



May 2024

Dear Colleagues,

Effective May 3, 2024, New York State requires a syphilis test on all pregnant persons during the third trimester of pregnancy under Public Health Law §2308, as amended by sections 4 and 5 of Part AA of Chapter 57 of the Laws of 2023. Before, syphilis testing was only required at the time of the first examination and again at delivery under 10 NYCRR section 69-2.2. With the addition of third trimester testing, the law now effectively requires at least three syphilis screenings during pregnancy. Additional screening may be warranted; more frequent screening during pregnancy is best made through a shared clinical decision-making process between the patient and provider.

To meet this additional syphilis screening requirement, pregnant persons should be tested for syphilis at 28 weeks of pregnancy, or as soon thereafter as reasonably possible, but no later than at 32 weeks of pregnancy. For pregnant persons who screen negative at their first exam, this third trimester screen will ensure adequate time for persons who seroconvert during their pregnancy to be appropriately treated prior to delivery. For additional details, refer to the [Interim Guidance](#) issued in July of 2023.

It is strongly recommended that the third trimester screening for syphilis be coupled with the [recommended third trimester screening for HIV](#).

Syphilis Screening Guidance

Syphilis screening during pregnancy

Standard serologic screening for syphilis during pregnancy includes both the traditional (beginning with a quantitative nontreponemal test) and reverse screening algorithms (beginning with a treponemal antibody test).

For additional diagnostic considerations, please refer to the [STI Treatment Guidelines, 2021](#) from the Centers for Disease Control and Prevention.

Recommended treatment regimens

Pregnant persons should be treated with the recommended regimen per their specific stage of infection with Penicillin G, as per [STI Treatment Guidelines, 2021](#).

Partner management

Should a pregnant person be diagnosed with syphilis, Partner services are available as needed to support the management of their sex partner(s). For more information, please refer to [Accessing Partner Services](#).

However, it should be noted that syphilis screening requirements during pregnancy are not waived for persons reporting only one sexual partner, as transmission is still possible. A non-judgmental approach to this sexual health conversation is necessary. For more information, please refer to Syphilis, Management of Sex Partners in the [STI Treatment Guidelines, 2021](#).

Reporting requirements

For all New York State jurisdictions, physicians are required by law to:

- Report cases to the local health officer (New York State Public Health Law Section 2101; New York State Codes, Rules and Regulations, Title 10 Section 2.10), and
- Cooperate with State and local health officials' efforts to determine the source and control the spread of sexually transmitted infections (New York State Codes, Rules and Regulations, Title 10, Chapter 1, Part 2, Section 2.6).

Resources

For clinical questions regarding syphilis staging, patient and infant treatment, partner treatment, and recommended clinical follow up for pregnant persons with syphilis in New York State, clinical consultation is available through the Clinical Education Initiative line 1-866-637-2342 (press 6, then press 1 to speak with pediatric infectious disease specialist about syphilis in newborns; press 6, then 2 to speak with an adult Infectious Disease specialist about syphilis, syphilis in pregnancy, and other sexually transmitted infection related questions).

A [Frequently Asked Questions](#) document is also available.

For questions or inquiries regarding syphilis screening during pregnancy, please contact the New York State Department of Health AIDS Institute's Office of Sexual Health and Epidemiology at stdc@health.ny.gov

Sincerely,

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