

FORM-SPECIFIC GUIDANCE

MHSU 6781-PROVIDER REPORT FORM FOR SEXUALLY TRANSMITTED AND BLOOD-BORNE INFECTIONS (STBBI) AND STI TREATMENT

Manitoba Health provides medications for the treatment of sexually transmitted infections (STI) at no cost to the patient. Providers may order the specific medications for the indications detailed, using the Manitoba Health STI Medication Order Form located at:

<https://www.gov.mb.ca/health/publichealth/cdc/protocol/form11.pdf>

BACKGROUND

This form-specific guidance document is intended to be used as a reference for Manitoba health care providers completing **MHSU-6781 – Provider Report Form for Sexually Transmitted and Blood-Borne Infections (STBBI) and/or STI Treatment**.

Health care providers are required to report all individuals who have been diagnosed with, or are being treated for a sexually transmitted and/or blood-borne infection (STBBI), as well as the identity of all individuals who a confirmed case may have had contact with to transmit the infection.

This form should be used:

- To report all laboratory confirmed STBBIs and all identified contacts as elicited from the case,
- To report any STI medications provided based on clinical indications (i.e. contacts of cases or individuals with clinical signs) prior to a diagnosis being confirmed,
- To report any updates to STI treatment previously reported, and
- To provide updated case and contact information if laboratory confirmation occurs after treatment is reported.

This form contains required information to support further public health follow-up of cases and their contacts. Public health follow-up of confirmed cases and additional surveillance data collection will generally occur. For all chlamydia and gonorrhea cases, treatment and contacts should be reported, though case follow-up may not occur for lower risk scenarios. Public health will follow-up with chlamydia and gonorrhea contacts, unless the case or provider elects to provide partner notification.

Completion of the form for all STI treatment will allow entry of STI treatment information in the Public Health Information System (PHIMS), which serves as a provincial repository of STBBI treatment records. A provincial repository is necessary to facilitate clinical access to STI treatment records, since STI medications are distributed directly to providers and not recorded in the Drug Programs Information Network (DPIN). Inventory reconciliation with provider treatment records will be performed to reinforce comprehensive reporting. STI treatment information is transferred from PHIMS into the client's medication record in eChart Manitoba, and is viewable by health care providers. This enhances coordination of care between providers.

Please refer to Communicable Disease Control's disease-specific protocols for additional information available at [Communicable Disease Management Protocols | Health | Province of Manitoba \(gov.mb.ca\)](https://www.gov.mb.ca/health/cdc/communicable-disease-management-protocols).

SUBMISSION OF FORMS TO THE MANITOBA HEALTH SURVEILLANCE UNIT (MHSU)

Forms should be completed and submitted by secured fax or courier to the MHSU within **five business days** of the interview with the case or treatment being provided.

MHSU, 4050-300 CARLTON ST. WINNIPEG, MB
CONFIDENTIAL FAX: 204-948-3044
GENERAL PHONE: 204-788-6736

If you have any questions or concerns about reportable diseases or conditions or you need to speak with a Medical Officer of Health, please call 204-788-8666 anytime (24/7).

FORM-SPECIFIC GUIDANCE

The *MHSU 6781-Provider Report Form for Sexually Transmitted and Blood-Borne Infections (STBBI) and STI Treatment* should be completed by health care providers for the following scenarios:

Lab Confirmed STBBI Cases

- Complete the entire form for all lab confirmed cases.
 - For Section V Presentation/Staging, “new diagnosis” applies to HIV only.
 - In Section IX Contacts of Case, “social media” applies to all platforms/handles – twitter, Instagram, Facebook etc.
- Document the treatment plan in Section IV. If multiple doses are required, document treatment plan **and please complete and submit the form at the time the first dose is provided/administered.**
- Updated reports may be submitted for the following situations:
 - For syphilis only - if the treatment plan is subsequently altered (e.g., client doesn’t attend for further IM doses of Benzathine Penicillin G and is lost to follow-up), submit a subsequent form for the client specifying the change in the last row of the section IV Treatment – “Update to previous information submitted - specify details on any change to treatment plan”.
 - If treatment was already reported prior to lab confirmation based on clinical signs or history (e.g., contact of a case), the additional case and contact information on the form should be completed as indicated by infection type (e.g. staging, and reporting of contacts). If additional treatment was provided or changed from the previous report, enter details to update the treatment prescribed/administered and submit the updated report.

STI treatment provided to a client (contacts of a case or an individual with symptoms suggestive of an STBBI)

If STI treatment is provided to a client who is not a lab confirmed case, the treatment should be reported to ensure it is documented in the clinical record. This is important in the event the client is tested or assessed by another provider, or subsequently becomes a laboratory confirmed case. This scenario includes contacts of cases who are treated, as well as clients who are provided STI treatment based on clinical presentation or history.

- Complete sections I, II, III, IV only.
- STI treatment to be reported includes oral medications provided or IM/IV medications administered.
- Document the treatment plan in Section IV. If multiple doses required, **please complete and submit the form at the time the first dose is provided/administered.**
- If the treatment plan is subsequently altered (e.g. client doesn’t attend for further IM doses of Benzathine Penicillin G and is lost to follow-up) and client is subsequently tested and becomes a lab confirmed case submit a subsequent form for the client specifying the change in the last row of the Section IV Treatment – “Update to previous information submitted - specify details on any change to syphilis treatment plan”.
- If the client becomes a lab confirmed case, the additional information on the form should be completed as indicated by infection type (e.g. staging, and reporting of contacts). If additional treatment was provided or changed from the previous report, enter details to update the treatment prescribed/administered and submit the updated report.

- If test results are pending and expected within **five** days, providers may wish to hold completing the form pending test results.

Clients should be advised that public health follow-up may also occur.

Contacts of a Case (for lab confirmed cases only)

- Please provide as much detail as possible to identify and locate the client, including any platforms/handles on social media – e.g. twitter, Instagram, Facebook etc.
- Indicate who is going to notify the contact. For low risk chlamydia and gonorrhea cases, cases are encouraged to notify their own contacts. If the case is going to notify the contact, please advise the case that public health may also follow-up with the contact to confirm testing and/or treatment (more frequently done for syphilis, HIV, and Hepatitis B and C). Public health will follow-up with chlamydia and gonorrhea contacts if public health is selected for notification, as long as the contact is able to be identified and located.