







SYPHILIS QUICK GUIDE FOR PROVIDERS

First 12 months of infection					1+ year(s) later
Treatment*: 1 dose of 2.4 mu Long-Acting (LA) Bicillin					Tx*: 3 doses of 2.4 mu LA Bicillin @ 7 day intervals
EARLY	PRIMARY	EARLY	SECONDARY	EARLY	LATE OR UNKNOWN
					
10 - 90 days Average = 3 weeks	1 - 5 weeks Average = 3 weeks	0 - 10 weeks Average = 4 weeks	2 - 6 weeks Average = 4 weeks	Ends 12 months after initial infection	Infected 1+ year(s) ago OR unknown infection date
A person becomes infected with syphilis. One OR both tests may be negative. If patient is a partner of a symptomatic patient treat without waiting for test results.	A painless sore appears at exposure site, which may go unnoticed. One test may be negative. CAN spread the disease to partners. Partners exposed within the last 90 days should be treated, regardless of test results.	Symptoms may temporarily disappear OR patient may immediately progress into secondary syphilis.	New symptoms appear: Sores in the mouth and/or genital area; a rash (especially on hands/feet); flu-like symptoms; patchy hair loss. Primary lesion may still be present. CAN spread the disease to partners. Partners exposed within the last 90 days should be treated, regardless of test results.	Symptoms disappear HOWEVER patient may relapse into secondary syphilis at ANY TIME .	Symptoms typically disappear. May relapse into secondary OR progress into tertiary syphilis, affecting multiple organ systems and can be fatal. Tertiary symptoms would appear 10-30 years after infection.

- - - • Pregnant women can pass the disease to their baby at **any time** - - - - - ➔
- - - • Patients can develop neurologic symptoms at **any time** - - - - - ➔

*Please use the most current version of the CDC STD Treatment Guidelines if treating a case with neuro, ocular, otic, or other late clinical manifestations. For pregnant women requiring 3 doses of Bicillin, doses MUST be spaced exactly 7 days apart. Additionally, for pregnant women diagnosed within the first 12 months of their infection, some experts recommend a 2nd dose of Bicillin 7 days after the initial dose. For non-pregnant patients, doxycycline is an appropriate alternative therapy if patient is allergic to Bicillin. For cases infected less than 12 months ago, treatment is 100 mg doxycycline x 2/day for 14 days and for late or unknown duration syphilis, treatment is 100 mg doxycycline x 2/day for 28 days. Doxycycline is NEVER an appropriate therapy for pregnant women.

Syphilis Staging Flowchart

Does the patient have signs or symptoms present at first test or examination?

Yes

Any of the following?

- Lesion/ulcer
- Localized lymphadenopathy

If 'YES' to ANY

PRIMARY

Any of the following?

- Sores in the mouth and/or genital area
- Generalized rash
- Palmar/plantar rash
- Generalized lymphadenopathy
- Flu-like symptoms
- Patchy hair loss

If 'YES' to ANY

SECONDARY

No

Latent

Any of the following in the past 12 months?

- Negative syphilis test
- Known contact to an early case
- Good history of typical signs/symptoms
- 4-fold increase in titer
- Only possible exposure was this year

If 'YES' to ANY

**EARLY LATENT
(<1 year)**

If 'NO' to ALL

**UNKNOWN
DURATION or LATE**