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Dear colleague,

I am reaching out to you and other colleagues with a reminder and request regarding expedited partner therapy (EPT). As we focus on health equity opportunities via diverse care access options in Wisconsin, the use of EPT is consistent with best practice guidelines and state law.

To reduce the health harm caused by sexually transmitted infections (STI) and their spread in our communities, treating partners is paramount to reducing health harms including reduced fertility, ectopic pregnancy, premature birth, chronic pelvic pain, and fetal death. As you know, STIs are often asymptomatic or cause nonspecific, self-limited symptoms in patients and their partners. Access to effective antibiotic treatment to reduce health harm and support health equity is improved with the legal and evidence-based option of EPT for chlamydia, gonorrhea, and trichomoniasis.

[Information on EPT](#) is available to support care of your patients and their partners. In addition, I offer you my support and that of the Wisconsin Department of Health Services Reproductive Health and Family Planning (RHFP) and Sexually Transmitted Infection teams to address any concerns or systematic problems encountered in providing this best practice option for STI treatment and prevention in our communities throughout the state. Together, with our pharmacy colleagues, we can and should legally provide evidence-supported treatment access to individuals, directly and indirectly, by expanding EPT to all to support patient-centered care and access.

Join me and your colleagues in supporting health equity through improved access to STI treatment. EPT supports equity for all.

Respectfully,

Mary S. Landry M.D., FACOG

Medical Director, State of Wisconsin Title X Program