BUMED INSTRUCTION 6222.10A

From: Chief, Bureau of Medicine and Surgery  
To: Ships and Stations Having Medical Department Personnel  

Subj: SEXUALLY TRANSMITTED DISEASE (STD) CLINICAL MANAGEMENT GUIDELINES

(b) BUMEDINST 6220.12A

Encl: (1) Preventive Medicine Points of Contact

1. **Purpose.** To provide current guidelines for treatment and prevention of STDs.

2. **Cancellation.** BUMEDINST 6222.10.

3. **Background.** Medical Department personnel must comply with the most recent therapeutic recommendations in the treatment and prevention of STDs.

4. **General Evaluation Requirements.** Whenever a patient presents for evaluation of a possible STD, the following must be done:

   a. **Venereal Disease Research Laboratory or Rapid Plasma Reagin (VDRL/RPR) Testing.** Test must be performed. Consultation with a medical officer is required for questions concerning positive flourescent treponemal antibody absorbed (FTA-ABS) tests.

   b. **Human Immunodeficiency Virus (HIV) Testing.** Active duty personnel must be tested for infection by submitting a blood specimen for HIV serology. Additional HIV testing may be indicated at 3 and 6 months after treatment based on a diagnosis of a genital ulcer disease, the prevalence of HIV in the area, the number of episodes of STDs, and the nature and duration of sexual risk-taking behavior. Refer to reference (a) or the "points of contact" in enclosure (1) for specific guidance. The same regimen of testing is recommended for family members and other civilians presenting with a STD, but is voluntary and
cannot be required. If the family member or other civilian agrees to be tested for HIV, this must be documented with a signed and witnessed informed consent. Followup counseling should be arranged to discuss HIV test results. Patients must be counseled about their HIV test results, to include understanding that positive results likely indicate exposures from past behavior, and may not be diagnostic of infection from a recent contact.

c. Hepatitis B Vaccine Administration. Unless previously administered, all active duty personnel are to receive hepatitis B vaccine when presenting for evaluation of a possible STD. Ensure the 3-dose vaccine series is completed. Beneficiaries and other civilians who seek evaluation for a possible STD should be recommended and encouraged to receive the hepatitis B vaccine series.

5. Treatment. Reference (a) contains current Centers for Disease Control and Prevention guidelines for the treatment of STDs in the United States. These recommendations should be followed along with other guidance provided in this instruction. Operational and geographic situations may require additional modification or elaboration of these guidelines as directed by the appropriate commander in chief, or as recommended by the cognizant Navy environmental and preventive medicine unit. Single dose treatment regimens that ensure compliance, provide a prompt cure, and are cost effective are generally preferred over other regimens.

6. Medical Quarantine. Policies of quarantine or restriction of liberty for STD patients while awaiting test results or confirmation of cure are strongly discouraged. However, patients must be appropriately counseled to refrain from sexual activity, pending confirmation of diagnosis and further followup.

7. Contact Interviews. All STD patients will be interviewed to obtain epidemiological information on sexual contacts to ensure appropriate contact tracing and management.

8. Followup. Recommendations for followup treatment can be found in reference (a), and through points of contact found in enclosure (1).

9. Reporting. Reporting requirements are covered by reference (b). Reports must also be submitted in compliance with State reporting requirements.
10. **STD Resources.** Valuable STD resources may be downloaded from the Navy Environmental Health Center homepage. The internet address is: http://www-nehc.med.navy.mil/prevmed/std/std. Available resources include: 1998 Guidelines for Treatment of Sexually Transmitted Diseases and STD Diagnosis and Treatment Algorithms. Each command should adapt these guidelines and develop special SF 600 overprints based on local needs and capabilities.

11. **Point of Contact.** Guidance regarding new STD treatment guidelines or local variations may be obtained from local preventive medicine departments or the points of contact found in enclosure (1).

[Signature]

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Available at:  
PREVENTIVE MEDICINE POINTS OF CONTACT

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Enclosure (1)
BUMEDINST 6222.10A
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Enclosure (1)