INSTRUCTIONS FOR LOCAL HEALTH DEPARTMENT STAFF ONLY
Use the approved language in this standing order to create a customized standing order exclusively for your agency.
Print the customized standing order on agency letterhead. Review standing order at least annually and obtain Medical Director’s signature.
Standing order must include the effective start date and the expiration date.

Assessment

Subjective Findings
Clients may present with the following history:
- atypical lesions
- painful multiple vesicular or ulcerative lesions
- genital sore(s) without vesicles
- external dysuria
- painful sex
- asymptomatic (lesion maybe internal)
- reports contact to Herpes

Subjective findings alone do not satisfy the N.C. Board of Nursing requirement for collecting or ordering a HSV culture by an STD Enhanced Role Registered Nurse (STD ERRN).

Objective Findings
The following must be present before an STD ERRN can collect HSV culture(s) by standing order:
1. Client presents to STD clinic with genital, anal or oral lesions not previously diagnosed as HSV.

Plan of Care
Implementation
A registered nurse or STD ERRN employed or contracted by the local health department may order a HSV culture for any oral, genital or anal lesion collected by the STD ERRN or other Medical Provider.

Nursing Actions
A. When the STD ERRN identifies a new lesion, the STD ERRN must consult with the medical director or medical provider during the same STD visit. Diagnosing a lesion is beyond the scope of practice of a registered nurse with or without training as an STD ERRN. The STD ERRN should clarify if the medical provider desires to see all lesions prior to specimen collection or after specimen collection.

B. North Carolina State Lab of Public Health requires the following when requesting HSV culture:
- submit DHHS form #3431
- pregnant client with lesion(s) or lesion(s) must be atypical
- non-pregnant or male client presenting with atypical lesions(s) where a clinical distinction cannot be made by a medical provider
- urogenital sites are limited to one specimen per client. If more than one urogenital site is cultured, submit both swabs in the same transport tube.
- do not place more than two swabs in a single viral transport medium vial
- submit no more than three specimens per client with each

C. Specimen Collection by STD ERRN
Vesicular or pustular lesions:
- obtain viral culture media from refrigerated unit, check expiration date
- label viral culture vial with client’s data label and anatomical site of specimen
- use a sterile instrument (e.g., 18-gauge needle) to open the fluid filled vesicle
- use a Dacron-tipped, rayon-tipped, or flocked swabs with plastic or aluminum shafts
  *Note: Cotton-tipped swabs with wooden shafts are not recommended; calcium alginate swabs are not acceptable.*
- using firm pressure, absorb the fluid with a sterile swab and scrape the perimeter of the lesion obtaining cellular material on the swab tip
- avoid causing excessive bleeding
• break off the swab tip into a vial of virus transport medium
• screw the cap on tightly
• immediately refrigerate until transported

Crusted lesions:
• obtain viral culture media from refrigerated unit, check expiration date
• label viral culture vial with client’s data label and anatomical site of specimen
• remove the crust of the lesion with moistened gauze
• scrape the base of the lesion with a sterile Dacron tipped, rayon tipped or flocked swab with a plastic or aluminum shafts
  Note: Cotton-tipped swabs with wooden shafts are not recommended; calcium alginate swabs are not acceptable.
• using firm pressure, absorb the fluid with a sterile swab and scrape the perimeter of the lesion obtaining cellular material on the swab tip
• avoid causing excessive bleeding
• break off the swab tip into a vial of virus transport medium
• screw the cap on tightly
• immediately refrigerate until transported

D. Interpretation of Lab Findings
Positive Findings – Isolation of HSV in tissue culture

Criteria for Notifying the Medical Provider
• contact the Medical Director or Medical Provider, if there is any question about whether to carry out any provision of the standing order
• contact the Medical Director or Medical Provider when any lesion is present on exam
• contact the Medical Director or Medical Provider, if client desire HSV type-specific serology (TSS)
• acute abdominal tenderness or rebound tenderness on exam
• adnexal tenderness on exam
• cervical motion tenderness on exam
• sustained cervical bleeding on exam or ANY reported vaginal spotting/bleeding by a pregnant client
• scrotal pain or swelling
• oral temperature ≥ 101° F.

Follow Up
• If the client has a documented history of herpes in the same location, a repeat culture is not required before treatment can be dispensed.

Approved by: ___________________________  Date approved: ____________
Local Health Department Medical Director

Reviewed by: ____________________________  Date reviewed: ___________
Director of Nursing/Nursing Supervisor

Effective Date: ______________
Expiration Date: ______________

Legal Authority: Nurse Practice Act, N.C. General Statutes 90-171.20(7)(a)(e)(f)&(8)(c)