.htm

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