

Patient complains of penile urethral discharge, irritation or dysuria (without urge/frequency)

### Recommended tests

- Urethral swab for gonorrhoea culture (prior to urine test)
- First void urine (first 30ml of stream) for chlamydia and gonorrhoea testing by NAAT (e.g. PCR or SDA)

### Examination findings:

- Profuse purulent penile discharge?

#### YES

##### Presumptive gonorrhoea

OR if contact of gonorrhoea, treat with:

- Ceftriaxone 500mg stat im (make up with 2ml lignocaine 1% or as per data sheet) AND azithromycin 1g po stat

#### NO

Treat for **non-gonococcal urethritis** with:

- Azithromycin 1g po stat OR
- Doxycycline 100mg po twice daily for 7 days\*

\* doxycycline may have superior efficacy for symptomatic urethritis and confirmed chlamydial urethritis – but only where compliance can be assured with the full course of treatment

- If clinical epididymo-orchitis, see Epididymo-orchitis guideline [www.nzshs.org/guidelines](http://www.nzshs.org/guidelines)
- Refer to full guideline if case has drug allergies or anti-microbial resistance is suspected
- Advise to abstain from sex or use condoms until 7 days after treatment and/or until 7 days after all sexual contacts have been treated

### PARTNER NOTIFICATION

- Be clear about language: 'partner' implies relationship – all sexual contacts in the last 2 months should be advised so they can be tested and treated
- Contact(s) should have a sexual health check and if asymptomatic treat empirically with azithromycin 1 gram po stat
- Contacts should be treated without waiting for their test results; if positive for other STIs, refer to specific guideline
- Most choose to tell contacts themselves; giving written information is helpful
- Notifying all contacts may not be possible, e.g. if there is insufficient information or a threat of violence
- Advise contacts to use condoms or abstain from sex for 7 days after initiation of treatment until results of tests are available

### FOLLOW-UP

- By phone or in person 1 week later
- Check results. **If gonorrhoea positive and untreated** - treat with Ceftriaxone 500mg stat im (make up with 2ml lignocaine 1% or as per data sheet) AND azithromycin 1g po stat
- No unprotected sex for 1 week post treatment?
- Completed/tolerated medication?
- All notifiable contacts informed?
- Any risk of re-infection? Re-treatment necessary if re-exposed to untreated contact
- Offer a repeat sexual health check in 3 months
- **If ≥ 2 weeks after treatment the patient complains of persistent or recurrent urethral symptoms consult with a sexual health specialist**

Further guideline information – [www.nzshs.org](http://www.nzshs.org) or phone local sexual health service.