



## Opt-out for a better approach to STI screening

STIs are at an all-time high. Help reduce STI prevalence with a better approach to chlamydia and gonorrhea screening for all female patients ages 15 through 24.<sup>1</sup>



The latest CDC Guidelines endorse opt-out screening<sup>1</sup>

***"When the patient is notified that testing will be performed unless the patient declines, regardless of reported sexual activity, this is known as 'opt-out screening.' Providers might consider opt-out chlamydia and gonorrhea screening for adolescent and young adult females during clinical encounters."***

### Protect her reproductive health

Public health entities like the United States Preventive Services Task Force (USPSTF) and the Centers for Disease Control and Prevention (CDC) consider age a risk factor.<sup>1,2</sup>

Chlamydia (CT) and gonorrhea (NG) are highly concentrated amongst young females

**67%** of females with CT are ages 15 to 24<sup>3</sup>

**54%** of females with NG are ages 15 to 24<sup>4</sup>

Patients rely on you to protect their health—most won't have signs or symptoms that prompt them to ask for testing

**72%** of female patients <25 years of age want their doctors to **automatically test** them for CT and NG once a year<sup>5</sup>

**86%** of females in this age group **don't think they're at risk**<sup>5</sup>

**>84%** of CT and NG cases are **asymptomatic** in females<sup>6</sup>



**At least 20,000** females each year become infertile due to untreated STIs that lead to pelvic inflammatory disease (PID)<sup>7,8</sup>

# Opt-out screening supports better patient care

## Implementing opt-out? Consistency is key

An office-wide policy can help optimize your transition to an opt-out screening policy. Make it known to both staff and patients that your practice tests all females ages 15 to 24 for CT/NG unless they opt-out. Provide materials about your policy at check-in and ensure that CT/NG screening is integrated within routine workflows.

## Opt-out screening can help identify infections earlier and reduce risk



Patient is notified that CT and NG testing will be performed **unless the patient declines**, regardless of reported sexual activity<sup>9</sup>



May help patients feel **less judged** or singled out



Can help **facilitate positive sexual health discussions** between patient and provider



Opt-out screening has the potential to **reduce** the number of **CT cases** by 55%<sup>10</sup>

For more information about opt-out screening, visit [QuestWomensHealth.com](https://www.questwomenshealth.com)

Test Name	Test Code	CPT Code
<i>Chlamydia trachomatis</i> RNA, TMA, Urogenital	11361	87491
<i>Neisseria gonorrhoeae</i> RNA, TMA, Urogenital	11362	87591
<i>Chlamydia trachomatis/Neisseria gonorrhoeae</i> RNA, TMA, Urogenital	11363	87491, 87591

All components of panels can be ordered separately: *Chlamydia trachomatis* RNA, TMA, Urogenital (test code 11361); *Neisseria gonorrhoeae* (test code 11362); *Chlamydia/Neisseria gonorrhoeae* RNA, TMA, Urogenital (test code 11363).



## Quest Advanced Women's Health

Delivering care throughout a woman's life requires testing that you can rely on. Our commitment to you is to make testing more actionable and accessible for you, your patients, and their families.

1. CDC. Sexually Transmitted Infections Treatment Guidelines, 2021. Accessed January 3, 2022. <https://www.cdc.gov/std/treatment-guidelines/STI-Guidelines-2021.pdf> 2. Davidson KW, Barry MJ, Mangione CM, et al; US Preventive Services Task Force. Screening for chlamydia and gonorrhea: US Preventive Services Task Force Recommendation Statement. *JAMA*. 2021;326(10):949-956. doi:10.1001/jama.2021.14081 3. CDC. Sexually Transmitted Disease Surveillance 2019. Table 10. Chlamydia — Reported cases and rates of reported cases by age group and sex, United States, 2015-2019. Accessed January 18, 2022. <https://www.cdc.gov/std/statistics/2019/tables/10.htm> 4. CDC. Sexually Transmitted Disease Surveillance 2019. Table 21. Gonorrhea — Reported cases and rates of reported cases by age group and sex, United States, 2015-2019. Accessed January 18, 2022. <https://www.cdc.gov/std/statistics/2019/tables/21.htm> 5. Quest Diagnostics. Universal STI testing research among young women and moms: topline report. December 2017. 6. Detels R, Green AM, Klausner JD, et al. The incidence and correlates of symptomatic and asymptomatic *Chlamydia trachomatis* and *Neisseria gonorrhoeae* infections in selected populations in five countries. *Sex Transm Dis*. 2011;38(6):503-509. 7. CDC. CDC fact sheet: how STDs impact women differently from men. Accessed December 14, 2021. <https://www.cdc.gov/nchhstp/newsroom/docs/factsheets/stds-women.pdf> 8. CDC. CDC fact sheet: Pelvic inflammatory disease (PID). Updated January 27, 2017. Accessed September 14, 2021. <https://www.cdc.gov/std/pid/stdfact-pid-detailed.htm> 9. Workowski KA, Bachmann LH, Chan PA, et al. Sexually Transmitted Infections Treatment Guidelines, 2021. *MMWR Recomm Rep*. 2021;70(4):1-187. doi:10.15585/mmwr.rr7004a1 10. Owusu-Edusei K Jr, Hoover KW, Gift TL. Cost-effectiveness of opt-out chlamydia testing for high-risk young women in the US. *Am J Prev Med*. 2016;51(2):216-224. doi:10.1016/j.amepre.2016.01.007

The CPT codes provided are based on American Medical Association guidelines and are for informational purposes only. CPT coding is the sole responsibility of the billing party. Please direct any questions regarding coding to the payer being billed.

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[QuestWomensHealth.com](https://www.questwomenshealth.com)

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