

# Australian STI Management Guidelines for Use in Primary Care

## Contact Tracing for STIs in General Practice

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### **What is contact tracing?**

Contact tracing is the process of notifying the contact(s) of a person with an infection so that the contacts can seek testing or treatment for the infection.

Contact tracing reduces transmission, prevents re-infection and allows for early treatment which may avoid future medical complications.

### **Who is a contact?**

Current sexual or injecting partners are a high priority for contact tracing due to risk of re-infection and transmission to others.

Previous sexual or injecting partners also need tracing as they may have asymptomatic infections. (See the relevant disease section for information about how far back tracing is required.)

Some infections pose a transmission risk to unborn babies (e.g. syphilis, gonorrhoea, HIV, chlamydia, hepatitis B), injecting partners (e.g. hepatitis C, human immunodeficiency virus [HIV]) and household contacts (e.g. hepatitis B).

### **What is my role and responsibility?**

The diagnosing clinician is responsible for initiating contact tracing for STIs and blood borne viruses (BBVs).

Public health units in Australia do NOT routinely contact trace all notifiable infections.

A clinician can support a client to perform their own contact tracing or offer to perform it on the patient's behalf or, in complex situations, refer the patient to specialist contact tracing support.

## **How do I introduce contact tracing?**

### **1. Introduce the reasons for contact tracing**

*It's great that you got tested and treated as most people with STIs don't have symptoms. Without knowing, people can pass it on to other partners or have long-term health problems. That's why it's important that your partner/s get tested and treated to avoid getting the infection again.*

### **2. Help identify which partner(s) or other contacts need to be informed and followed up**

*For this STI, we need to let all partners at risk from the last [x] months know. Take a moment to think about this from your most recent partner then count back over this time.*

Use cues such as location or events and non-judgemental language.

### **3. Explain methods and offer choice**

*From what you have told me, there are a few people who need to be informed. There are ways we can do this without them identifying you? How would it be best to contact them?*

### **4. Document your discussion about contact tracing in patient notes.**

## **Provider-initiated referral**

When the patient needs help, the diagnosing clinician can obtain the consent of the patient and inform the patient's sexual partner(s). This contact tracing can be performed anonymously.

This anonymous tracing is considered the best option for notifying partners about HIV infection, syphilis in pregnancy or when there are concerns around domestic violence or sexual assault (see section below *Complex contact tracing situations*).

Ensure your patient understands how you will approach their partner; reassure them regarding the confidentiality of both parties and consider whether presumptive treatment (given at the time of testing) of the contact is needed.

The Australasian Contact Tracing Guidelines provide detailed guidance and explanatory case studies for performing contact tracing.

### **Patient-initiated referral**

Your patient chooses to inform their own partner(s). Discuss with the patient how their partner(s) can be informed (personally or via an anonymous website) and then provide the patient with information to give to their partner(s).

The following websites are helpful for anonymous notification:

- [letthemknow.org.au](http://letthemknow.org.au) (for people diagnosed with an STI)
- [thedramadownunder.info](http://thedramadownunder.info) (for men who have sex with men)
- [bettertoknow.org.au](http://bettertoknow.org.au) (for Aboriginal and Torres Strait Islander people)

### **Complex contact tracing situations**

Enhanced contact tracing or specialist contact tracing support may be warranted in some situations, such as outbreaks, relationships with a power imbalance or domestic violence, serious infections, child safety, pregnancy, literacy and language or cultural issues.

Some clients may have limited information about their partners or meet them anonymously via online sites. There are specialist services that can assist with notifying online partners. Information about these sites is not always secure so patients should be advised of this fact before notifying online partners.

For guidance and support with complex STI contact tracing, seek specialist advice in your state or territory (see <http://contacttracing.ashm.org.au/contact-tracing-guidance/ways-of-notifying-contacts>):

STI contact tracing resources:

- [STI/HIV Testing Tool](#) (NSW Health)
- Australasian [Contact Tracing Guideline](#)

- Rural Sexual Health Care Online learning modules for rural health professionals (Centre for Excellence in Rural Sexual Health, University of Melbourne)

## **Resources**

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- STI/HIV Testing Tool (NSW Health)
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**Endorsement:** These guidelines have been endorsed by the Blood Borne Viruses and Sexually Transmitted Infections Standing Committee (BBVSS).

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