Utilization of Reminders to Promote Bacterial STI Retest
Mona Patel RN, BSN and Misbah Shah RN, BSN
DNP Chair: Peijia Zha, PhD, MA
DNP Team Member: Jeffrey Kwong, DNP, MPH, AGPCNP-BC, FAANP, FAAN
DNP Team Member: Corey DeStefano, Director of Research at community-based health center located in Newark, NJ

Introduction
• Quality improvement project assessing impact of mailed letters and phone call reminders on increasing 3-month post-treatment retesting in persons diagnosed with bacterial STIs including chlamydia and/or gonorrhea.

Background & Significance
• Positive reported cases of bacterial STIs in 2018
  
<table>
<thead>
<tr>
<th></th>
<th>United States</th>
<th>New Jersey</th>
<th>Essex County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chlamydia</td>
<td>1,705,295</td>
<td>36,535</td>
<td>6,495</td>
</tr>
<tr>
<td>Gonorrhea</td>
<td>582,475</td>
<td>36,535</td>
<td>2,019</td>
</tr>
</tbody>
</table>

• Consequences of untreated bacterial STIs:
  Males                                     Females
  Epididymitis                              Pelvic Inflammatory Disease
  Chronic Prostatitis                       Ectopic Pregnancy
  Tubal Infertility

• Annual expenditure to treat bacterial STIs:
  Chlamydia: $516.7 million
  Gonorrhea: $162.1 million

• Screening Guidelines
  Females: Sexually active women age ≤ 24 and older women who are at increased risk
  Males: Reside in high prevalence areas and MSM annually or every 3-6 months if increased risk

• Retest: 3 months after initial diagnosis & treatment

Methods
• Design: Cohort study design with application of quality improvement approach
• Setting: Community-based health center located in Newark, NJ
• Sample: English speaking, > age 18 with chlamydia/gonorrhea diagnosed at community-based health center
• Measures:
  Selected patients between May to September 2020 were de-identified and chart information was entered into data abstraction tool
  Intervention: 2 mailed letters and 3 phone call reminders made to each participant with promotion of patient portal system
  Retest patient information included: symptoms and retest results
• Analysis:
  Descriptive statistics for frequencies and proportion of study variables

Results
Retest Performed
Retest NOT Performed
N/A in study*
*Retest prior to intervention application

Discussion
• Implications: Interventions can be applied to alternative STIs such as syphilis and trichomonias to promote reduction of spread.
• Limitations: COVID-19 pandemic caused outcomes of project to be altered due to factors such as participant apprehension regarding follow-up and limited access to appointments which resulted in a delay in recommended retest time.

Scan for references and contact information