Children's Hospital of Philadelphia PolicyLab

Variation in Practice of Expedited Partner Therapy for Adolescents by State Policy Environment

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PURPOSE: The purpose of this study was to assess provider practice of expedited partner therapy (EPT) for adolescents with chlamydial infection across varying state policy environments and compare provider practice in a parallel treatment scenario for a nonsexually transmitted disease.

METHODS: Anonymous survey of randomly selected providers in one of three state EPT policy environments: EPT is (A) explicitly legal; (B) permissible, but not directly referenced in law; or (C) potentially allowable.

RESULTS: Of 195 respondents, only 20% reported ever practicing EPT. Group A providers were more likely to have used EPT than Groups B and C. Commonly cited barriers included missed opportunity to counsel partners and ensuring medication delivery. In parallel hypothetical scenarios, providers were more likely to offer prophylactic antibiotics to a patient's mother for pertussis exposure without a face-to-face visit than the sexual partner of an adolescent with chlamydia.

CONCLUSIONS: Further investigation is needed to better understand provider and policy factors that may facilitate EPT provision to adolescents.

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