**Syphilis Screening**

**Immuno Chromatographic Strip Test (ICST)**

**Testing Procedure**

1. **ICST requirements** (Check the expiry date of the kit. Keep the kit on a flat surface away from sunlight.)
2. Prick the finger with a lancet or needle.
3. Collect blood in the dropper without air bubbles.
4. Add four drops of buffer to the reagent port (B) immediately.
5. Mark the ID number, date and time after adding the buffer in the kit.
6. Read the result at the end of 15 minutes.
7. **Dont’s**
   - Air bubbles in the dropper.
   - Spirit has not yet dried up and the blood is spreading over.
   - Spilt over of blood into the buffer well.

**Interpretation of Results**

- **Report as POSITIVE** if pink band appears in both control (C) and test (T) windows (Go to Flow chart)
- **Report as NEGATIVE** if pink band appears only in the control window (Go to Flow chart)
- **Report as INVALID** if pink band doesn’t appear in both the windows. REPEAT THE TEST WITH A NEW KIT

**Flow Chart for Syphilis Screening by ICST test**

- KP visiting Clinic
- Screen with ICST
- If negative, follow with 6 monthly ICST
- If positive, evaluate treatment history
  - Treatment completed as per guidelines
  - Not treated/treatment not completed as per guidelines
  - “Treat for appropriate stage of syphilis”
  - Counsel and ensure follow up (for drug adherence and side effects)

**Flow Chart for Syphilis Screening by RPR/VRL test**

- KP visiting Clinic
- Screen with RPR
- If negative, evaluate treatment history
- If RPR is available, follow 6 monthly RPR
  - Treatment completed as per guidelines
  - Not treated/treatment not completed as per guidelines
- “Treat for appropriate stage of syphilis”
- Counsel and ensure follow up (for drug adherence and side effects)

**Notes:**

- Treatment of syphilis: Depending on the stage and clinical manifestations of the disease, treat as per the National STI treatment guidelines.
- If possible, draw blood for RPR before dispensing treatment (baseline titre if previously tested with ICST) and after 3 months (to know the treatment response).
- If follow-up RPR is non-reactive or titre is decreasing, continue with 6 monthly RPR testing.
- If there is 2 fold increase from baseline titre, evaluate clinically and explore the treatment history (drug adherence). The KP may require referral to higher level STD clinic.
- Infection control:
  - Follow infection control protocol and Bio medical waste management guidelines when disposing the used materials.