

# 25

## Sexually Transmitted Diseases

---

### **Bacterial STD Illness and Disability**

- 25-1 Chlamydia
- 25-1a Females aged 15 to 24 years attending family planning clinics
- 25-1b Females aged 15 to 24 years attending STD clinics
- 25-1c Males aged 15 to 24 years attending STD clinics
- 25-2 Gonorrhea
- 25-3 Primary and secondary syphilis

### **Viral STD Illness and Disability**

- 25-4 Genital herpes
- 25-5 Human papillomavirus infection

### **STD Complications Affecting Females**

- 25-6 Pelvic inflammatory disease (PID)
- 25-7 Fertility problems
- 25-8 Heterosexually transmitted HIV infection in women

### **STD Complications Affecting the Fetus and Newborn**

- 25-9 Congenital syphilis
- 25-10 Neonatal STDs

### **Personal Behaviors**

- 25-11 Responsible adolescent sexual behavior
- 25-12 Responsible sexual behavior messages on television

### **Community Protection Infrastructure**

- 25-13 Hepatitis B vaccine services in STD clinics
- 25-14 Screening in youth detention facilities and jails
- 25-15 Contracts to treat nonplan partners of STD patients

### **Personal Health Services**

- 25-16 Annual screening for genital chlamydia
- 25-17 Screening of pregnant women
- 25-18 Compliance with recognized STD treatment standards
- 25-19 Provider referral services for sex partners

## Bacterial STD Illness and Disability

### 25-1. Reduce the proportion of adolescents and young adults with *Chlamydia trachomatis* infections.

#### 25-1a. Females aged 15 to 24 years attending family planning clinics.

**National Data Source** STD Surveillance System (STDSS), CDC, NCHSTP.

**State Data Sources** State and local Health Department STD Control Programs and Regional Infertility Prevention Programs.

**Healthy People 2000 Objective** Adapted from 19.2 (Sexually Transmitted Diseases).

**Measure** Percent.

**Baseline** 5.0 (1997).

**Numerator** Number of positive tests among women aged 15 to 24 years who attended family planning clinics in the past 12 months.

**Denominator** Number tests administered (unsatisfactory tests, indeterminate or inconclusive results, or inadequate specimens are excluded) among women aged 15 to 24 years who attended family planning clinics in the past 12 months.

**Population Targeted** U.S. civilian population.

**Questions Used To Obtain the National Data** Not applicable.

**Expected Periodicity** Annual.

**Comments** A case definition for *Chlamydia trachomatis* is provided by CDC.<sup>1</sup>

Data are collected from Regional Infertility Prevention Program laboratory reports.

This measure tracks only tests that are specific for *Chlamydia trachomatis* infection. The number of positive cases is based on test results from persons routinely screened. Routine screening is defined by each clinic. In some clinics, all patients are universally screened. In others, routine screening is done selectively based on clinical findings or behavioral risk factors.

A minimum of 500 valid test results by gender and subpopulation is recommended to derive reliable estimates for this measure. Some clinics may not collect all U.S. Census-defined race and/or ethnicity data categories.

Data for this measure are also included in the annual STD Surveillance Report.<sup>2</sup>

This measure is a modification of Healthy People 2000 objective 19.2, which tracked percent positivity in women under age 25 years who attended family planning clinics. This measure tracks percent positivity among women aged 15 to 24 years who attended family planning clinics.

See Part C for a description of STDSS and Appendix A for focus area contact information.



### **25-1b. Females aged 15 to 24 years attending STD clinics.**

<b>National Data Source</b>	STD Surveillance System (STDSS), CDC, NCHSTP.
<b>State Data Sources</b>	State and local Health Department STD Control Programs and Regional Infertility Prevention Programs.
<b>Healthy People 2000 Objective</b>	Adapted from 19.2 (Sexually Transmitted Diseases).
<b>Measure</b>	Percent.
<b>Baseline</b>	12.2 (1997).
<b>Numerator</b>	Number of positive tests among women aged 15 to 24 years who attended STD clinics in the past 12 months.

<b>Denominator</b>	Number of tests administered (unsatisfactory tests, indeterminate or inconclusive results, or inadequate specimens are excluded) to women aged 15 to 24 years who attended STD clinics in the past 12 months.
<b>Population Targeted</b>	U.S. civilian population.
<b>Questions Used To Obtain the National Data</b>	Not applicable.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	<p>A case definition for <i>Chlamydia trachomatis</i> is provided by CDC.<sup>1</sup></p> <p>Data are collected from Regional Infertility Prevention Program laboratory reports.</p> <p>This measure tracks only tests that are specific for <i>Chlamydia trachomatis</i> infection. The number of positive cases is based on test results from persons routinely screened. Routine screening is defined by each clinic. In some clinics, all patients are universally screened. In others, routine screening is done selectively based on clinical findings or behavioral risk factors.</p> <p>A minimum of 500 valid test results by gender and subpopulation is recommended to derive reliable estimates for this measure. Some clinics may not collect all U.S. Census-defined race and/or ethnicity data categories.</p> <p>Data for this measure are also included in the annual STD Surveillance Report.<sup>2</sup></p> <p>This measure is a modification of Healthy People 2000 objective 19.2, which tracked percent positivity in women under age 25 years who attended family planning clinics. This measure expands upon the Healthy People 2000 measure and tracks percent positivity among women aged 15 to 24 years who attended STD clinics.</p> <p>See Part C for a description of STDSS and Appendix A for focus area contact information.</p>



**25-1c. Males aged 15 to 24 years attending STD clinics.**

<b>National Data Source</b>	STD Surveillance System (STDSS), CDC, NCHSTP.
<b>State Data Source</b>	State and local Health Department STD Control Programs.
<b>Healthy People 2000 Objective</b>	Adapted from 19.2 (Sexually Transmitted Diseases).
<b>Measure</b>	Percent.
<b>Baseline</b>	15.7 (1997).
<b>Numerator</b>	Number of positive tests among men aged 15 to 24 years who attended STD clinics in the past 12 months.
<b>Denominator</b>	Number tests administered (unsatisfactory tests, indeterminate or inconclusive results, or inadequate specimens are excluded) among men aged 15 to 24 years who attended STD clinics in the past 12 months.
<b>Population Targeted</b>	U.S. civilian population.
<b>Questions Used To Obtain the National Data</b>	Not applicable.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	<p>A case definition for <i>Chlamydia trachomatis</i> is provided by CDC.<sup>1</sup></p> <p>Data are collected from Regional Infertility Prevention Program laboratory reports.</p> <p>This measure tracks only tests that are specific for <i>Chlamydia trachomatis</i> infection. The number of positive cases is based on test results from persons routinely screened. Routine screening is defined by each clinic. In some clinics, all patients are universally screened. In others, routine screening is done selectively based on clinical findings or behavioral risk factors.</p> <p>A minimum of 500 valid test results by gender and subpopulation is recommended to derive reliable estimates for this measure. Some clinics may not collect all U.S. Census-defined race and/or ethnicity data categories.</p>

Data for this measure are also included in the annual STD Surveillance Report.<sup>2</sup>

This measure is a modification of Healthy People 2000 objective 19.2, which tracked percent positivity in women under age 25 years who attended family planning clinics. This measure expands the Healthy People 2000 measure and tracks percent positivity among men aged 15 to 24 years who attended STD clinics.

See Part C for a description of STDSS and Appendix A for focus area contact information.



## **25-2. Reduce gonorrhea.**

<b>National Data Source</b>	STD Surveillance System (STDSS), CDC, NCHSTP.
<b>State Data Source</b>	State and local Health Department STD Control Programs.
<b>Healthy People 2000 Objective</b>	19.1 (Sexually Transmitted Diseases).
<b>Measure</b>	Rate per 100,000 population.
<b>Baseline</b>	123 (1997).
<b>Numerator</b>	Number of new reported cases of gonorrhea in the past 12 months.
<b>Denominator</b>	Number of persons.
<b>Population Targeted</b>	U.S. resident population.
<b>Questions Used To Obtain the National Data</b>	CDC Report of Civilian Cases of Primary and Secondary Syphilis, Gonorrhea, and Chlamydia by Reporting Source, Sex, Race/Ethnicity, and Group, Form 73.2638, Rev. 01/96.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	In most instances, if age or race/ethnicity was not specified, cases were allocated according to the distribution of cases for which these variables were specified. In 1998, New Jersey and Idaho did not report race/ethnicity for most cases and were excluded.

Data for this measure are also included in the annual STD Surveillance Report.<sup>2</sup>

See Part C for a description of STDSS and Appendix A for focus area contact information.



### **25-3. Eliminate sustained domestic transmission of primary and secondary syphilis.**

<b>National Data Source</b>	STD Surveillance System (STDSS), CDC, NCHSTP.
<b>State Data Source</b>	State and local Health Department STD Control Programs.
<b>Healthy People 2000 Objective</b>	19.3 (Sexually Transmitted Diseases).
<b>Measure</b>	Rate per 100,000 population.
<b>Baseline</b>	3.2 (1997).
<b>Numerator</b>	Number of new reported cases of primary and secondary syphilis in the past 12 months.
<b>Denominator</b>	Number of persons.
<b>Population Targeted</b>	U.S. resident population.
<b>Questions Used To Obtain the National Data</b>	CDC Report of Civilian Cases of Primary and Secondary Syphilis, Gonorrhea, and Chlamydia by Reporting Source, Sex, Race/Ethnicity, and Group, Form 73.2638, Rev. 01/96.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	<p>Data are collected using Form 2638 from CDC. In most instances, if age or race/ethnicity was not specified, cases were allocated according to the distribution of cases for which these variables were specified.</p> <p>Data for this measure are also included in the annual STD Surveillance Report.<sup>2</sup></p> <p>See Part C for a description of STDSS and Appendix A for focus area contact information.</p>





## Viral STD Illness and Disability

### 25-4. Reduce the proportion of adults with genital herpes infection.

<b>National Data Source</b>	National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Adapted from 19.5 (Sexually Transmitted Diseases).
<b>Measure</b>	Percent.
<b>Baseline</b>	17 (1988–94).
<b>Numerator</b>	Number of adults aged 20 to 29 years with a positive result from a herpes simplex virus, type 2 (HSV-2) laboratory test.
<b>Denominator</b>	Number of adults aged 20 to 29 years.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	Not applicable.
<b>Expected Periodicity</b>	Annual beginning with 1999 data.
<b>Comments</b>	<p>A case definition for genital herpes is provided by CDC.<sup>1</sup></p> <p>This measure is a modification of Healthy People 2000 objective 19.5, which tracked the number of first-time visits to physicians' offices for genital herpes, as measured by the National Disease and Therapeutic Index, IMS America, Ltd. This measure tracks the proportion of persons aged 20 to 29 years with a positive laboratory test result for herpes simplex virus, type 2, as measured by NHANES.</p> <p>See Part C for a description of NHANES and Appendix A for focus area contact information.</p>



**25-5. (Developmental) Reduce the proportion of persons with human papillomavirus (HPV) infection.**

**Comments** An operational definition could not be specified at the time of publication.

The proposed national data source is the National Health and Nutrition Examination Survey (NHANES), CDC, NCHS. A reduction in the number of HPV cases will minimize the prevalence of subtypes 16 and 18 and other subtypes associated with cervical cancer in persons aged 15 to 44 years.

This objective is modified from Healthy People 2000 objective 19.5, which tracked the number of first-time consultations for genital warts.

See Appendix A for focus area contact information.



**STD Complications Affecting Females**

**25-6. Reduce the proportion of females who have ever required treatment for pelvic inflammatory disease (PID).**

<b>National Data Source</b>	National Survey of Family Growth (NSFG), CDC, NCHS.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Adapted from 19.6 (Sexually Transmitted Diseases).
<b>Measure</b>	Percent.
<b>Baseline</b>	8 (1995).
<b>Numerator</b>	Number of females aged 15 to 44 years who reported ever requiring treatment for PID.
<b>Denominator</b>	Number of females aged 15 to 44 years.
<b>Population Targeted</b>	U.S. civilian population.
<b>Questions Used To Obtain the National Data</b>	From the 1995 National Survey of Family Growth:

- *Have you ever been treated for an infection in your fallopian tubes, womb, or ovaries, also called a pelvic infection, pelvic inflammatory disease, or P.I.D.?*

**Expected Periodicity** Periodic.

**Comments** There are no reliable national surveillance systems that measure women requiring treatment for PID. This measure, based on data from NSFG, is used as a proxy for this objective.

PID is a subjective diagnosis made by physicians. Laparoscopy is required for a definitive diagnosis of PID. The data from the NSFG are self-reported and therefore may not be accurate, particularly due to the unknown prevalence of asymptomatic or subclinical PID.

This measure is a modification of Healthy People 2000 objective 19.6, which tracked the number of hospitalizations due to PID, as measured by the National Hospital Discharge Survey (NHDS), CDC, NCHS. This measure tracks the number of women aged 15 to 44 years who report ever requiring treatment for PID.

See Part C for a description of NSFG and Appendix A for focus area contact information.



**25-7. Reduce the proportion of childless females with fertility problems who have had a sexually transmitted disease or who have required treatment for pelvic inflammatory disease (PID).**

**National Data Source** National Survey of Family Growth (NSFG), CDC, NCHS.

**State Data Source** Not identified.

**Healthy People 2000 Objective** Not applicable.

**Measure** Percent.

**Baseline** 27 (1995).

**Numerator** Number of childless females aged 15 to 44 years with fertility problems who report history of STD or PID.

<b>Denominator</b>	Number of females aged 15 to 44 years who are childless and have fertility problems.
<b>Population Targeted</b>	U.S. civilian population.
<b>Questions Used To Obtain the National Data</b>	From the 1995 National Survey of Family Growth:

[NUMERATOR:]

- *Has a doctor or other medical care provider ever told you that you had:*
  - genital warts?*
  - gonorrhea?*
  - syphilis?*
  - genital herpes?*
- *Have you ever been treated for an infection in your fallopian tubes, womb, or ovaries, also called a pelvic infection, pelvic inflammatory disease, or P.I.D.?*

[DENOMINATOR:]

[Following a series of questions to ALL respondents that address pregnancy, contraceptive use and periods of no sexual activity:]

- *Have you ever had both your tubes tied, cut, or removed? This procedure is often called a tubal ligation.*
- *Have you ever had a hysterectomy, that is, surgery to remove your uterus?*
- *Have you ever had both your ovaries removed?*
- *Have you ever had any other operation that makes it impossible for you to have another baby?*
- *As far as you know, are you completely sterile from this operation, that is, does it make it impossible for you to have a baby in the future?*
- *Has (name of husband/partner) ever had a vasectomy or any other operation that would make it impossible to father a baby in the future?*

[Nonsurgically sterile respondents are those who have not reported any operations for themselves, or if they are married or cohabiting, for their husbands/partners.]

[For respondents who are nonsurgically sterile:]

- *Some women are not physically able to have children. As far as you know, is it physically possible for you, yourself, to have a baby?*
- *What about (name of husband/partner)? As far as you know, is it physically impossible for him to father a baby in the future?*

[If it is physically possible:]

- *Some women are physically able to have a baby, but have difficulty getting pregnant or carrying a baby to term. As far as you know, would you, yourself, have any difficulty getting pregnant or carrying a baby to term?*
- *As far as you know, does (name of male partner) have any difficulty fathering a baby?*
- *At any time has a medical doctor ever advised you to never become pregnant (again)?*

**Expected Periodicity**

Periodic.

**Comments**

Women are classified as childless if they have not given birth to a child and have not had a sterilizing operation.

Fertility problems refer to the standard medical definitions of infertility (have not used contraception and have not become pregnant for 12 months or more) or impaired fecundity (women reporting no sterilizing operation and are classified as those who find it difficult or impossible to get pregnant or carry a baby to term).

Respondents are considered to have fertility problems if they report that neither they or their husband/partner has had a sterilizing operation or any one of the following:

- (1) she and her husband/partner are nonsurgically sterile and it is physically impossible for her to get pregnant or carry a baby to term or for her husband to father a baby.
- (2) it is physically difficult for her to get pregnant or carry a baby to term or for her husband/partner to father a baby.
- (3) she has been advised by a doctor (for health reasons) not to become pregnant.
- (4) she and her husband/partner have reported sexual activity without contraception for at least 12 consecutive months and have had no pregnancies in that time period.

See Part C for a description of NSFG and Appendix A for focus area contact information.



**25-8. (Developmental) Reduce HIV infections in adolescent and young adult females aged 13 to 24 years that are associated with heterosexual contact.**

**Comments** An operational definition could not be specified at the time of publication.

The proposed national data source is the HIV/AIDS Surveillance System, CDC, NCHSTP.

See Appendix A for focus area contact information.



**STD Complications Affecting the Fetus and Newborn**

**25-9. Reduce congenital syphilis.**

<b>National Data Sources</b>	STD Surveillance System (STDSS), CDC, NCHSTP; National Vital Statistics System (NVSS), CDC, NCHS.
<b>State Data Sources</b>	State and local Health Department STD Control Programs; State and Local Vital Statistics.
<b>Healthy People 2000 Objective</b>	19.4 (Sexually Transmitted Diseases).
<b>Measure</b>	Rate per 100,000 live births.
<b>Baseline</b>	27 (1997).
<b>Numerator</b>	Number of new reported cases of congenital syphilis in the past 12 months.
<b>Denominator</b>	Number of live births.
<b>Population Targeted</b>	U.S. resident population.
<b>Questions Used To Obtain the National Data</b>	CDC Congenital Syphilis (CS) Case Investigation and Report, Form 73.126, Rev. 09/91.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	Less than 5 percent of cases have missing race/ethnicity data and were excluded from the baseline estimate.
	Data for this measure are also included in the annual STD Surveillance Report. <sup>2</sup>

See Part C for a description of STDSS and Appendix A for focus area contact information.



**25-10. (Developmental) Reduce neonatal consequences from maternal sexually transmitted diseases, including chlamydial pneumonia, gonococcal and chlamydial ophthalmia neonatorum, laryngeal papillomatosis (from human papillomavirus infection), neonatal herpes, and preterm birth and low birth weight associated with bacterial vaginosis.**

**Comments** An operational definition could not be specified at the time of publication.

The proposed national data source is the STD Surveillance System (STDSS), CDC, NCHSTP.

See Appendix A for focus area contact information.



## Personal Behaviors

**25-11. Increase the proportion of adolescents who abstain from sexual intercourse or use condoms if currently sexually active.**

<b>National Data Source</b>	Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.
<b>State Data Source</b>	Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.
<b>Healthy People 2000 Objective</b>	Adapted from 5.5 and 5.6 (Family Planning) (also 18.15 and 19.16).
<b>Leading Health Indicator</b>	Responsible Sexual Behavior.
<b>Measure</b>	Percent.
<b>Baseline</b>	85 (1999).

<b>Numerator</b>	Number of students in grades 9 through 12 who report that they have never had sexual intercourse; or who have had sexual intercourse, but not in the past 3 months; or who have had sexual intercourse in the past 3 months but used a condom at last sexual intercourse.
<b>Denominator</b>	Number of students in grades 9 through 12.
<b>Population Targeted</b>	Students in grades 9 through 12.
<b>Questions Used To Obtain the National Data</b>	<p>From the 1999 Youth Risk Behavior Surveillance System:</p> <ul style="list-style-type: none"> <li>➤ <i>Have you ever had sexual intercourse?</i></li> <li>➤ <i>During the past three months, with how many people have you had sexual intercourse?</i> <ul style="list-style-type: none"> <li><i>I have never had sexual intercourse</i></li> <li><i>I have had sexual intercourse, but not in the past 3 months</i></li> <li><i>1 person</i></li> <li><i>2 people</i></li> <li><i>3 people</i></li> <li><i>4 people</i></li> <li><i>5 people</i></li> <li><i>6 or more people</i></li> </ul> </li> <li>➤ <i>The last time you had sexual intercourse, did you or your partner use a condom?</i> <ul style="list-style-type: none"> <li><i>I have never had sexual intercourse</i></li> <li><i>yes</i></li> <li><i>no</i></li> </ul> </li> </ul>
<b>Expected Periodicity</b>	Biennial.
<b>Comments</b>	<p>This measure is a modification of Healthy People 2000 objectives 5.5 and 5.6, which tracked the proportion of sexually active in-school adolescents in grades 9 through 12 that abstained from sexual intercourse in the past 3 months and used contraception at most recent intercourse, respectively. This measure tracks the proportion of adolescents in grades 9 through 12 who have never had sexual intercourse; <u>or</u> who have had sexual intercourse, but not in the past 3 months; <u>or</u> have had sexual intercourse in the past 3 months but used a condom at last sexual intercourse.</p> <p>This objective is one of the measures used to track the Responsible Sexual Behavior Leading Health Indicator. See Appendix H for a complete listing.</p>



See Part C for a description of YRBSS and Appendix A for focus area contact information.



**25-12. (Developmental) Increase the number of positive messages related to responsible sexual behavior during weekday and nightly prime-time television programming.**

**Comments** An operational definition could not be specified at the time of publication.

The proposed national data source is CDC, NCHSTP.

Responsible sexual behavior includes abstinence, delaying sexual intercourse, or using condoms.

See Appendix A for focus area contact information.



## Community Protection Infrastructure

**25-13. Increase the proportion of Tribal, State, and local sexually transmitted disease programs that routinely offer hepatitis B vaccines to all STD clients.**

<b>National Data Source</b>	Survey of STD Programs, National Coalition of STD Directors (NCSD).
<b>State Data Source</b>	Survey of STD Programs, National Coalition of STD Directors (NCSD).
<b>Healthy People 2000 Objective</b>	Not applicable.
<b>Measure</b>	Percent.
<b>Baseline</b>	5 (1998).
<b>Numerator</b>	Number of State and local STD clinics that reported all clients are eligible to receive the hepatitis B vaccine.
<b>Denominator</b>	Number of STD programs (free-standing facilities with the capacity to diagnose and treat STDs).

**Questions Used to Obtain the National Data**

From the 1998 Survey of STD Programs:

- *Who is eligible for the hepatitis B vaccine in STD clinics?*

**Expected Periodicity**

Periodic.

**Comments**

This measure tracks the proportion of programs that offer hepatitis B vaccines to clients in accordance with CDC guidelines.<sup>3</sup>

The numerator is the number of facilities that report “hepatitis vaccines are offered to all clients” to the question listed above.

The Survey of STD Programs is a national convenience sample of free-standing facilities with the capacity to diagnose and treat STDs.

Data for Tribes are developmental. The proposed national data source is the Indian Health Service (IHS).

See Appendix A for focus area contact information.



**25-14. (Developmental) Increase the proportion of youth detention facilities and adult city or county jails that screen for common bacterial sexually transmitted diseases within 24 hours of admission and treat STDs (when necessary) before persons are released.**

**Comments**

An operational definition could not be specified at the time of publication.

The proposed national data source is the Annual Survey of Correctional Facilities, CDC, NCHSTP and National Institute of Justice; U.S. Department of Justice, U.S. Bureau of Justice Statistics.

See Appendix A for focus area contact information.

**25-15. (Developmental) Increase the proportion of all local health departments that have contracts with managed care providers for the treatment of nonplan partners of patients with bacterial sexually transmitted diseases (gonorrhea, syphilis, and chlamydia).**

**Comments**

An operational definition could not be specified at the time of publication.

The proposed national data source is the Survey of STD Programs, National Coalition of STD Directors (NCSD).

This objective is modified from Healthy People 2000 objective 19.15, which tracked partner notification of exposure to sexually transmitted by patients with bacterial STDs using the STDSS.

See Appendix A for focus area contact information.



## Personal Health Services

**25-16. (Developmental) Increase the proportion of sexually active females aged 25 years and under who are screened annually for genital chlamydia infections.**

**Comments**

An operational definition could not be specified at the time of publication.

The proposed national data sources are the Office on Population Affairs (OPA) data reported in Family Planning Annual Report and the STD Surveillance System (STDSS), CDC, NCHSTP.

Primary health care centers include: family planning clinics, community health centers, university health services, Department of Defense health clinics for active duty military, and managed care plans.

See Appendix A for focus area contact information.

**25-17. (Developmental) Increase the proportion of pregnant females screened for sexually transmitted diseases (including HIV infection and bacterial vaginosis) during prenatal health care visits, according to recognized standards.**

**Comments**

An operational definition could not be specified at the time of publication.

The proposed measure is the percent of pregnant females screened for STDs in community health centers, and the proposed data sources are the Department of Defense health clinics for active duty military and managed care plans data from the STD Surveillance System (STDSS), CDC, NCHSTP.

Recognized standards are the most recent edition of the *Guide to Clinical Preventive Services*.<sup>4</sup>

See Appendix A for focus area contact information.



**25-18. Increase the proportion of primary care providers who treat patients with sexually transmitted diseases and who manage cases according to recognized standards.**

**Comments**

An operational definition was not specified at the time of publication.

The national data source for the 1998 baseline is the National Disease and Therapeutic Index (NDTI), IMS America. The proposed tracking source is the National Ambulatory Medical Care Survey (NAMCS), CDC, NCHS.

This objective is modified from Healthy People 2000 objective 19.13, which tracked correct management of sexually transmitted disease cases by primary care providers using the NDTI.

See Part C for a description of NAMCS and Appendix A for focus area contact information.



**25-19. (Developmental) Increase the proportion of sexually transmitted disease clinic patients who are being treated for bacterial STDs (chlamydia, gonorrhea, and syphilis) and who are offered provider referral services for their sex partners.**

**Comments**

An operational definition could not be specified at the time of publication.

The proposed national data source is STD Surveillance System (STDSS), CDC, NCHSTP.

Provider referral (previously called contact tracing) is the process whereby health department personnel directly and confidentially notify the sexual partners of infected individuals of their exposure to a sexually transmitted disease for the purposes of education, counseling, and referral to health care services.

This objective is modified from Healthy People 2000 objective 19.15, which tracked partner notification of exposure to sexually transmitted diseases by patients with bacterial STDs using STDSS.

See Appendix A for focus area contact information.



## References

---

1. Centers for Disease Control and Prevention (CDC). Case definitions for infectious conditions under public health surveillance. *Morbidity and Mortality Weekly Report* 46 (RR-10): 1997.
2. CDC, Division of STD Prevention. *Sexually Transmitted Disease Surveillance, 1997*. Atlanta, GA: U.S. Department of Health and Human Services (HHS), Public Health Service, CDC, 1998.
3. CDC. Hepatitis B virus: A comprehensive strategy for eliminating transmission in the United States through universal childhood vaccination: Recommendations of the Advisory Committee on Immunization Practices (ACIP). *Morbidity and Mortality Weekly Report* 40(RR-13):1-20, 1991.
4. U.S. Preventive Services Task Force. *Guide to Clinical Preventive Services*. 2nd ed. Washington, DC: HHS, 1995.

