



Mucopurulent Cervicitis (MPC)

DEFINITION	Inflammatory process with the presence of mucopurulent discharge from the cervix; etiology may be infection of ecto or endo cervix, neoplasia, inflammatory systemic process, or trauma/chemical irritation.
SUBJECTIVE	May include: <ol style="list-style-type: none">1. No symptoms2. Risk factors for STDs3. Abnormal vaginal discharge4. Abnormal vaginal bleeding (i.e., post-coital, or intermenstrual)5. Dysuria or urinary frequency6. Sexual partner with symptoms of urethral discharge, dysuria, or history of NGU, epididymitis or prostatitis
OBJECTIVE	May include: <ol style="list-style-type: none">1. Mucopurulent (green or yellow) discharge from/on the cervix2. Cervical erythema and/or contact bleeding3. Mild tenderness on compression of cervix
LABORATORY	May include: <ol style="list-style-type: none">1. Vaginal/endocervical wet prep to rule out coexisting vaginal infection and assess polymorphonuclear leukocytes (WBCs)2. Test for chlamydia and gonococcal infection (although in most cases of MPC, neither organism can be isolated)3. HIV and syphilis testing
ASSESSMENT	Mucopurulent cervicitis
PLAN	<ol style="list-style-type: none">1. First Recommended Treatment: Doxycycline 100 mg orally 2 times/day for 7 days2. Alternative Regimen: Azithromycin 1 g orally in a single dose.3. Treatment for chlamydia only, if the prevalence of <i>N. gonorrhoeae</i> is low but the likelihood of chlamydia is substantial (see Chlamydia Infection Protocol RD-1)4. Treatment for gonorrhea and chlamydia in client populations with high prevalence of both infections (see Gonococcal Infection Protocol RD-2)5. Await test results if the prevalence of both infections is low and if compliance with recommendation for a return visit is likely6. Clients who have MPC and also are infected with HIV should receive the same treatment regimen as those who are HIV negative
CLIENT EDUCATION	<ol style="list-style-type: none">1. Provide client education handout(s) with review of symptoms, treatment options, and medication side effects2. Review safer sex education, if appropriate3. Recommend that client RTC PRN
CONSULT/ REFER TO PHYSICIAN	<ol style="list-style-type: none">1. Clients whose symptoms do not resolve following treatment.

References:

1. Pp 53-55 <https://www.cdc.gov/std/treatment-guidelines/STI-Guidelines-2021.pdf> Pp 65-67.
2. Hatcher RA, Nelson A, Trussell J, Cwiak C, Cason P, Policar MS, Edelman A, Aiken ARA, Marrazzo J, Kowel D, eds. Contraceptive Technology. 21 editions. New York, NY: Ayer Company Publishers, Inc., 2018. pp 612-613