

## Gonorrhoea Notification Form

This is a Schedule 1, Section C disease notifiable to the Medical Officer of Health under Sections 74 and 74AA of the Health Act 1956 using non-identifiable data. Timely completion is a legal requirement.

Please ensure the case fits the confirmed case definition below. Completion of this form is not required if the case does not fit the case definition.

## Ministry of Health Gonorrhoea Case Definition

## Case Classification

Under investigation: A case that has been notified but information is not yet available to classify it.

Confirmed: A case with laboratory definitive evidence [either isolation (culture) or *N. gonorrhoeae* or detection of *N. gonorrhoeae* nucleic acid (e.g. NAAT or PCR) from a clinical specimen].

Not a case: A case that has been investigated and subsequently found not to meet the case definition.

**Name and Contact Details of Reporting Health Provider**

Name of health provider

\_\_\_\_\_

Name of organisation/clinic

\_\_\_\_\_

Email address

\_\_\_\_\_

Phone number

\_\_\_\_\_

**Case Details**

Current gender identity (self-reported by patient):

- Male  
 Female  
 Other

Please specify gender identity

\_\_\_\_\_

Sex assigned at birth

- Male  
 Female

Date of Birth (Please confirm against your PMS)

If there is a discrepancy, please contact  
 CDRSupport@esr.cri.nz

\_\_\_\_\_

age at the time of case report

\_\_\_\_\_

City/town of residence at time of diagnosis. For rural cases the nearest city/town

District where case resided at time of diagnosis

- Te Tai Tokerau
- Waitematā
- Te Toka Timai Auckland
- Counties Manukau
- Waikato
- Lakes
- Hauora a Toi Bay of Plenty
- Tairāwhiti
- Taranaki
- Te Matau a Māui Hawkes Bay
- Whanganui
- Te Pae Hauora o Ruahine o Tararua MidCentral
- Capital, Coast and Hutt Valley
- Capital, Coast and Hutt Valley
- Wairarapa
- Nelson Marlborough
- Te Tai o Poutini West Coast
- Waitaha Canterbury
- South Canterbury
- Southern

Ethnicity

- NZ European
  - Maori
  - Samoan
  - Cook Island Maori
  - Niuean
  - Chinese
  - Indian
  - Tongan
  - Other (specify below)
  - Unknown
- (tick all that apply)

Specify ethnicity

\_\_\_\_\_

**Basis of Diagnosis**

**INITIAL TESTING**

Date of positive test

\_\_\_\_\_

**Specimen site (tick all with positive results)**

	PCR	Culture
Anorectal	<input type="checkbox"/>	<input type="checkbox"/>
Urethra/urine	<input type="checkbox"/>	<input type="checkbox"/>
Vagina or cervix	<input type="checkbox"/>	<input type="checkbox"/>
Throat/pharynx	<input type="checkbox"/>	<input type="checkbox"/>
Unknown	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>

Specify other site

\_\_\_\_\_

## Other Clinical Details and Risk Factors

Complicated infections

(tick all that apply)

- Pelvic inflammatory disease (PID)  
 Epididymitis/epididymo orchitis  
 Other (please specify eg. arthritis, disseminated infection)

Please specify

Was the case pregnant/postpartum at the time of diagnosis?

- Yes  
 No  
 Unknown

At what stage of pregnancy or postpartum was this screening/testing done?

- First trimester  
 Second trimester  
 Third trimester  
 Labour/Delivery  
 Postpartum period (6 weeks after delivery)

HIV serostatus at the time of gonorrhoea diagnosis

- Negative  
 Positive  
 Unknown

Was the case using HIV infection pre-exposure prophylaxis (PrEP)?

- Yes  
 No  
 Unknown

Sexual behaviour in the previous 12 months

- Opposite sex partners only  
 Same sex partner only  
 Both opposite and same sex partners  
 Unknown  
 Not applicable (e.g. conjunctivitis in an infant)

Number of sex partners in the past 3 months

- 0  
 1  
 2-4  
 5-10  
 >10

Is the case a sex worker?  
(includes receiving money or drugs in exchange for sexual services)

- Yes  
 No  
 Unknown

Was this infection potentially acquired overseas?

(ie. if it is unclear but possible choose yes)

- Yes  
 No  
 Unknown

What country (countries) did the case travel to where they potentially acquired the infection?

## Case Classification

**Please use the patient's laboratory and clinical data and the surveillance case definitions to decide on the case classification**

- Case Classification  Under investigation
- Ministry of Health Gonorrhoea Case Definition  Confirmed
- Not a case

## Management

Management, including treatment and contact tracing of partners, is outlined in the New Zealand Sexual Health Society (NZSHS) guidelines.  
STI guidelines for Primary care

Contact tracing is the responsibility of the treating doctor and an essential component of the clinical and public health management of cases.

Comments