

Letter to GP, Obstetrics & Neonatal team re: Antenatal Syphilis Diagnosis & Management -  
And to be uploaded to mum & baby's Badgernet and clinical portal records

Name: \_\_\_\_\_ CHI: \_\_\_\_\_ Date: \_\_\_\_\_

Date of syphilis diagnosis: \_\_\_\_\_ Pregnancy EDD: \_\_\_\_\_

Stage of syphilis diagnosed in pregnancy \_\_\_\_\_

Additional Information \_\_\_\_\_

HIV and other BBV status \_\_\_\_\_

Treatment details \_\_\_\_\_

Date treatment completed/due to complete \_\_\_\_\_

	Date
EIA	
TPHA	
IgM	
RPR	

GUM ADVICE TO PAEDIATRICIANS (tick as required)

- see West of Scotland congenital syphilis guideline

Infant requires no physical examination above routine. No syphilis serology required	
Assess infant clinically: if no physical signs of syphilis, perform syphilis serology on infant serum (not cord blood) for EIA IgM and RPR. N.B. If physical signs are present consider additional investigations. Refer to West of Scotland Syphilis guideline and discuss with GUM or ID consultant	
Treat infant at birth with _____ after clinical assessment, perform syphilis serology on infant serum (not cord blood) for EIA IgM and RPR and additional tests as per guideline	

Please discuss infant blood test results with GUM (or Paediatric infectious diseases team if OOH or suspicion of neonatal infection)

Follow Up

Infants who have serology tests at birth require follow up as per the three pathways detailed in the WoS guideline. Tick the appropriate follow-up pathway below once the infant's serology is known.

Baby Name \_\_\_\_\_ CHI \_\_\_\_\_

Age	Infants treated for congenital syphilis at birth	Infant not treated for syphilis and RPR <4x mother's and IgM negative at birth	Infant not treated for syphilis and RPR and IgM negative at birth
Select Follow up pathway	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1 month	RPR TP Syphilis IgM		
3 months	RPR TP Syphilis IgM	RPR TP Syphilis IgM	RPR TP Syphilis IgM If negative: discharge If positive: Repeat at 6 months
6 months	RPR	RPR If negative: discharge If positive: repeat at 12 months	RPR If negative: discharge If positive: discuss with GUM team.
12 months	RPR Discharge if RPR has achieved sustained 4x drop from peak level. If RPR remains higher, discuss with GUM team.	RPR If negative: discharge If positive: discuss with GUM team.	

For further information please contact Local sexual health team

Yours sincerely,

Signature: \_\_\_\_\_

Consultant in Genitourinary Medicine

Signature: \_\_\_\_\_

Consultant Neonatologist