



February 6<sup>th</sup>, 2026

Maryland Senate  
Finance Committee  
3 East Miller Senate Office Building  
Annapolis, Maryland 21401

Dear Honorable Chair, Vice-Chair and Members of the Committee:

On behalf of the pediatric nurse practitioners (PNPs) and fellow pediatric-focused advanced practice registered nurses (APRNs) of the National Association of Pediatric Nurse Practitioners (NAPNAP) Chesapeake Chapter, we respectfully submit this letter in strong support of Senate Bill 394, *Public Health – Expedited Partner Therapy – Bacterial Vaginosis*, sponsored by Senator Gile.

The Maryland Chesapeake Chapter of NAPNAP represents pediatric-focused advanced practice registered nurses who provide comprehensive primary, sexual, and reproductive health care to infants, children, adolescents, and young adults throughout Maryland. Our members routinely diagnose and manage reproductive tract infections and are acutely aware of the clinical and public health consequences of untreated or recurrent infections, particularly among adolescents and young adults.

SB 394 represents an important, evidence-based expansion of Maryland’s expedited partner therapy (EPT) statute. By adding bacterial vaginosis to the list of diagnoses for which certain health care providers may prescribe, dispense, or otherwise provide antibiotic therapy to a sexual partner without requiring a personal physical assessment, this bill addresses a common and frequently recurrent condition that disproportionately affects adolescent and young adult patients. Reinfection from untreated partners remains a significant barrier to effective treatment and contributes to persistent symptoms, repeat clinical visits, and preventable complications.

From a pediatric and adolescent health perspective, allowing EPT for bacterial vaginosis promotes timely treatment, improves adherence to care plans, and reduces recurrence. Adolescents and young adults often face barriers to accessing care, including transportation challenges, confidentiality concerns, and limited appointment availability. Expanding EPT authority supports patient-centered, trauma-informed care while advancing broader public health goals. SB 394 aligns with current clinical practice and public health strategies aimed at reducing reproductive tract infections and promoting sexual health equity. Enabling providers to treat both patients and their partners strengthens prevention efforts and helps reduce downstream healthcare costs associated with untreated or recurrent infections.

The Maryland Chesapeake Chapter of NAPNAP strongly supports SB 394 and urges the Senate Finance Committee to issue a favorable report. We thank you for your leadership and commitment to improving public health outcomes for Maryland’s adolescents and young adults. The pediatric advanced practice nurses of your state are grateful to you for your attention to these crucial issues. The Chesapeake Chapter of the National Association of Pediatric Nurse Practitioners membership includes over 200 primary and acute care pediatric nurse practitioners who are committed to improving the health and advocating for Maryland’s pediatric patients. If we can be of any further assistance, or if you have any questions, please do not hesitate to contact the Chesapeake Chapter legislative committee or president, Yvette Laboy at [mdchesnapnapleg@outlook.com](mailto:mdchesnapnapleg@outlook.com).

Sincerely,

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