Chlamydia management

Suggested self-reported CPD activities: - choose one or more or develop your own.

	easuring outcomes	Reviewing performance
one or more resource for best practice chlamydia management and sexual health care: - AJGP article New best practice guidance for general practice to reduce chlamydia associated reproductive complications in women - Australian STI Management guidelines https://sti.guidelines.org.au/sexuallytransmissible-infections/chlamydia/ - RACGP Curriculum and syllabus for Australian General Practice - sexual health and gender diversity unit	ctivity 1 – Audit: Audit a sample of our patients with chlamydia auggestion for 6-8 patients). Compare our management notes to your ading of chlamydia management aidelines and resources and identify eas for improvement. For example: Did you prescribe antibiotic treatment that was consistent with the guidelines? Consider the site of infection, genital, rectal, pharyngeal. Was partner management and retesting for reinfection part of the treatment discussion? Did retesting occur in recommended timeframes? What was the result of the retest/s?	Activity 1 – Practice meeting and role play: Reflect on the factors that would prompt you to have a discussion with a patient about having a chlamydia / STI test. Review the Standard Asymptomatic Check-up page of the Australian STI Management guidelines (https://sti.guidelines.org.au/sexually-transmissible-infections/chlamydia/). Discuss in a practice meeting and role play with your colleagues about how to bring up a discussion about STI testing in an unrelated consultation.



This resource was developed as part of the Management of Chlamydia Cases in Australia (MoCCA) Study, that was funded by the National Health and Medical Research Council (APP1150014, 2018-2024). Based at the University of Melbourne, the study was a collaboration between the University and our project investigators and partner organisations in Victoria, New South Wales and Queensland.

Partner management

Suggested self-reported CPD activities: - choose one or more or develop your own.

Educational activity	Measuring outcomes	Reviewing performance
Activity 1 – Partner management reading:	Activity 1 – Audit: Audit a sample of your	Activity 1 – Practice meeting:
Read one or more resource on partner	patients with chlamydia or other STIs	Review resources for STI partner management. Prepare and
management for chlamydia / STIs:	(suggestion for 6-8 patients).	lead a discussion at a practice meeting on partner management
- Australian STI Management Guidelines	Compare your management notes to your	for your patient/s with chlamydia/STI. What are the GPs
- Australasian Contact Tracing Guidelines	reading of partner management resources	responsibilities for partner management? What challenges are
- RACGP Curriculum and syllabus for	and identify areas for improvement. For	encountered? What factsheets and resources are used to
Australian General Practice - sexual	example, was partner management part of	support patients with notifying their partners? How is the
health and gender diversity unit	the chlamydia / STI management discussion?	partner management discussion documented? Are there areas
	Was the number of partners requiring	for improvement? Are there other resources you can use?
Activity 2 - Patient delivered partner therapy	notification noted, what method/s of	
reading: Read the AJGP article Patient-	notification did patients opt for? What	Activity 2 – Role play: Reflect on how you would have a
delivered partner therapy: One option for	resources did you provide for patients to	discussion with your patient about informing their sexual
management of sexual partner(s) of a patient	support them with notifying their partners?	partners that they may have been exposed to a chlamydia
diagnosed with a chlamydia infection and		infection. Role-play this with a colleague or friend and then
prepare and deliver a presentation on patient		check their understanding by asking them to explain it back to
delivered partner therapy for your colleagues.		you.
		Activity 2 DDDT: Deflect on the AICD DDDT entire (Petient
		Activity 3 – PDPT: Reflect on the AJGP PDPT article (Patient-
		delivered partner therapy: One option for management of
		sexual partner(s) of a patient diagnosed with a chlamydia
		infection) and patient situations where PDPT could be an option
		for treating partners of chlamydia positive patients. Discuss the
		process for offering / recording PDPT in your clinic with a
		colleague. What resources can you use to support PDPT
		provision (eg. prescription templates).



This resource was developed as part of the Management of Chlamydia Cases in Australia (MoCCA) Study, that was funded by the National Health and Medical Research Council (APP1150014, 2018-2024). Based at the University of Melbourne, the study was a collaboration between the University and our project investigators and partner organisations in Victoria, New South Wales and Queensland.

Retesting for reinfection

Suggested self-reported CPD activities: - choose one or more or develop your own.

Educational activity	Measuring outcomes	Reviewing performance
Activity 1 – Retesting reading: Read one or more	Activity 1 – Audit: Conduct an audit of	Activity 1 - Practice meeting: Present your audit findings to a
resource for the evidence for retesting for	patients with chlamydia at your clinic in	practice meeting. Are retesting rates as you expected? What about
chlamydia:	the last 6 months. What proportion were	reinfection rates? Facilitate a discussion with your colleagues
- AJGP article New best practice guidance	retested within recommended	about their chlamydia retesting practices. What information do
for general practice to reduce chlamydia	timeframes (around 3 months after	they provide their patients? How is a retest organized? What other
associated reproductive complications in	treatment)? What proportion were	options and work processes could be implemented to support
<u>women</u>	reinfected with chlamydia?	retesting?
- Australian STI Management guidelines		
https://sti.guidelines.org.au/sexually-		
transmissible-infections/chlamydia/		
-		



This resource was developed as part of the Management of Chlamydia Cases in Australia (MoCCA) Study, that was funded by the National Health and Medical Research Council (APP1150014, 2018-2024). Based at the University of Melbourne, the study was a collaboration between the University and our project investigators and partner organisations in Victoria, New South Wales and Queensland.

Pelvic inflammatory disease

Suggested self-reported CPD activities: - choose one or more or develop your own.

Educational activity	Measuring outcomes	Reviewing performance
Activity 1 – PID reading: Read and review	Activity 1 – PID and STIs: Review a sample of	Activity 1 – Reflection: Prepare a short description of a patient
one or more resource focusing on PID:	your patients (with female reproductive	with a PID diagnosis you cared for including presenting signs and
- Australian STI Management	organs) and with a chlamydia or other STI	symptoms, investigations, history taking, differential diagnoses
guidelines	diagnosis (gonorrhoea, Mycoplasma	and management. Reflect on areas your care aligned or differed
https://sti.guidelines.org.au/syndrom	genitalium (suggestion of 6-8 patients).	to the recommended PID diagnosis and care and identify areas
es/pelvic-inflammatory-diseases-pid/	Compare your management notes to your	for improvement.
- AusDoc How to Treat PID article and	readings about PID. Does the patients clinical	
quiz	picture suggest a PID diagnosis could have	Activity 2 – Role play: Reflect on how you would explain a PID
https://www.ausdoc.com.au/how-	also been possible.	diagnosis and management to a patient. What factsheets are
treat/pelvic-inflammatory-disease		available to support the discussion with your patient? Role-play
(requires Australian Doctor log in)	Activity 2 – PID diagnosis and investigations:	this with a colleague or friend and then check their
-	Review a sample of your patients with a PID	understanding by asking them to explain it back to you.
	diagnosis (suggestion of 6-8 patients).	
	Compare your management notes to your	
	readings about PID and identify areas for	
	improvement. For example, were all key	
	investigations conducted (STI, pregnancy	
	tests) and were important differential	
	diagnoses excluded?	



This resource was developed as part of the Management of Chlamydia Cases in Australia (MoCCA) Study, that was funded by the National Health and Medical Research Council (APP1150014, 2018-2024). Based at the University of Melbourne, the study was a collaboration between the University and our project investigators and partner organisations in Victoria, New South Wales and Queensland.