# The Adoption of Vaginal CT/GC Kits in the Family Planning and STD Clinics in North Carolina

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#### Background

North Carolina has participated in the CDC's Infertility Prevention Project (IPP) since 1998, screening for Chlamydia in women through Family Planning or STD clinics. Until 2009, the only method for collection used for testing women was through endocervical collection kits.

### Objectives

To convert to sole use of the vaginal route for Chlamydia and Gonorrhea (CT/GC) screening in women in Family Planning and STD clinics in the state.

#### Project Description

Prior to July 2009, the Family Planning and STD clinics used endocervical collection kits for CT/GC screening in women. That year, the State Laboratory of Public Health piloted a small program using urine-based collection kits for women visiting family planning clinics. Because the preferred sample type is now vaginal swabs, a verification study was performed in November 2010. After depleting stocks of endocervical kits, the conversion to vaginal kits for screening CT/GC was completed September 1, 2011 in Family Planning and STD clinics across the state.

#### Findings

**Challenges:** 1) A need for education/training of clinicians and staff in the collection technique 2) Staff training in new forms and 3) Clinicians' perceptions that clients are not capable of self-collected specimens.

**Successes:** 1) Only one kit to manage the expiration dates and 2) Excellent kit to use in women who do not require a pelvic exam (i.e., pregnancy tests only, under age 21 and/or no Pap, Express Clinic STD clients who are asymptomatic).

#### Conclusions

The local county support has been excellent and the collaboration between the Family Planning, STD, and Laboratory staff at the state level has been beneficial. We will be following up after one year (9/12) to survey both clinicians and clients on satisfaction of vaginal route.

## Implications for Programs, Policy, and Research

The use of the vaginal swab kits for CT/GC collection in women is easy to use by the clinician, client and laboratory staff. This route of collection ensures all women access to this important reproductive health screening.





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