

## 519-258-2146 Ext. 1420 | www.wechu.org

## **STI Medication Order Form Fax Completed Form to 226-783-2132**

Allow one week for processing. Please call for expedited ordering.

The Windsor-Essex County Health Unit provides provincially funded medications to healthcare providers for the treatment of Sexually Transmitted Infections at **NO COST**.

Physicians are encouraged to maintain an appropriate amount of stock based on client needs.

| Off  | ffice/Physician:   |               | Telephone #:                          |               |              |
|--|--|---------------|---------------------------------------|---------------|--------------|
| Ad   | dress:   |               |                                       |               |              |
|  | Contact Person:  |               |                                       |               |              |
| Da   | te of order:   |               | Pick-up:                              | ☐ Windsor     | ☐ Leamington |
| Pi   | ck up between 08:30 and 4:30 Mond  | day to Frid   | ay at Hea                             | alth Unit Lob | by Window    |
| Me   | dications based on Treatment Guidelines To be used for STI infections Only                     | # of<br>Doses | Expiry and Lot Number<br>(office use) |               |              |
| Azitl  | nromycin 1g PO in a single dose  |               |                                       |               |              |
| 250  | Omg x 4 tablets = 1 dose   |               |                                       |               |              |
| Doxy   | ycycline 100 mg po bid x 7 days  |               |                                       |               |              |
|  |  |               |                                       |               |              |
| **N6   | ew - Ceftriaxone 500 mg IM single dose   |               |                                       |               |              |
| 250  | Omg vial x 2 = 1 dose  |               |                                       |               |              |
|  | ent for ceftriaxone  |               |                                       |               |              |
| ☐ Lidocaine Hydrochloride injection 1% <b>OR</b> ☐ Sterile Water |  |               |                                       |               |              |
|  | Gentamycin is only available thr<br>Please call the Health Un                                  | -             | •                                     |               | ogram        |
|  |  |               |                                       |               |              |
|  | For WECHU Office Use Only:   |               |                                       |               |              |
|  | Date Order Received: Processed by:   |               |                                       |               |              |
|  | Date Order Ready: Contacted physician office: (date & initials)  Date picked up: Picked-up by: |               |                                       |               |              |
|  |  |               |                                       |               |              |