


UCLA MEDICAL GROUP / Managed Care Operations		
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**UCLA Health Care / UCLA Medical Group Practice Guidelines
Chlamydia Screening in Women**

The following recommendation is based upon the current national guidelines for Chlamydia screening:

- Annual chlamydia screening of all **sexually active* women** younger than 25 years, as well as older women with risk factors such as new or multiple sex partners, or a sex partner who has a sexually transmitted infection
- The recommended screening test at UCLA is PCR, which can be done as follows:
 - As an additional request added to a liquid-based PAP specimen (See: UCLA Cytology Women’s Health Screen form #400013, check box for Chlamydia direct detection test #7179)
 - As a separate **Chlamydia PCR test (UCLA Clinical Labs Test # 7179)**. The direct detection PCR / can be ordered on urine, cervical, and endocervical **specimens**

NOTE: All other Chlamydia tests as well as Chlamydia culture are **NOT RECOMMENDED** for standard chlamydial screening.

***Sexually active** is defined administratively by CPT and ICD-9 combinations in 16-25-year-old women that suggest sexual activity: Any type of PAP smear screenings contraceptive procedures and fittings, sterilization, pregnancy, pregnancy tests, serology related to sexually transmitted diseases, prescriptions for contraceptives, and any diagnosis related to sexually transmitted agents (e.g. herpes), pregnancy and its complications, infertility, or PID.

Why is this important?

Nationally and in California it appears that less than 36% of sexually active women receive Chlamydia screening. The U.S. Preventive Services Task Force and NCQA / HEDIS have recommended that providers routinely screen all sexually active women who are 25 and younger regardless of symptoms.

Chlamydia is the most commonly reported sexually transmitted infectious disease in the U.S. (approximately three million new cases each year), of which 76% are women under 25 years of age. About 75% of these women have no symptoms.

A woman with untreated Chlamydia has a 40% risk of PID, high risk of infertility, chronic pelvic pain; she is more likely to acquire HIV infection if exposed and has a higher risk of cervical cancer. Newborns of mothers infected with Chlamydia can develop eye infections and pneumonias. In addition, the cost of treatment and management of Chlamydia and the consequences of untreated Chlamydia infection is enormous, exceeding \$2.4 billion per year in the United States.

Reference: USPSTF
<https://www.uspreventiveservicestaskforce.org/uspstf/document/RecommendationStatementFinal/chlamydia-and-gonorrhea-screening>