

The Effect of a Treatment Protocol on Correct STD Prophylaxis for Complainants of Acute Sexual Assault

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Background: Over 250,000 women are sexually assaulted in the United States each year. Over 26% of these women will develop a sexually transmitted disease (STD) if untreated. Previous research has shown that these women rarely receive the complete recommended prophylaxis. In order to improve the quality of healthcare provided, the forensic department implemented a treatment protocol and set of orders in February 2012. We reviewed the effect of implementing a protocol in a regional medical center's emergency department.

Methods: A comparison was made before and after the implementation of a prophylaxis protocol using a retrospective chart review. The Fisher Exact test was applied to analyze the number of patients given correct prophylaxis before and after the start of the protocol.

Results: From January 2009 through August 2013, 153 patient charts were compared. We found a significant increase in the number of patients receiving appropriate treatment. Prior to the use of a protocol, only 34.3% (34/99) were receiving the overall recommended prophylaxis compared to 85.2% (46/54) after the protocol began ($p < 0.001$).

Neisseria gonorrhoeae prophylaxis showed a significant increase from 80.8% (80/99) pre-protocol to 96.3% (52/ 54) post-protocol ($p < 0.005$). *Trichomonas vaginalis* prophylaxis significantly increased from 42.4% (42/99) pre-protocol to 87.0% (47/54) post-protocol ($p < 0.001$). An increase in *Chlamydia trachomatis* prophylaxis was not statistically significant.

Conclusion: There was a significant increase in overall prophylactic treatment and individually for *N. gonorrhoeae* and *T. vaginalis* after the implementation of the protocol. Condensing published recommendations and expediting care with standing orders are responsible for a rise in prophylaxis. We conclude that the presence of such a protocol is a highly effective tool and may be beneficial in other emergency departments.