Other formats and languages
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Expedited Partner Therapy (EPT): FAQs for Clinicians

What is Expedited Partner Therapy (EPT)?

EPT allows a clinician to treat the sex partner(s) of their patient who has been diagnosed with chlamydia or gonorrhea without a formal medical examination of the partner(s).

What Sexually Transmitted Infections (STIs) can I treat with EPT?

In Oregon, EPT can be used to treat **chlamydia** and **gonorrhea**. The STIs eligible for treatment with EPT are based on a combination of scientific evidence, national treatment guidelines, Oregon statute, and collaboration between the Oregon Medical Board, Oregon State Board of Nursing, Oregon Board of Pharmacy and Oregon Health Authority (OHA).

Why should I offer EPT?

EPT reduces the risk of patient reinfection and helps stop continued disease transmission. Local health departments do not investigate all cases of chlamydia and gonorrhea and therefore should not be relied upon to treat all sex partners.

When should I offer EPT?

Clinicians should offer EPT to their patients when their sex partner(s) from the prior 60 days is unable or unlikely to seek timely evaluation and treatment. If the patient has had no sexual contact in the past 60 days, offer EPT for their most recent partner. EPT should not be used in cases of suspected intimate partner violence, child abuse, or sexual assault.

Is EPT legal?

Yes, EPT is permissible in 49 states including Oregon. Oregon Revised Statute 676.350 creates an exception to existing prescription requirements that normally requires a medical examination prior to prescribing medication.

Is EPT safe?

The recommended EPT antibiotics have well-characterized safety profiles. EPT is endorsed by the Centers for Disease Control and Prevention (CDC), American Medical Association (AMA), American College of Obstetricians & Gynecologists (ACOG), American Academy of Family Physicians (AAFP), American Academy of Pediatrics (AAP), American College of Emergency Physicians (ACEP), Society for Adolescent Health and Medicine (SAHM) , and American Bar Association (ABA). Prescribers should check with their organization and/or legal counsel for questions about liability for potential injuries to partners resulting from EPT.

What EPT medications should I provide?

- **Chlamydia**: Doxycycline 100 mg orally twice daily for 7 days **or** Azithromycin 1gm orally once. Doxycycline is contraindicated in pregnancy.
- **Gonorrhea**: Cefixime 800 mg orally once. If chlamydia has not been excluded, add chlamydia treatment as noted above.

Providing prepackaged, labelled medication is preferred over a prescription.

What should I include with the medication?

The following information for the partner should accompany all EPT medications (handouts for partners are available in English and Spanish at the OHA EPT website):

- Treatment instructions
- Allergy warnings
- Signs and symptoms for which immediate medical attention should be sought
- Instructions to abstain from sexual activity for 7 days after completing treatment
- Information about locally available HIV/STI screening/treatment services

How do I prescribe EPT?

EPT can be issued by paper prescription, calling it in to a pharmacy, or electronically. There must be annotation that the prescription is for EPT. The partner's name is not required for the EPT prescription. If your patient has multiple partners, you can assign them numbers and write: "EPT for Partner #1 of [insert your patient's name]." A separate prescription is required for each partner. There is no limit to the number of partners that can be treated. Refills are not permitted with EPT. If your EMR does not permit unnamed prescribing, the prescription may be issued under your patient's name with an identifier such as "EPT for Partner of [insert your patient's name.]"

Does insurance cover the cost of EPT?

Since partners are not medically evaluated or given a formal diagnosis, insurance plans may decline EPT coverage. When feasible, providing EPT medication directly to your patient to give to their partner can help avoid pharmacy access and insurance barriers.

Where can I learn more?

CDC EPT Website

Oregon Health Authority EPT Website

Oregon's EPT Statute

Oregon Medical Board rule on EPT

Electronically report Gonorrhea or Chlamydia to public health in Oregon

Public Health Division
HIV/STD/TB Section
971-673-0153 (voice)
prevention.info@odhsoha.oregon.gov
OHA STD Prevention Program Website