

## 15.1 Bacterial Vaginosis (Hemophilus, Gardnerella)

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### SUBJECTIVE

May include:

1. Malodorous discharge.
  2. Discharge present at introitus.
  3. Introital dyspareunia or vulvar irritation.
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### OBJECTIVE

May include:

1. Malodorous discharge.
  2. Gray, creamy, homogenous discharge.
  3. Minimal redness/irritation of vulva and vaginal walls.
  4. Vaginal pH > 4.5.
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### LABORATORY

1. Saline wet mount shows clue cells. Epithelial cells studded with gram negative minute rods (coccobacilli) adherent to cell surfaces.
  2. KOH wet mount has fishy odor.
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### ASSESSMENT

Bacterial vaginosis.

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### PLAN

Treat according to regimens recommended by current CDC STD Treatment Guidelines.

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### CLIENT EDUCATION

1. Stress importance of completing medication.
  2. Stress importance of not interrupting treatment during menses.
  3. Advise to avoid intercourse during treatment or to use condoms (advise latex condoms may be weakened by oil based creams).
  4. Counsel on importance of perineal hygiene.
  5. Advise patient not to use tampons during treatment with vaginal creams.
  6. RTC if symptoms persist.
  7. Avoid alcohol use with Metronidazole—24 hours before, during, and 24 hours after treatment regimen.
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### CONSULT/REFER TO PHYSICIAN

1. Persistent infections.
  2. Extreme irritation or excoriation.
  3. Metronidazole/Clindamycin allergy.
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