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a single dose of ceftriaxone (rocephin) is the preferred treatment for uncomplicated gonococcal infections (1156). patients with positive screening cultures (e.g., n. gonorrhoeae) should be treated empirically unless infection of other genitourinary sites is the likely cause of their symptoms (145,1155). ceftriaxone should not be used to treat women with c. trachomatis infection (1158). ciprofloxacin is an alternate treatment option for treatment of gonorrhea and a first-line treatment for chlamydial infection. patients treated with ceftriaxone or ciprofloxacin should be examined for a treatment response after 6 weeks. women should be screened for chlamydia trachomatis infection only if they have risk factors for infection (149). symptomatic women with c. trachomatis infection should be treated empirically with azithromycin (145,1155). the pregnancy test must be performed to determine the timing of the first dose. first-dose treatment must occur before gonorrhea symptoms occur or within 4 weeks of a previous episode (1155). screening before treatment is recommended for pregnant women (145,1155). screening and treatment of c. trachomatis infection is recommended for women aged >25 years who have had a prior or current sexually transmitted infection and for women aged 20-24 years who have new sex partners (149). screening for women who are not willing to delay treatment (1155) is recommended. the symptoms and signs of chancroid are usually self-limited and can be managed without complex clinical evaluation. aggressive management of genital ulcers includes rapid empiric antibiotic therapy for the treatment of suspected chancroid, followed by a repeat clinical examination and appropriate treatment, if indicated, approximately 1 week later. chancroid is characterized by erythematous (can be painful), warm, and often purulent lesions that are always present on the glans penis or the mucosa of the prepuce in men and on the genital, perineal, or perianal regions of women (11,405). nongenital ulcers might be painless, and not always present on the glans penis or external genitalia. the average treatment length is 7 days (range, 5-14 days). the minimum effective dose of oral doxycycline or erythromycin is 100 mg twice daily (11,405,1300). the recommended duration of treatment after resolution of symptoms is 7 days (1300,11,405). chancroid is one of the most common stis in the united states. if it is suspected clinically, doxycycline or erythromycin should be prescribed in the emergency department.

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