HNHU Follow-up for Positive Chlamydia and Gonorrhea

Positive Chlamydia and/or Gonorrhea report received Is the client High risk? (Pregnant, under 18 years of age, safety or abuse concerns, co-infection with another STI, more than three STIs in the past 5 years) **YES** NO Complete Health Care Provider STI Reporting Complete Health Care Provider STI Reporting Form Form and indicate high-risk criteria. Fax to 519-426-4767. Fax to 519-426-4767. HNHU will not follow up with client, unless HNHU will follow up with client requested by the health care provider.

