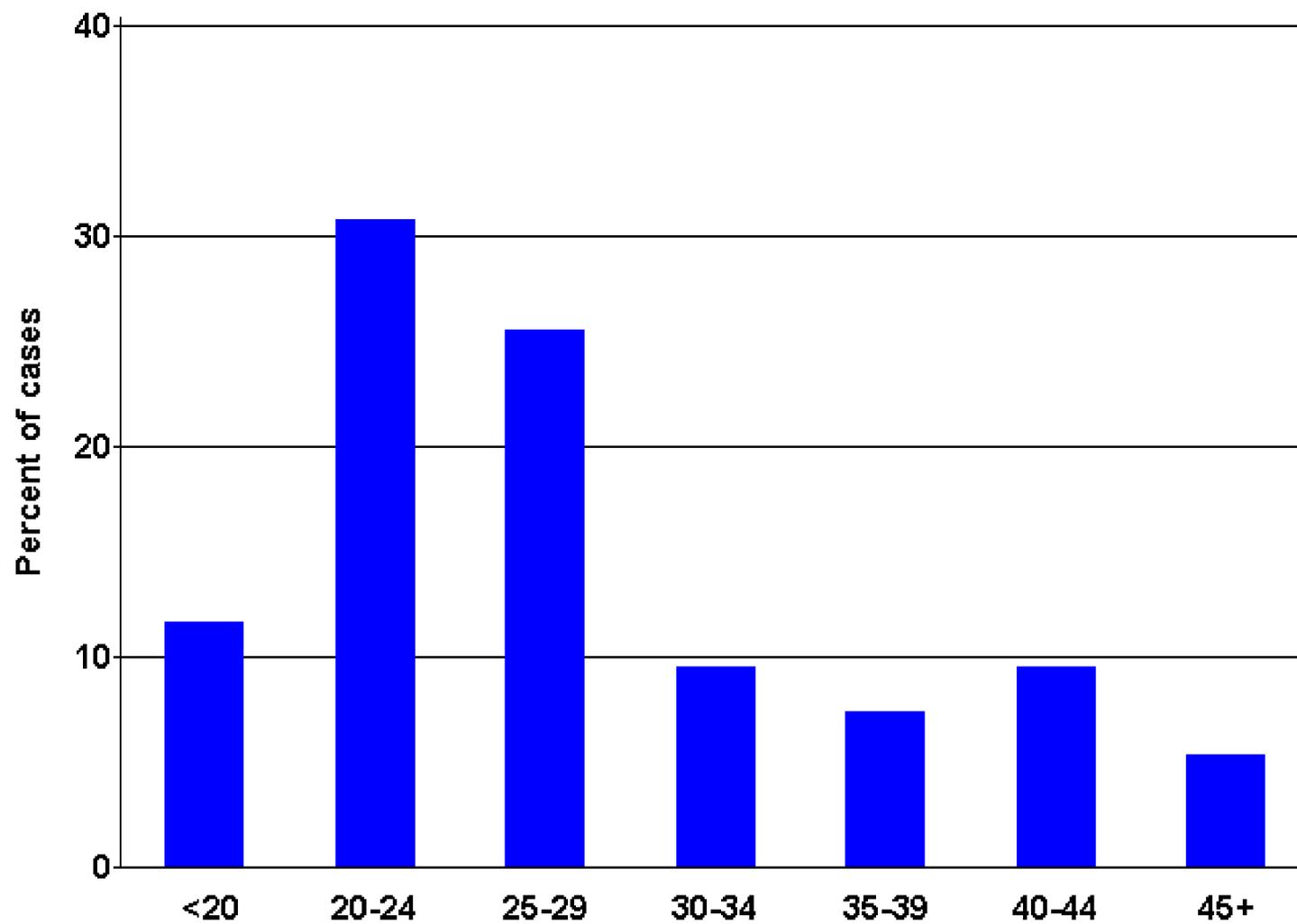


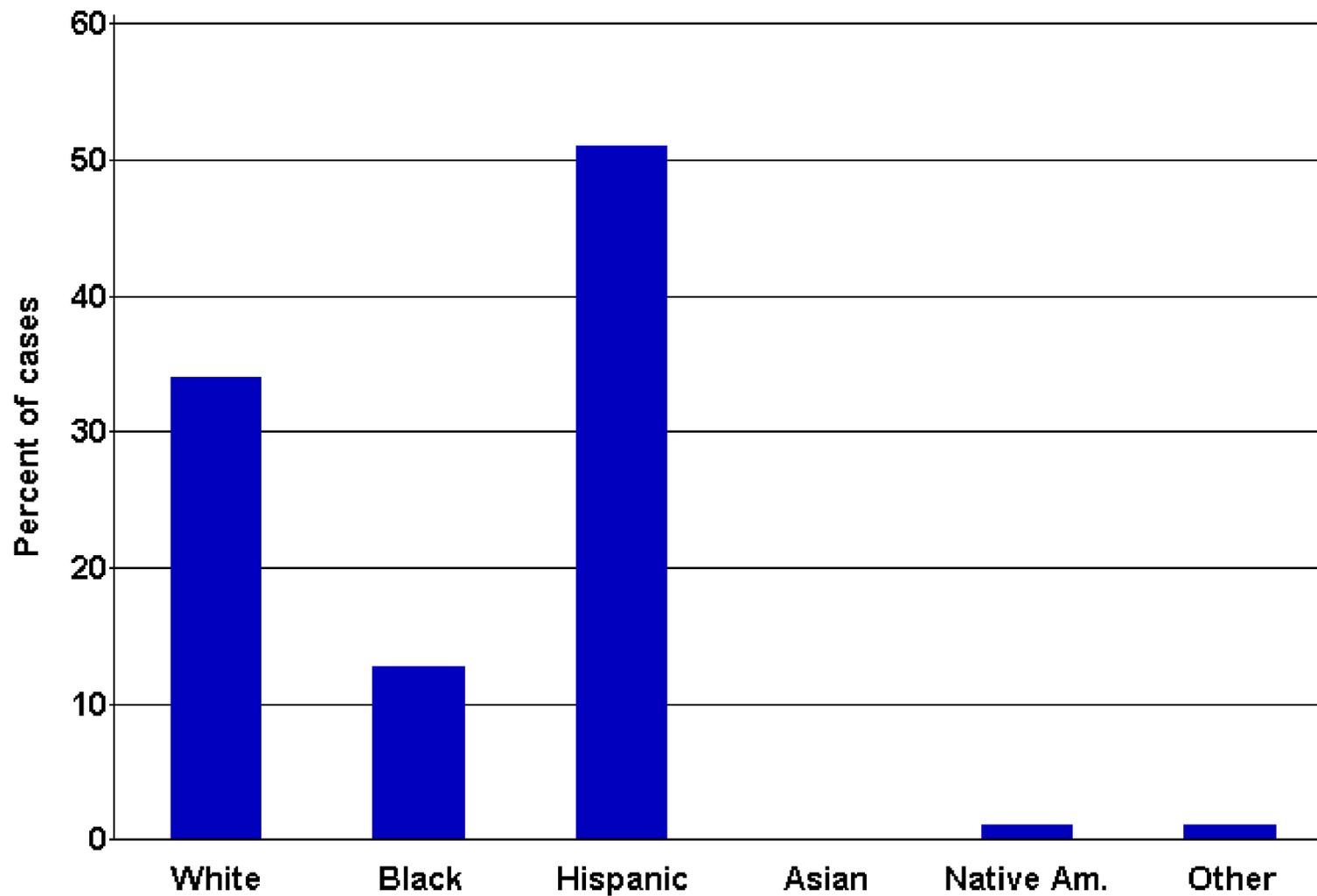
Albuquerque, New Mexico (N=96)

Figure A. Age of GISP participants, in years, 2009



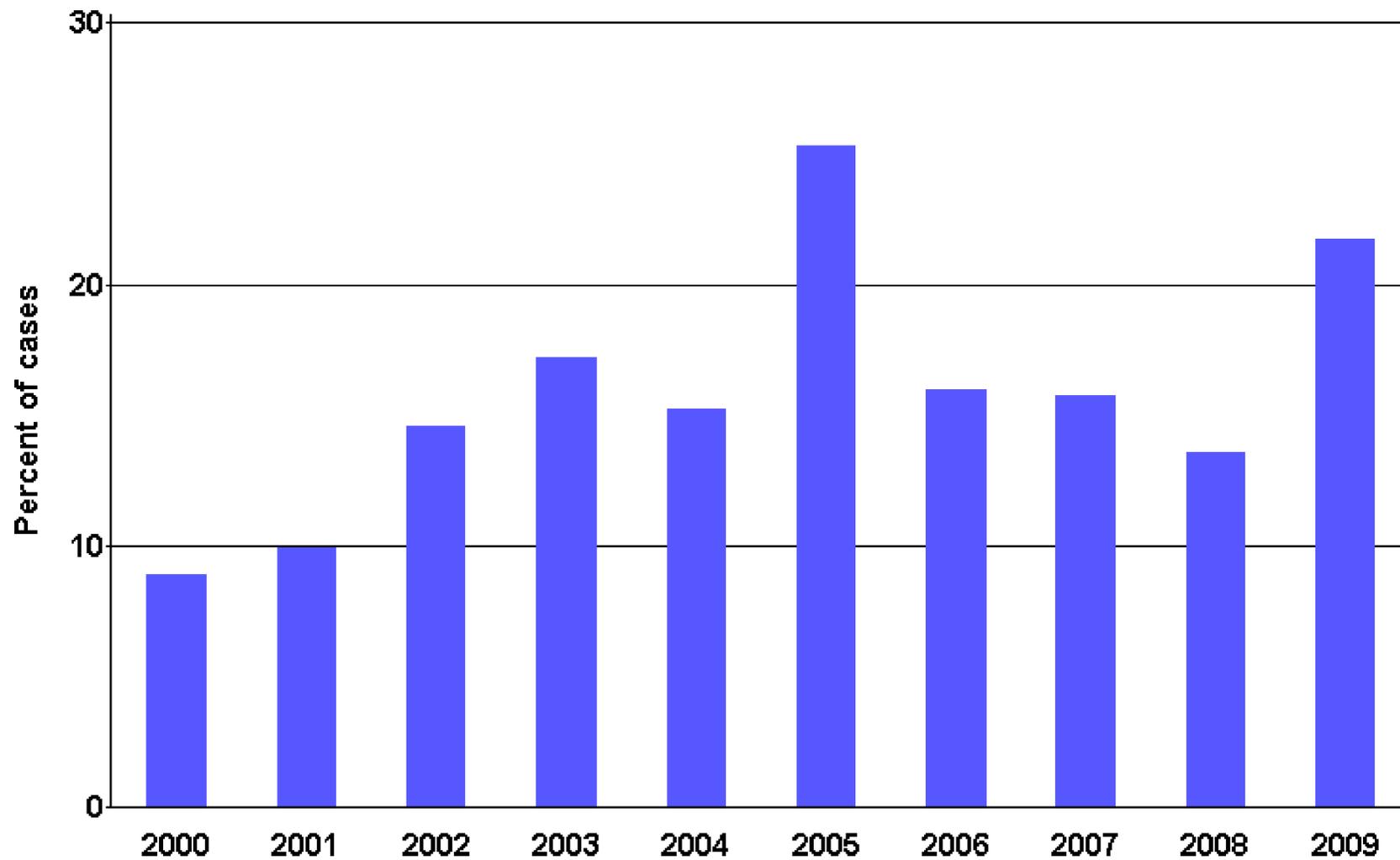
Albuquerque, New Mexico (N=96)

Figure B. Race/ethnicity of GISP participants, 2009



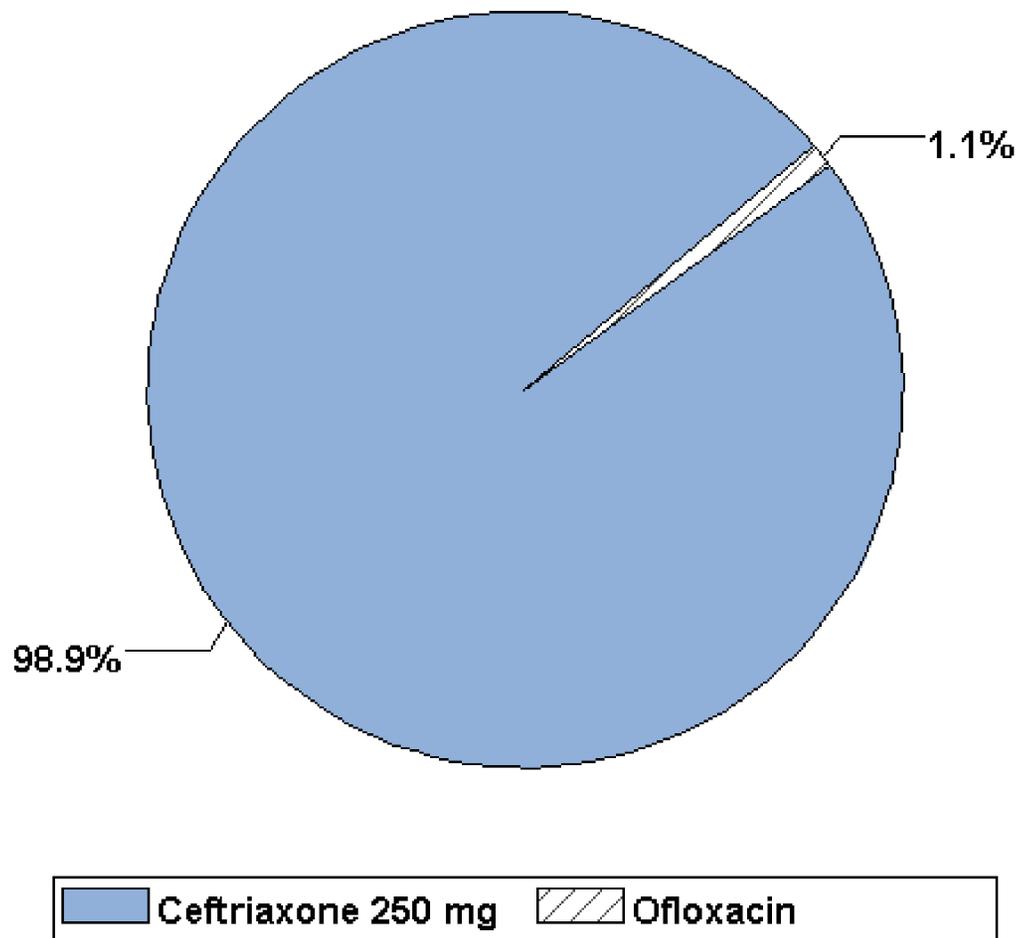
Albuquerque, New Mexico

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



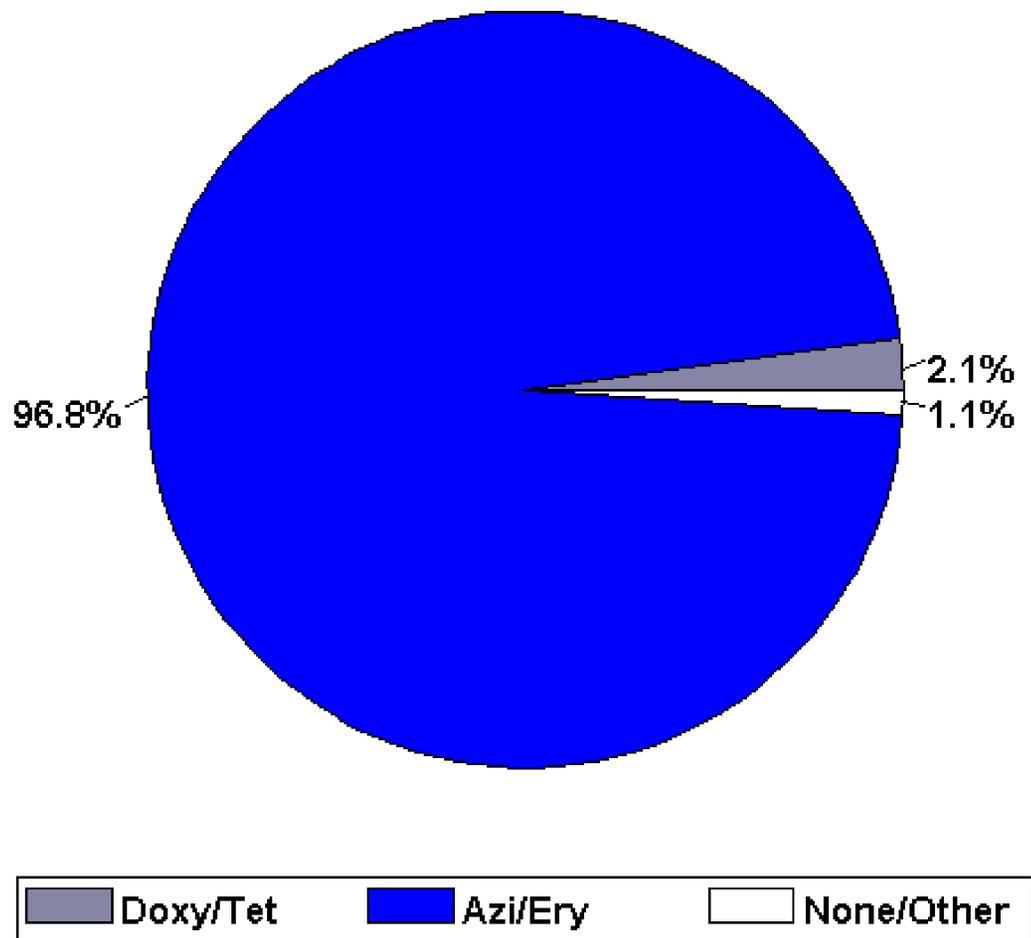
Albuquerque, New Mexico (N=96)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



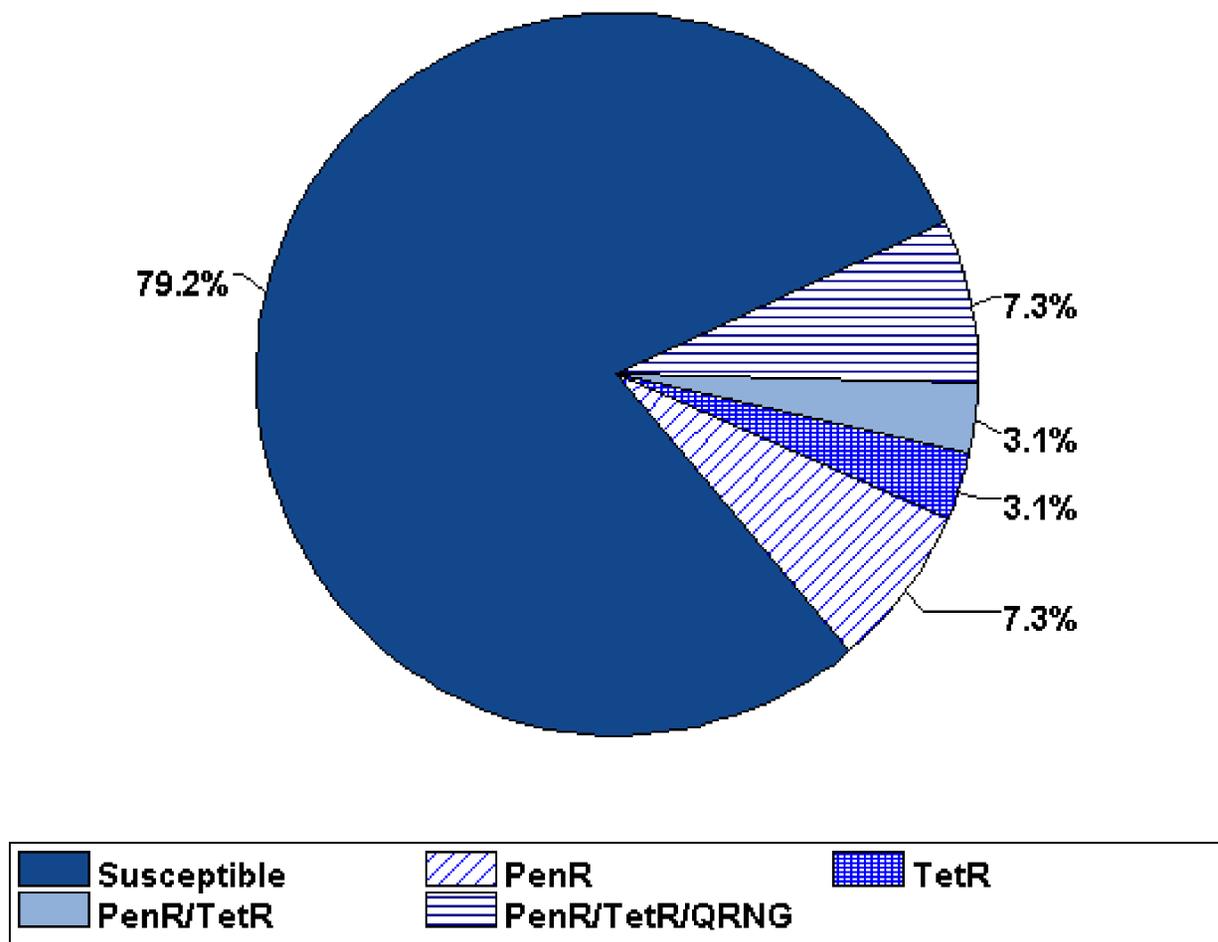
Albuquerque, New Mexico (N=96)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



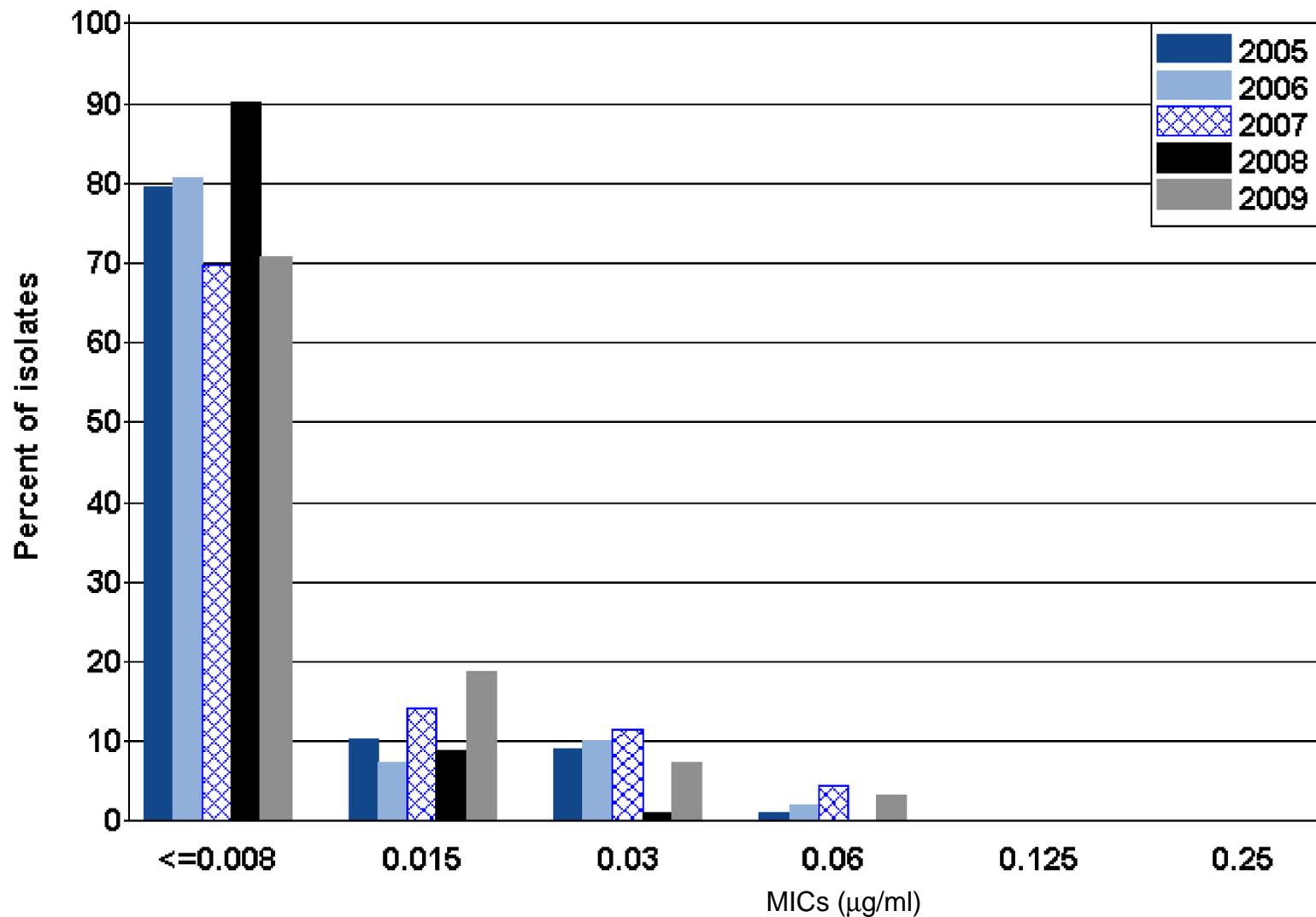
Albuquerque, New Mexico (N=96)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



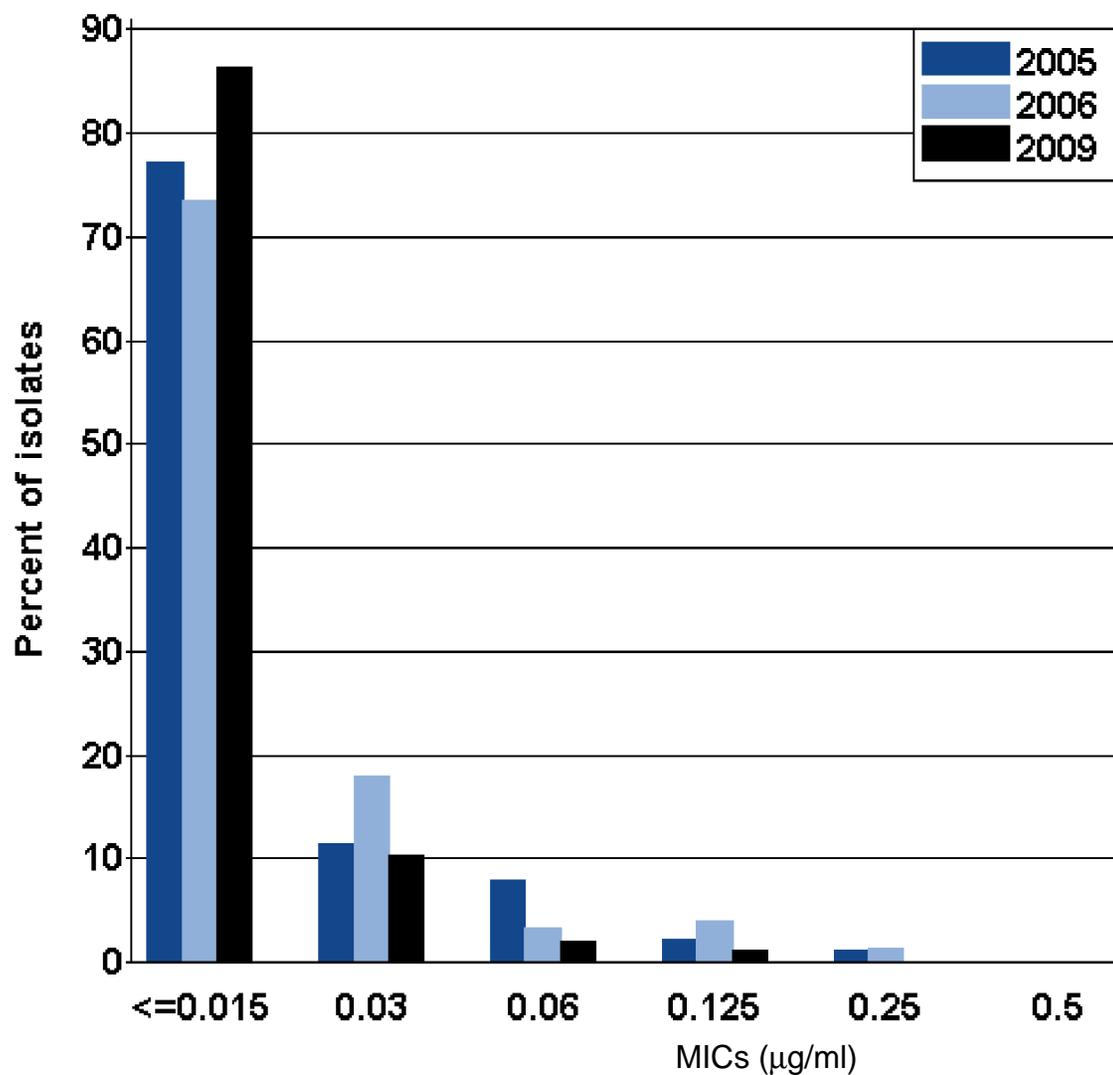
Albuquerque, New Mexico

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Albuquerque, New Mexico

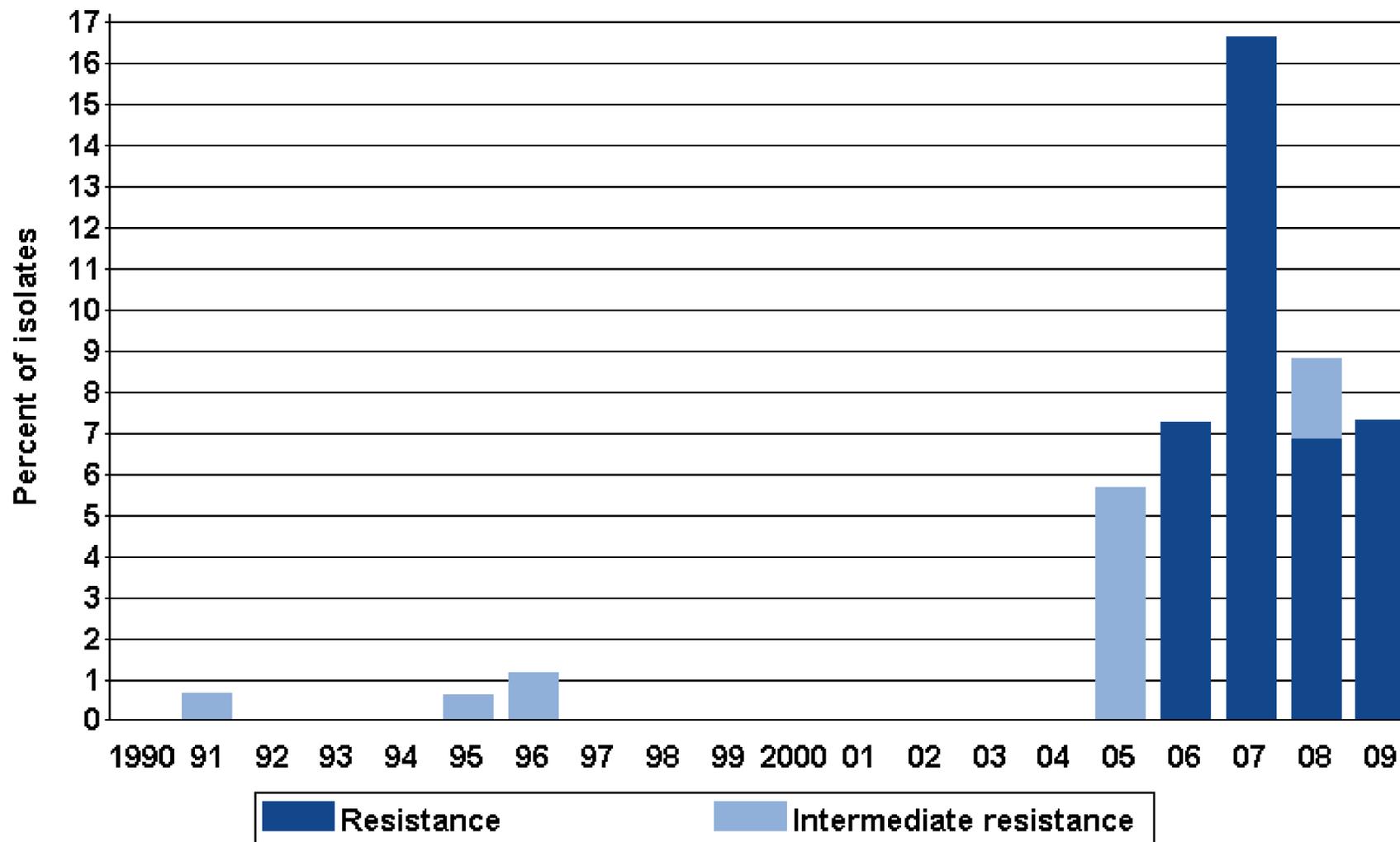
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Albuquerque, New Mexico

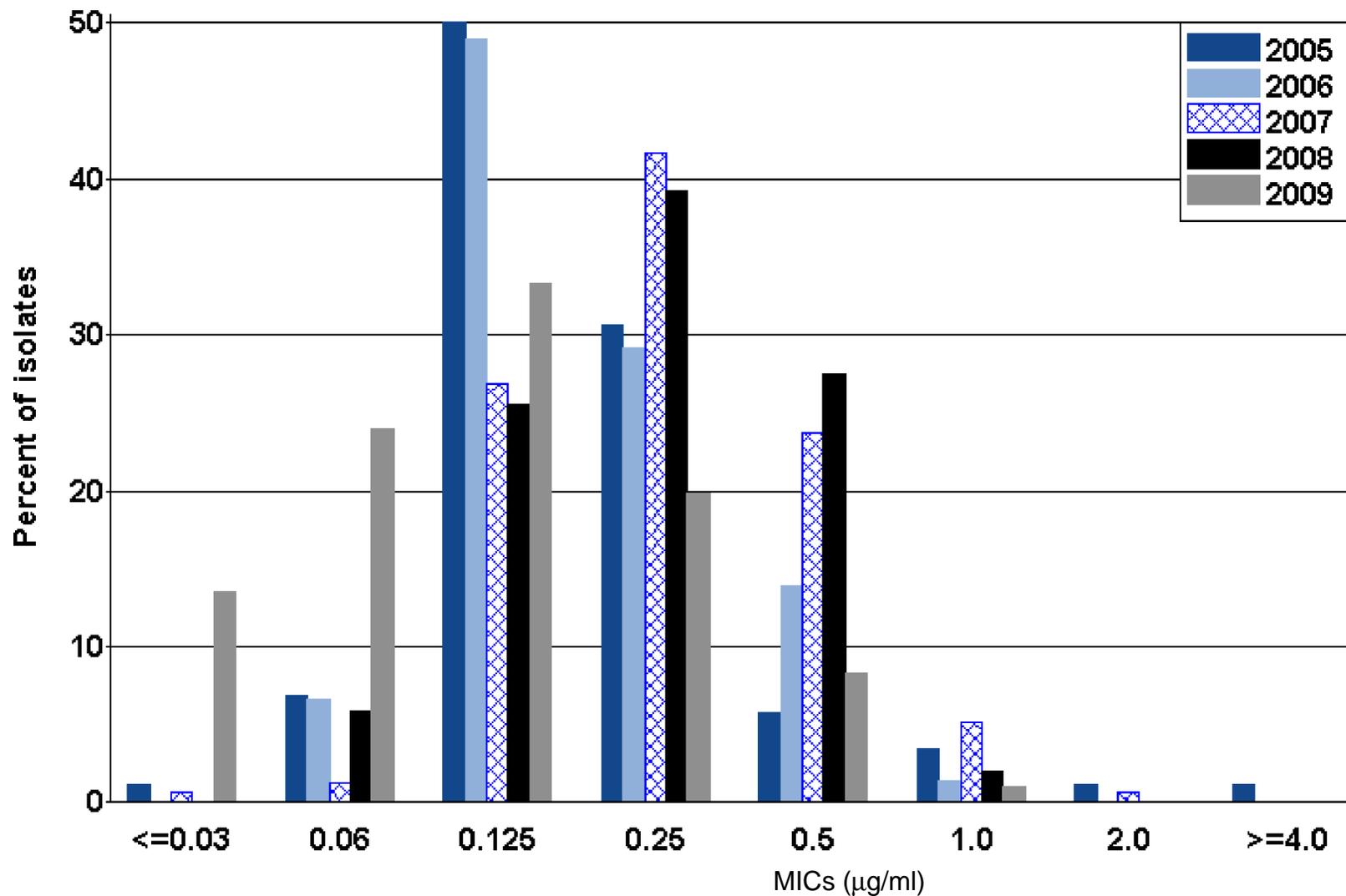
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

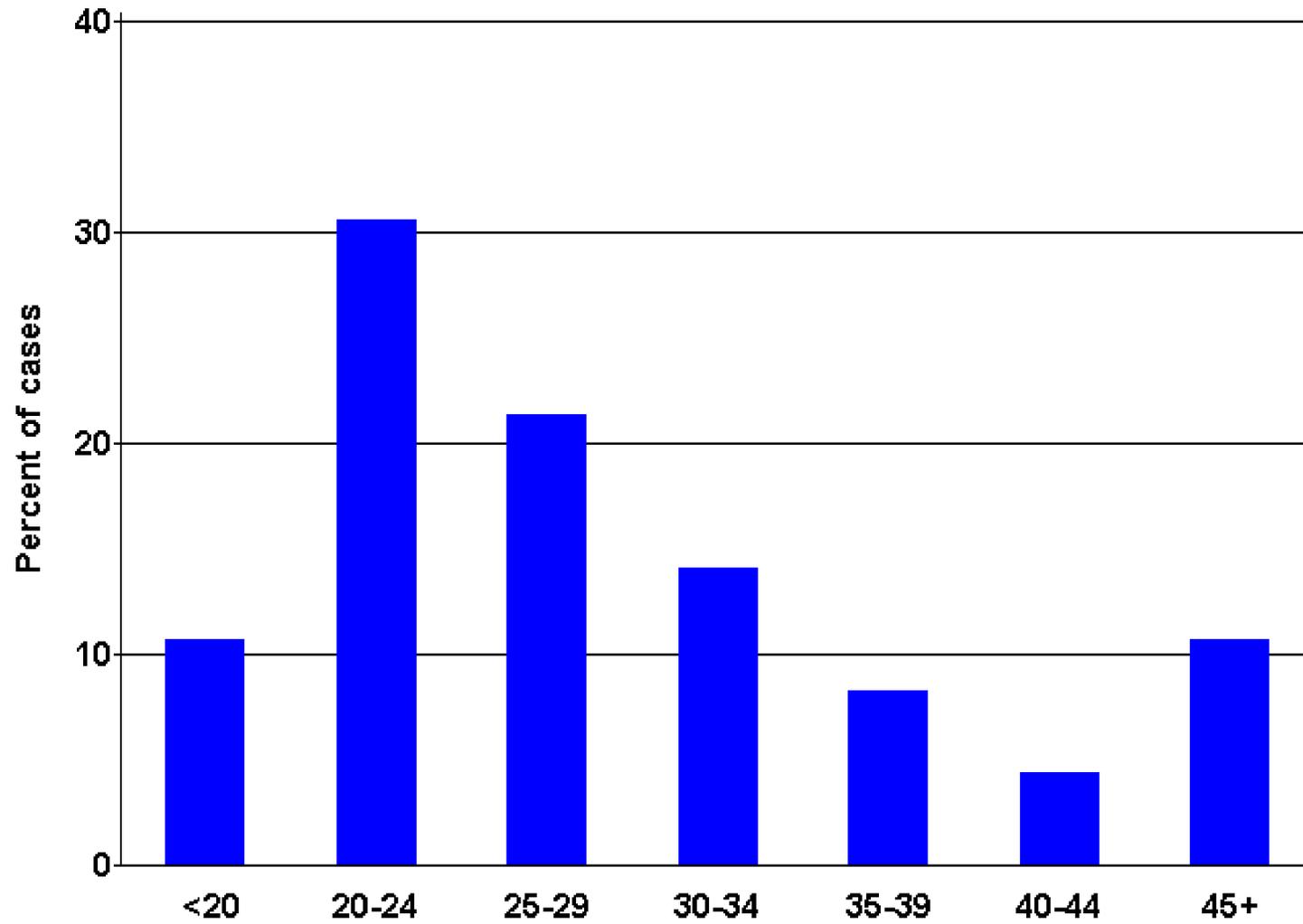
Albuquerque, New Mexico

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



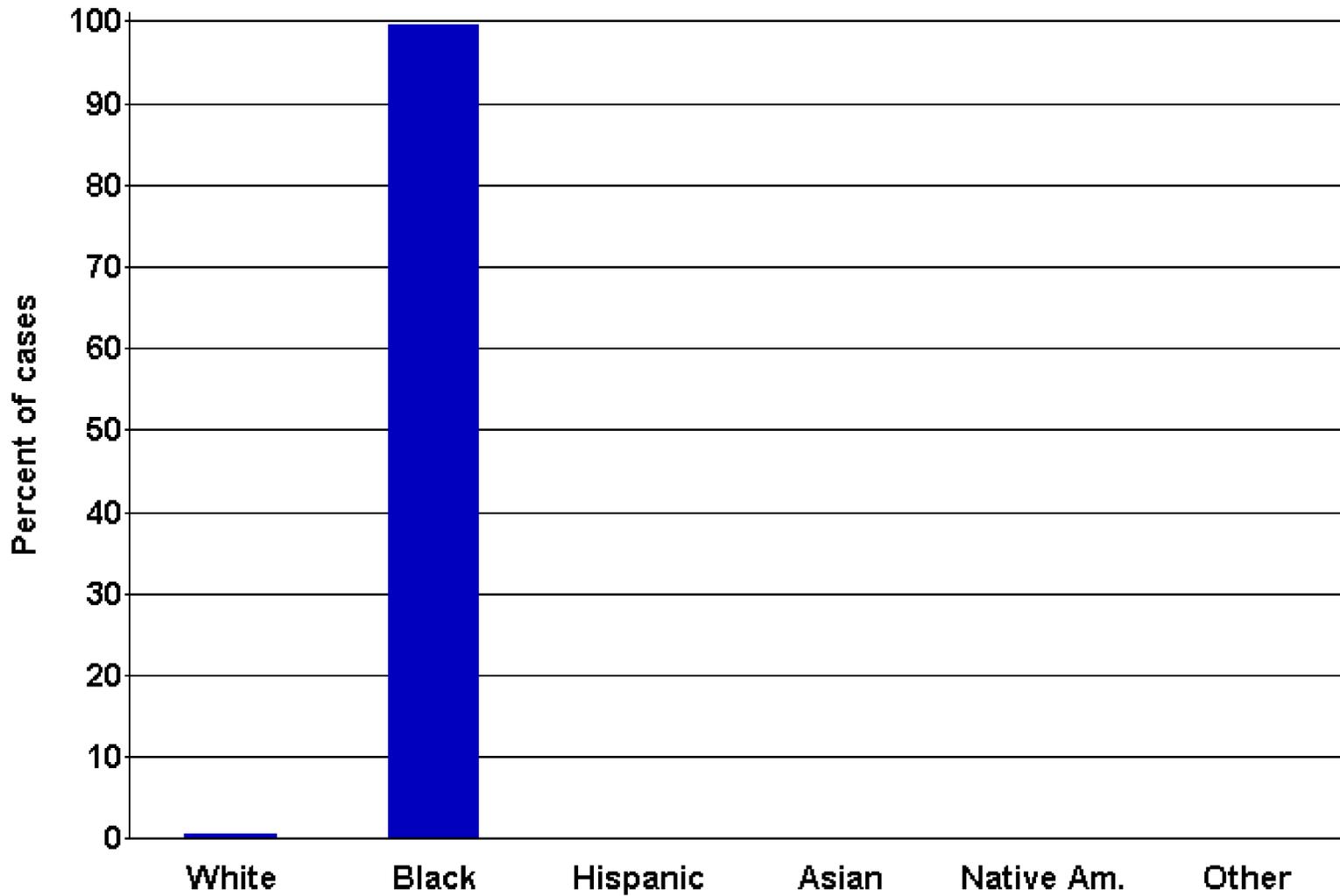
Atlanta, Georgia (N=232)

Figure A. Age of GISP participants, in years, 2009



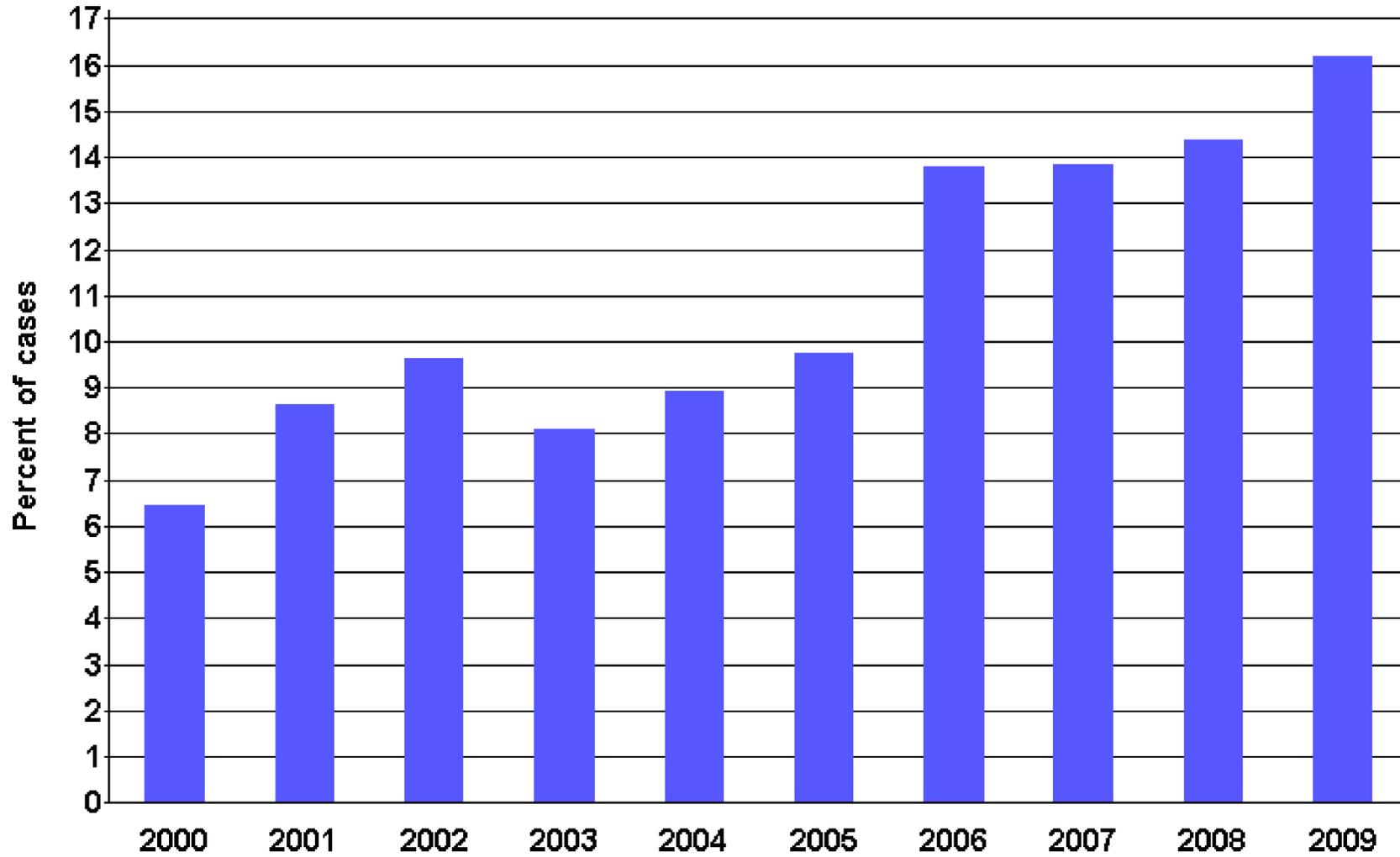
Atlanta, Georgia (N=232)

Figure B. Race/ethnicity of GISP participants, 2009



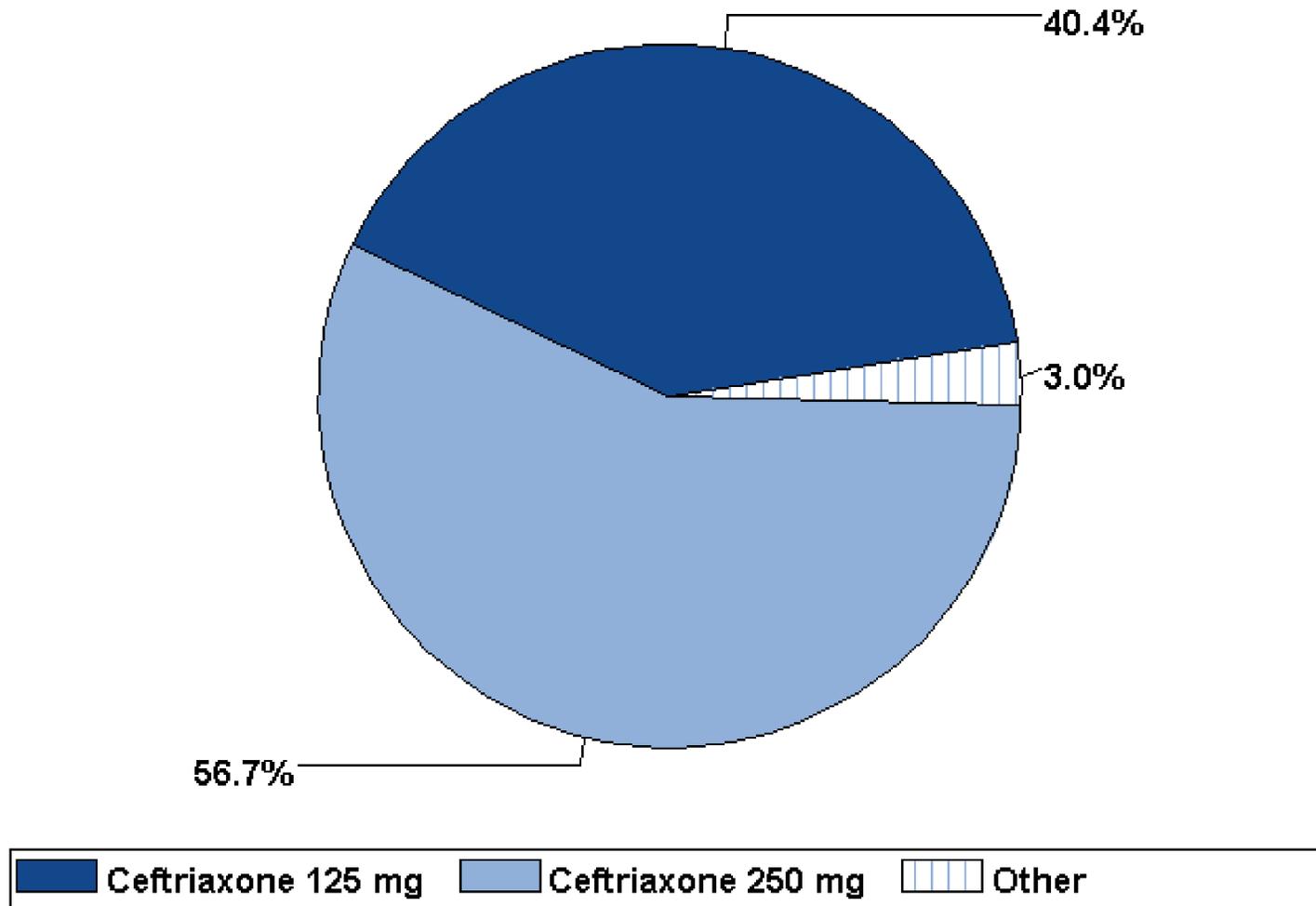
Atlanta, Georgia

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



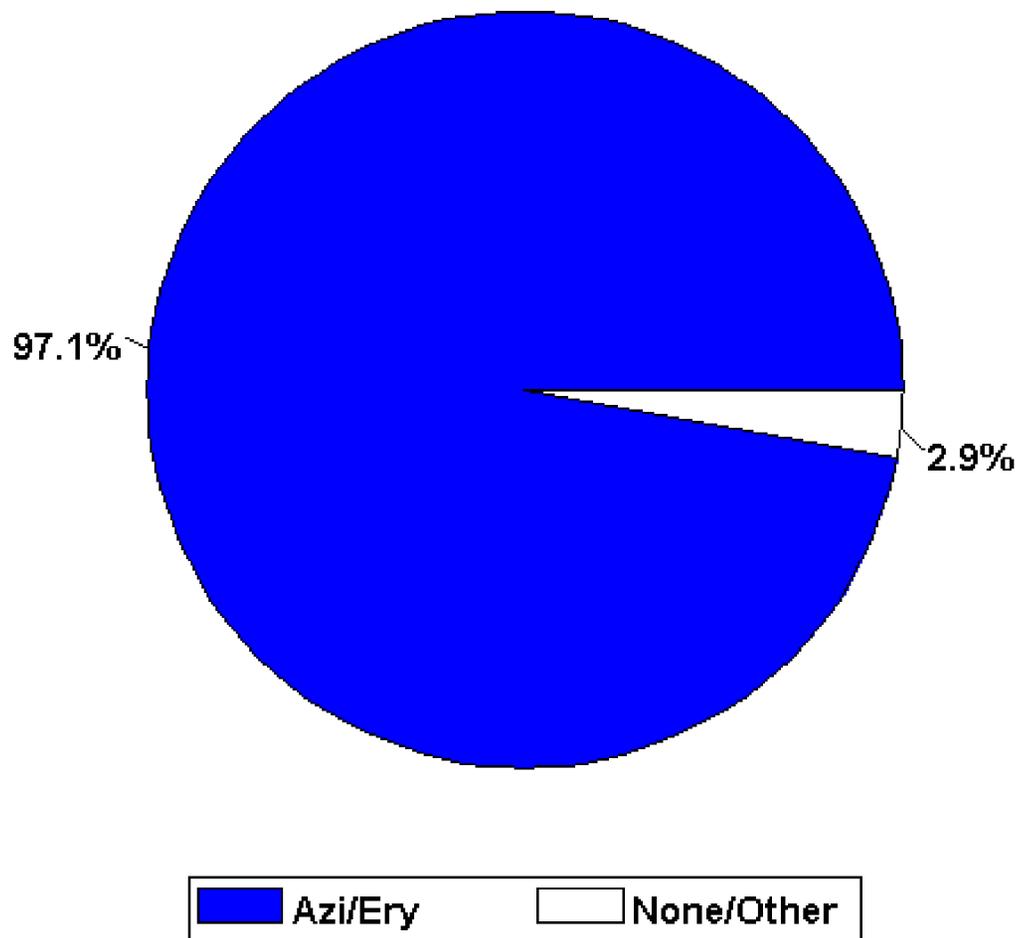
Atlanta, Georgia (N=232)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



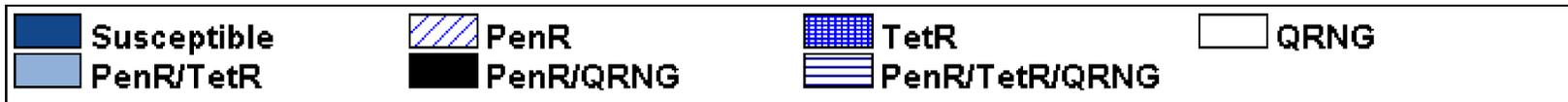
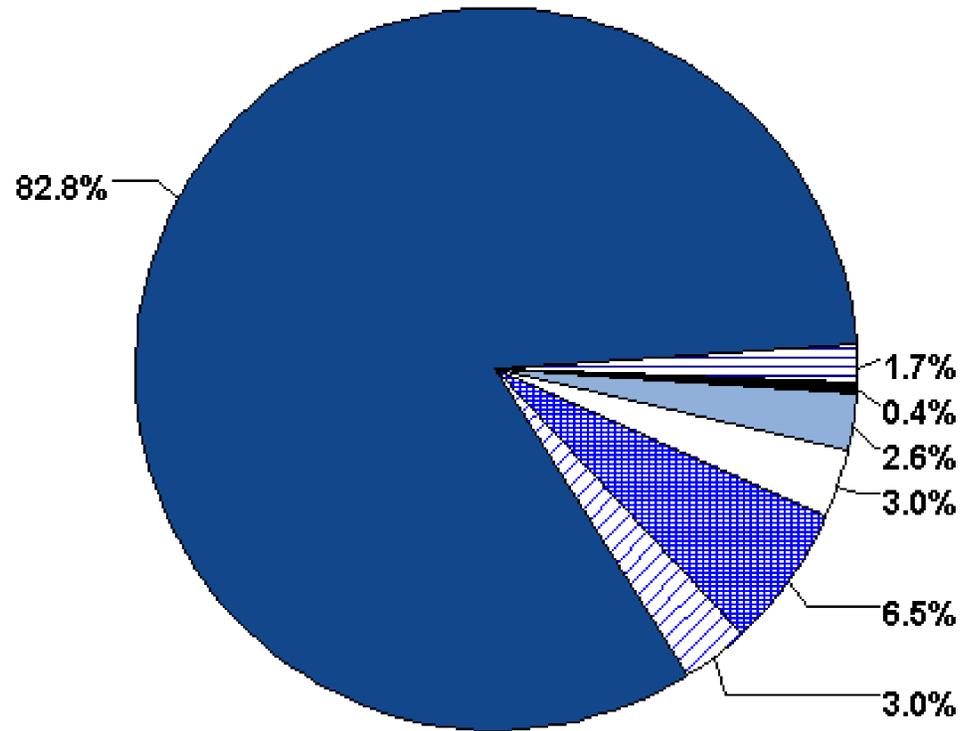
Atlanta, Georgia (N=232)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



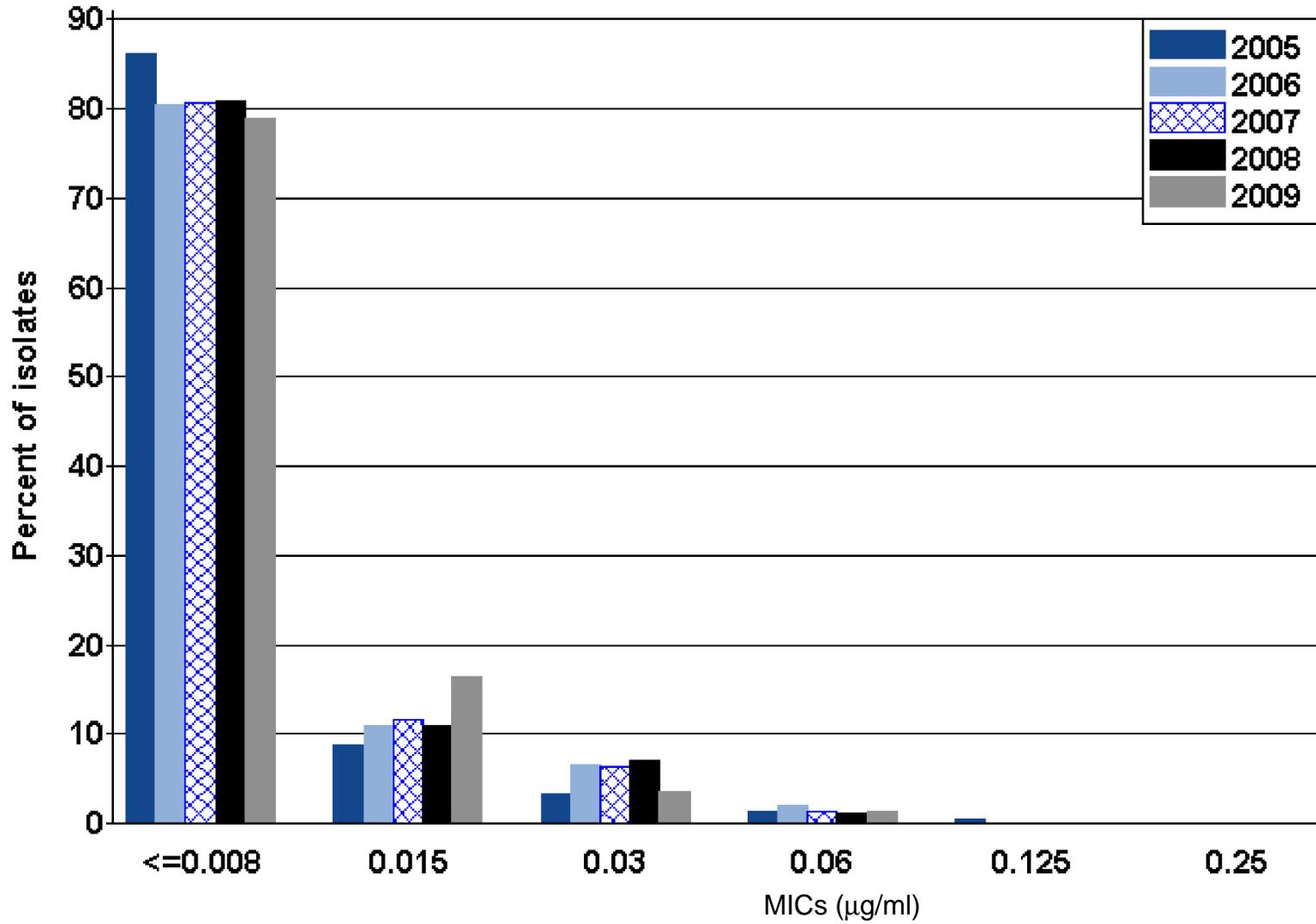
Atlanta, Georgia (N=232)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



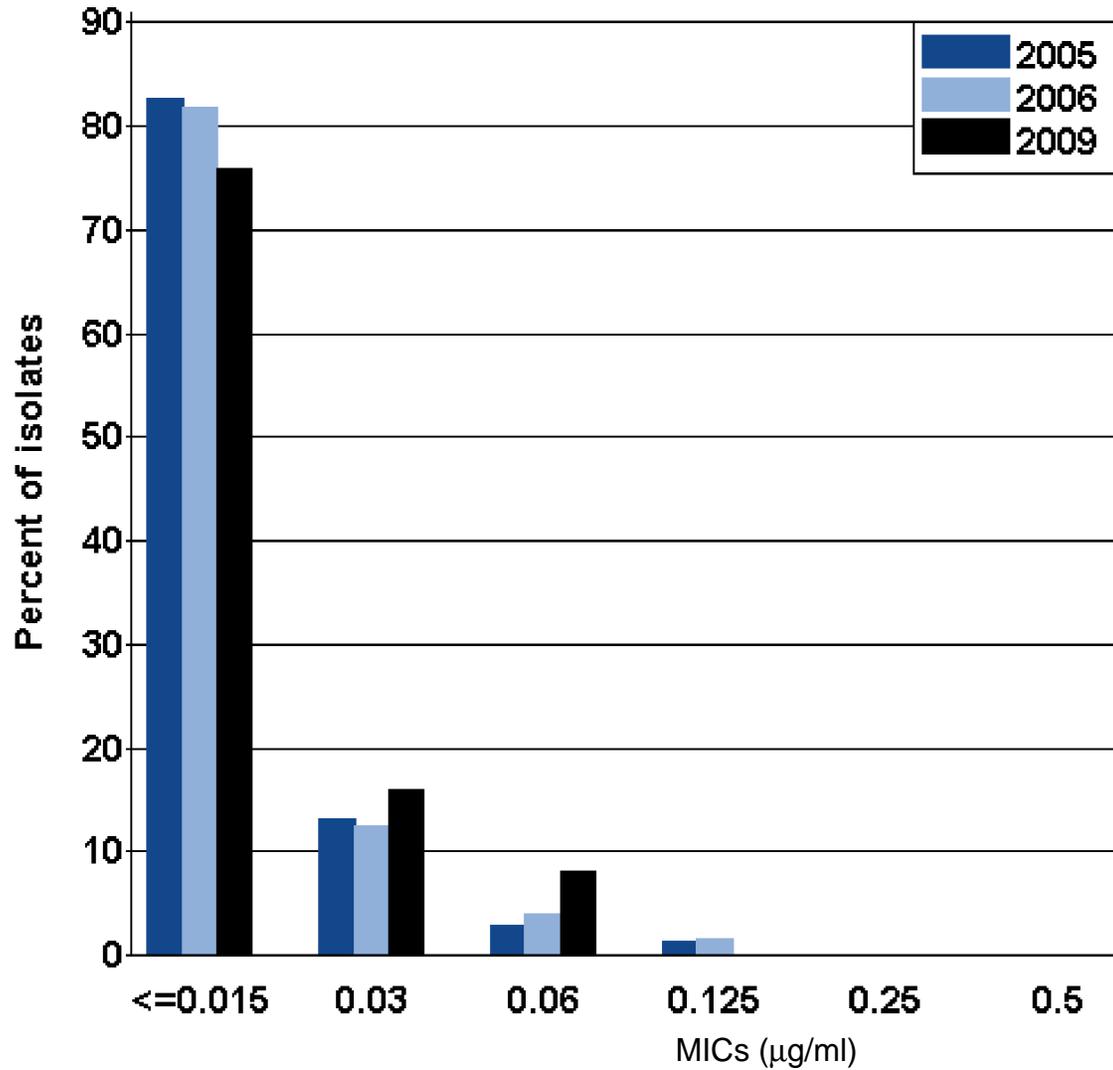
Atlanta, Georgia

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Atlanta, Georgia

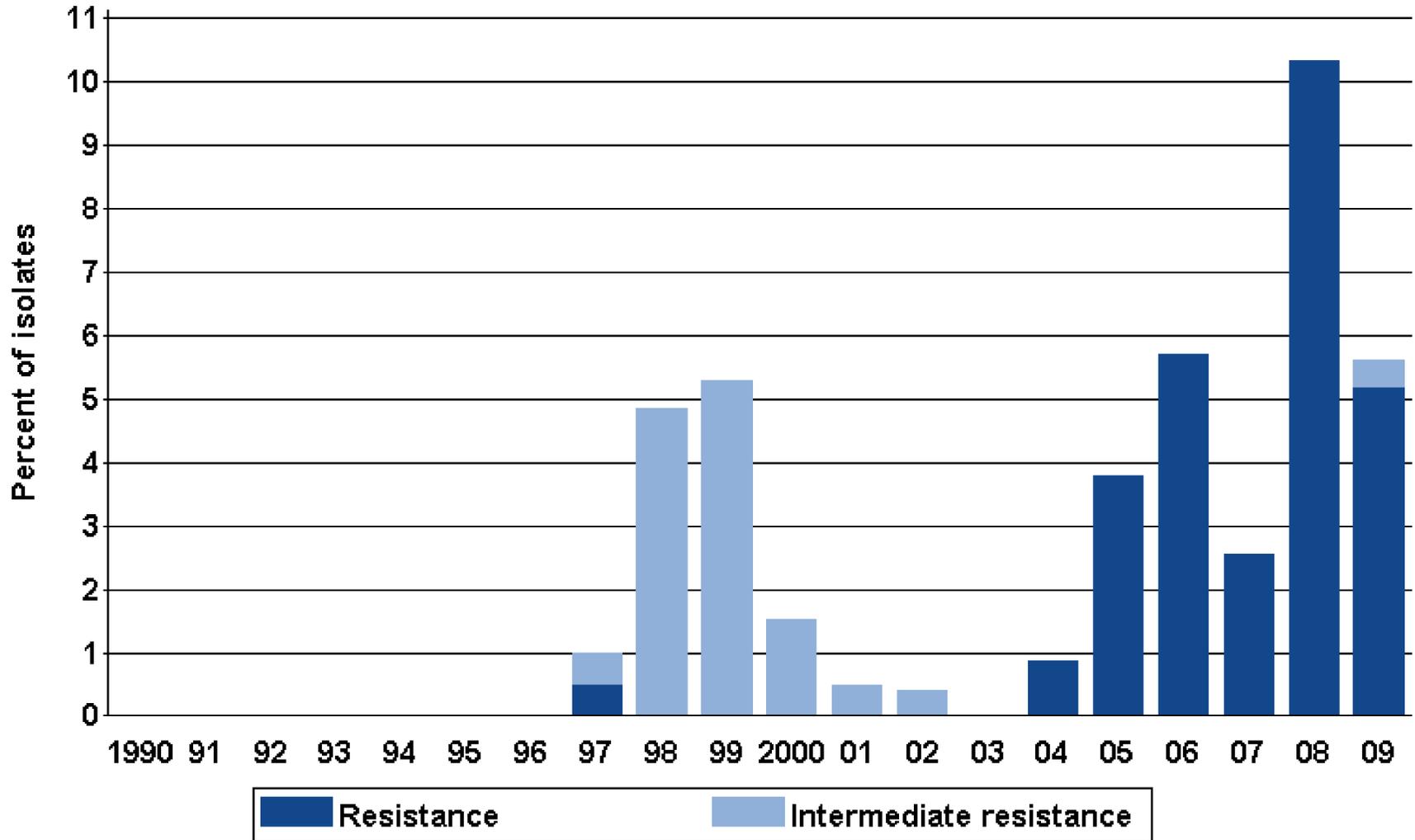
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Atlanta, Georgia

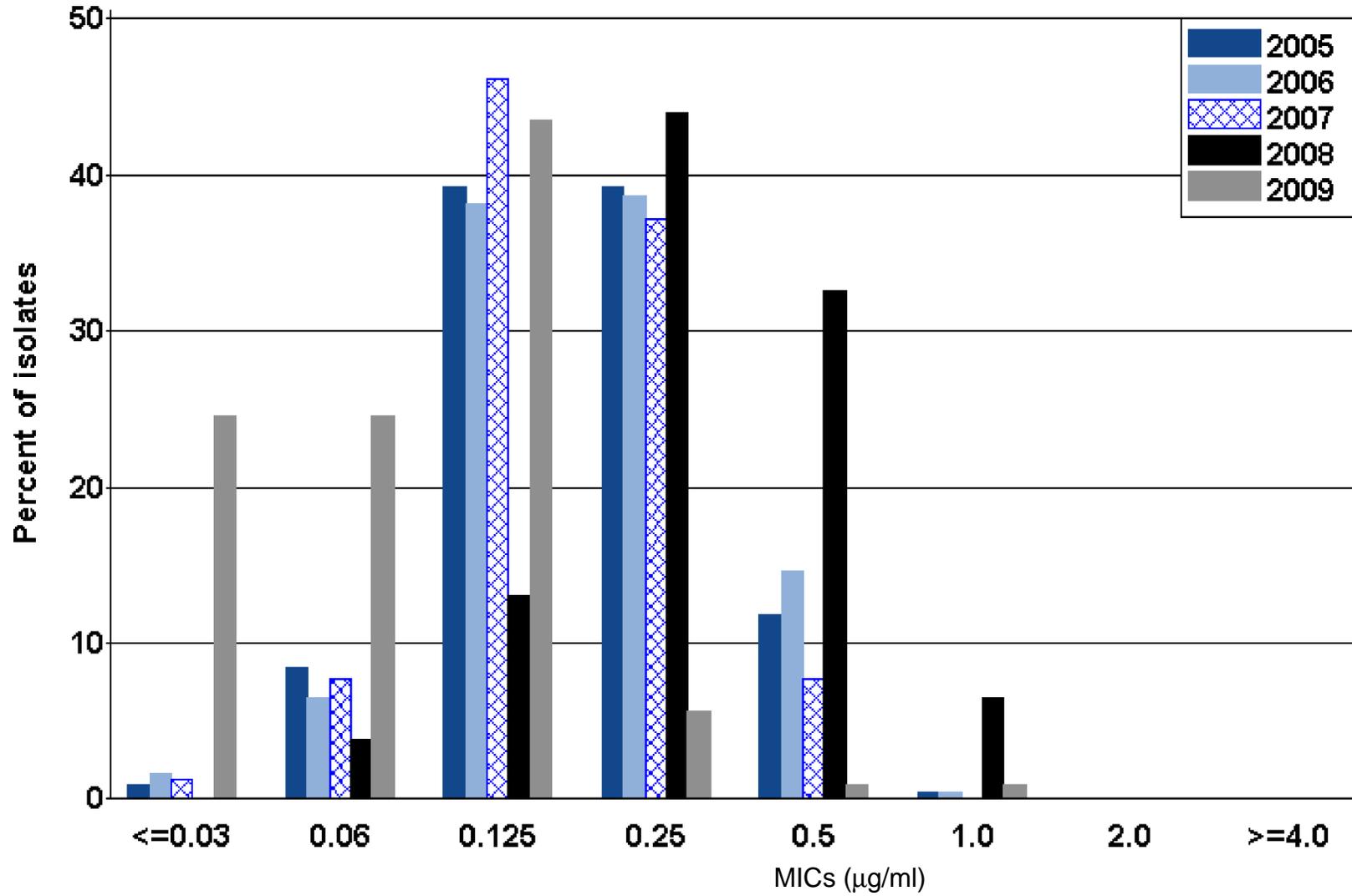
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

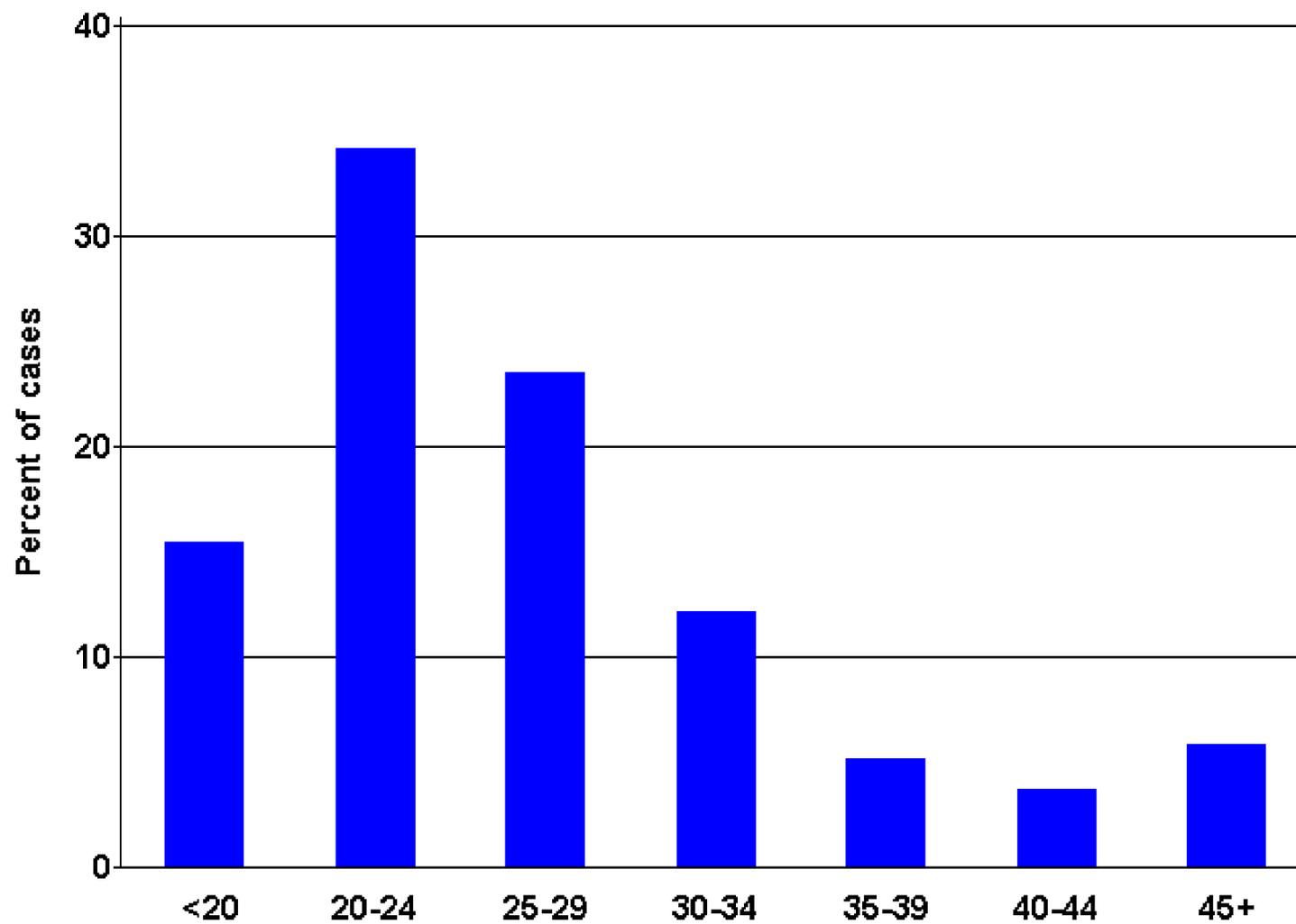
Atlanta, Georgia

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



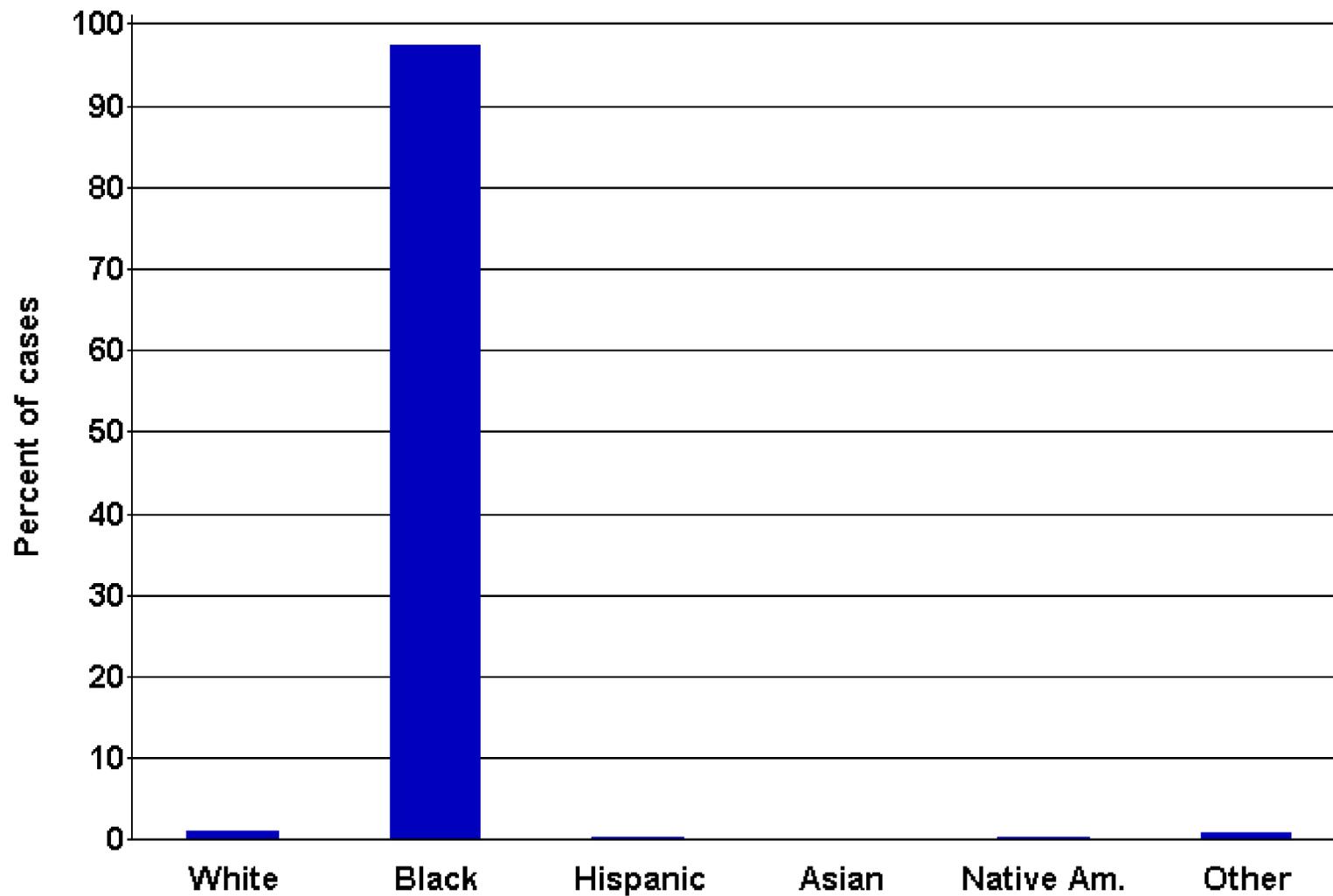
Baltimore, Maryland (N=276)

Figure A. Age of GISP participants, in years, 2009



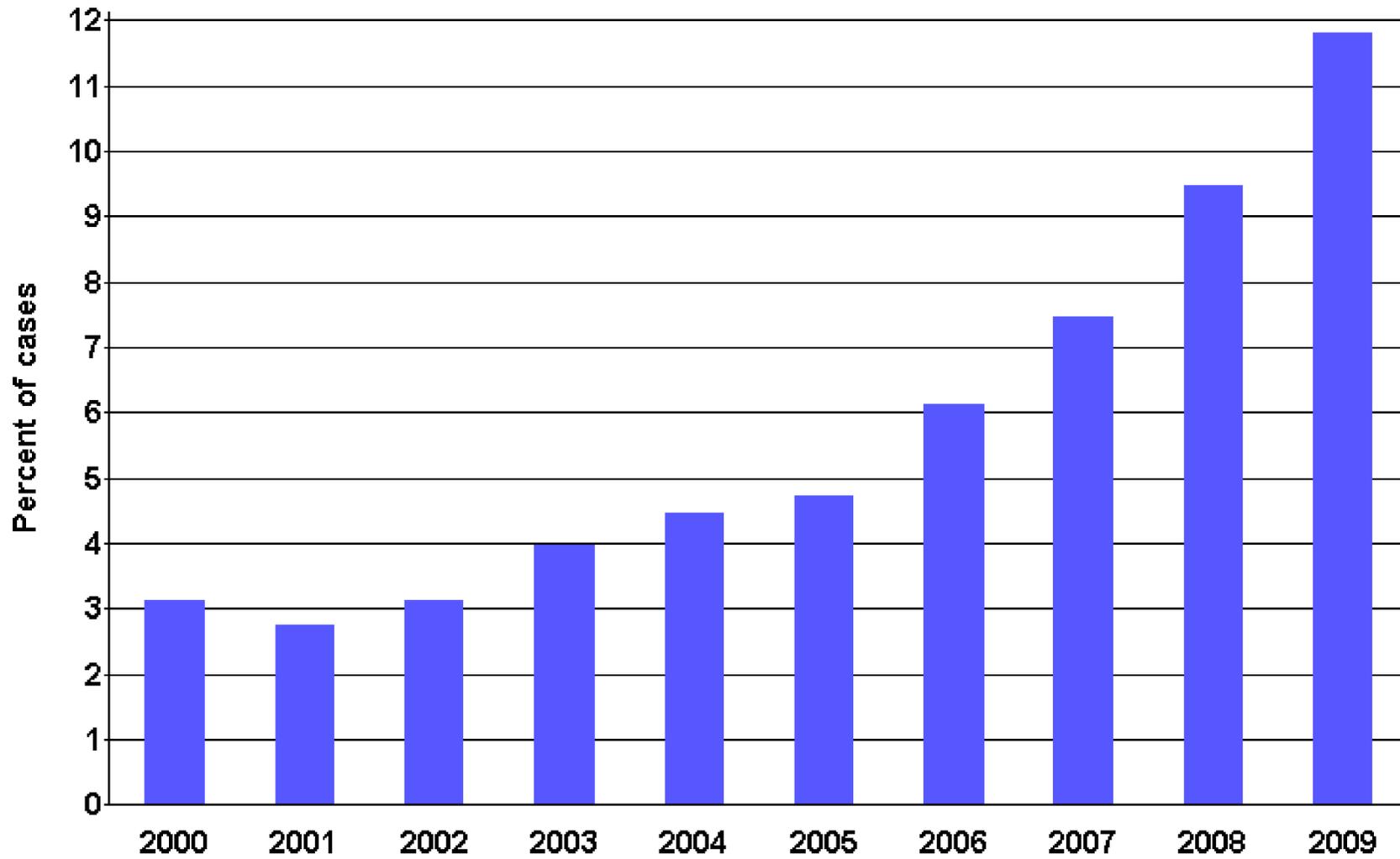
Baltimore, Maryland (N=276)

Figure B. Race/ethnicity of GISP participants, 2009



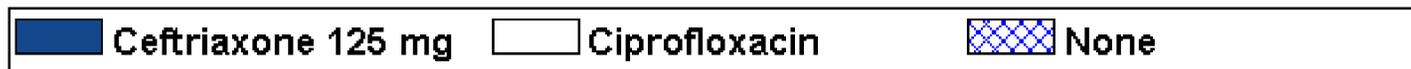
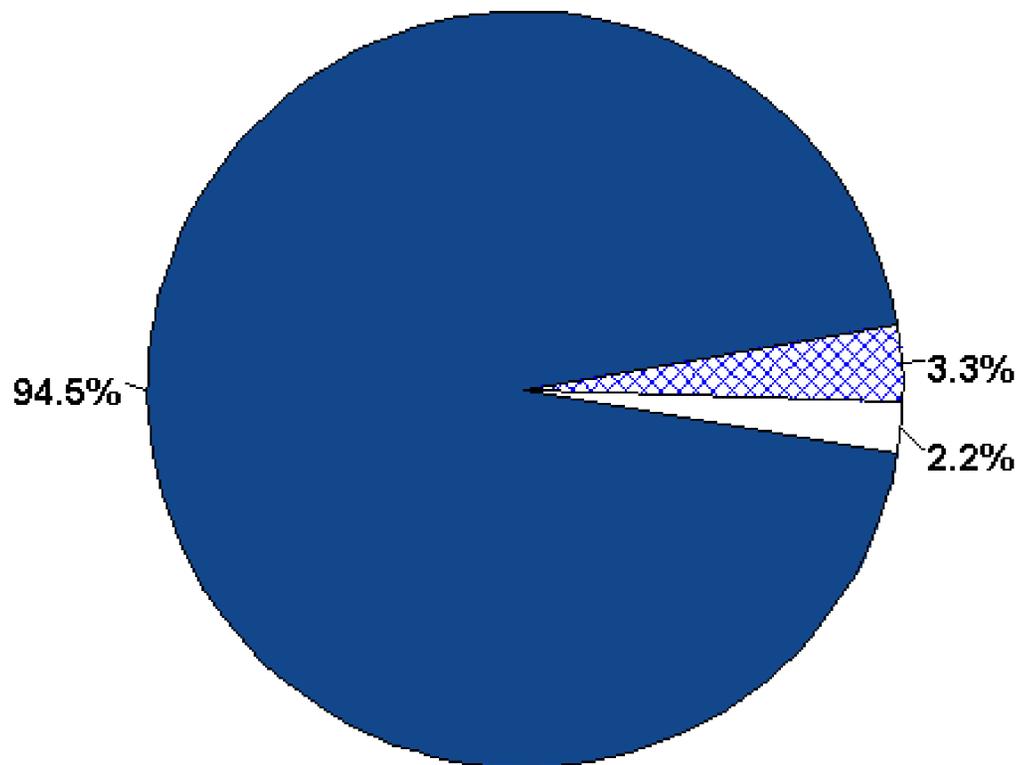
Baltimore, Maryland

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



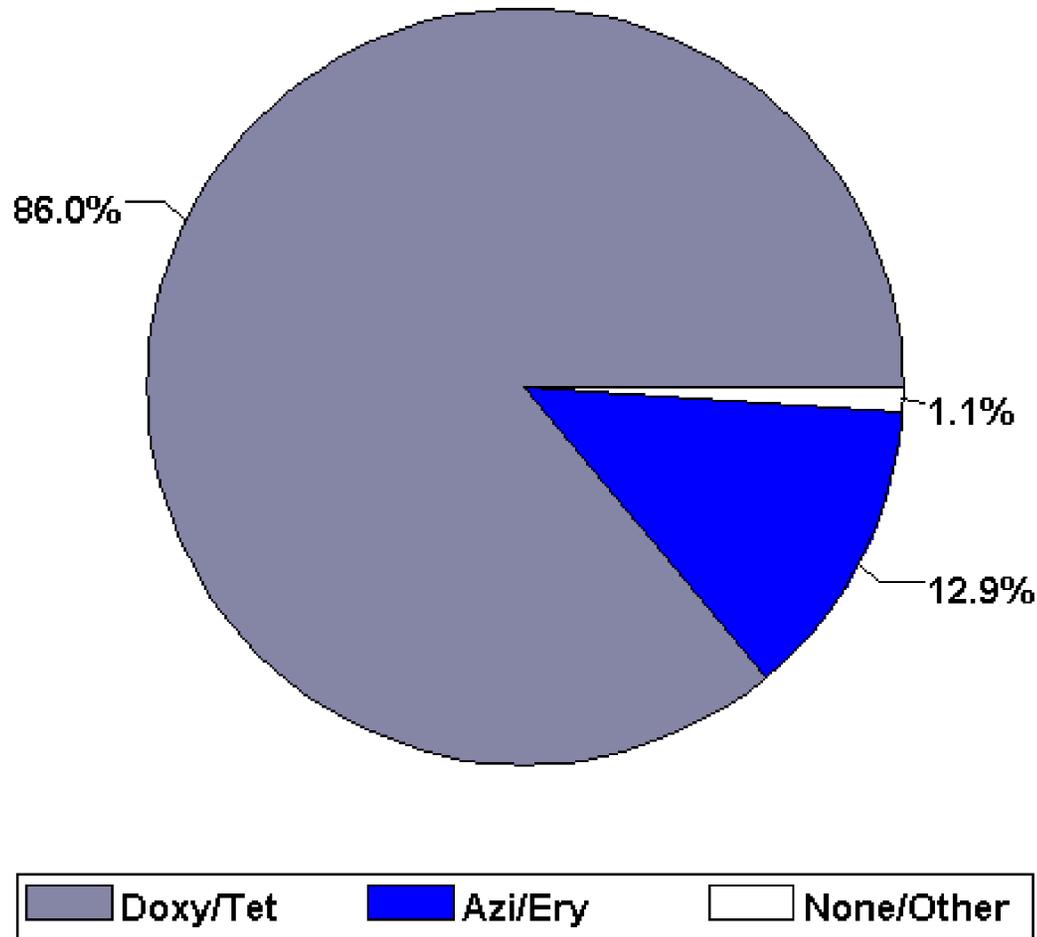
Baltimore, Maryland (N=276)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



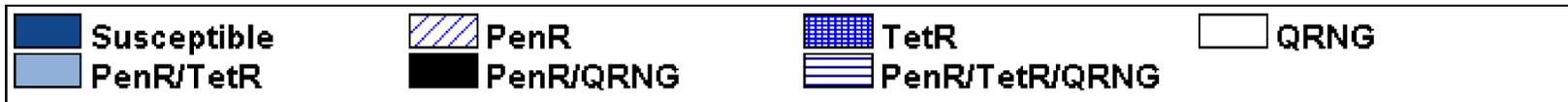
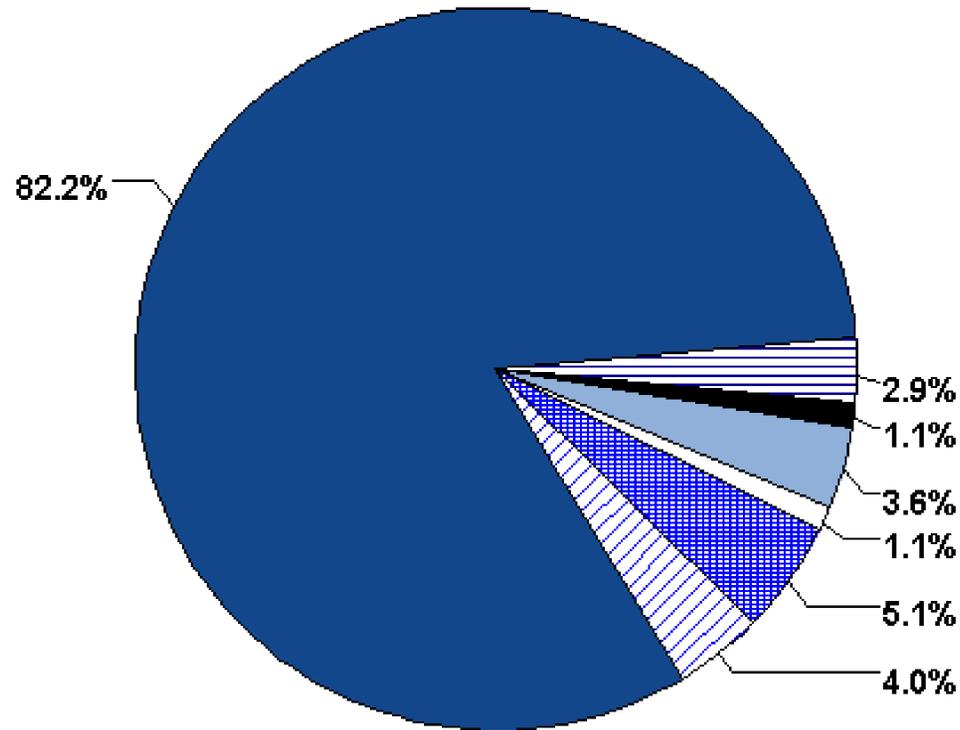
Baltimore, Maryland (N=276)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



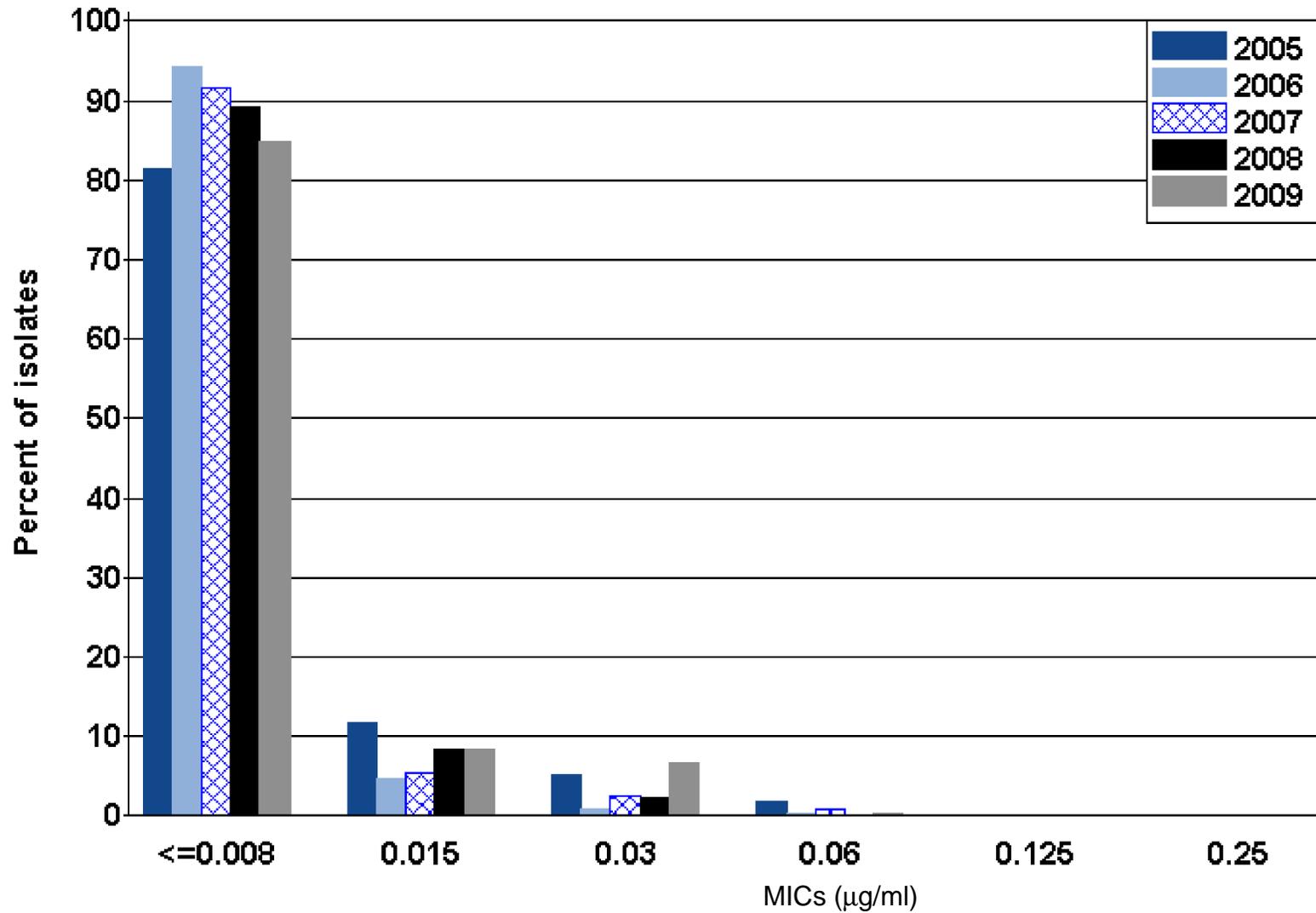
Baltimore, Maryland (N=276)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



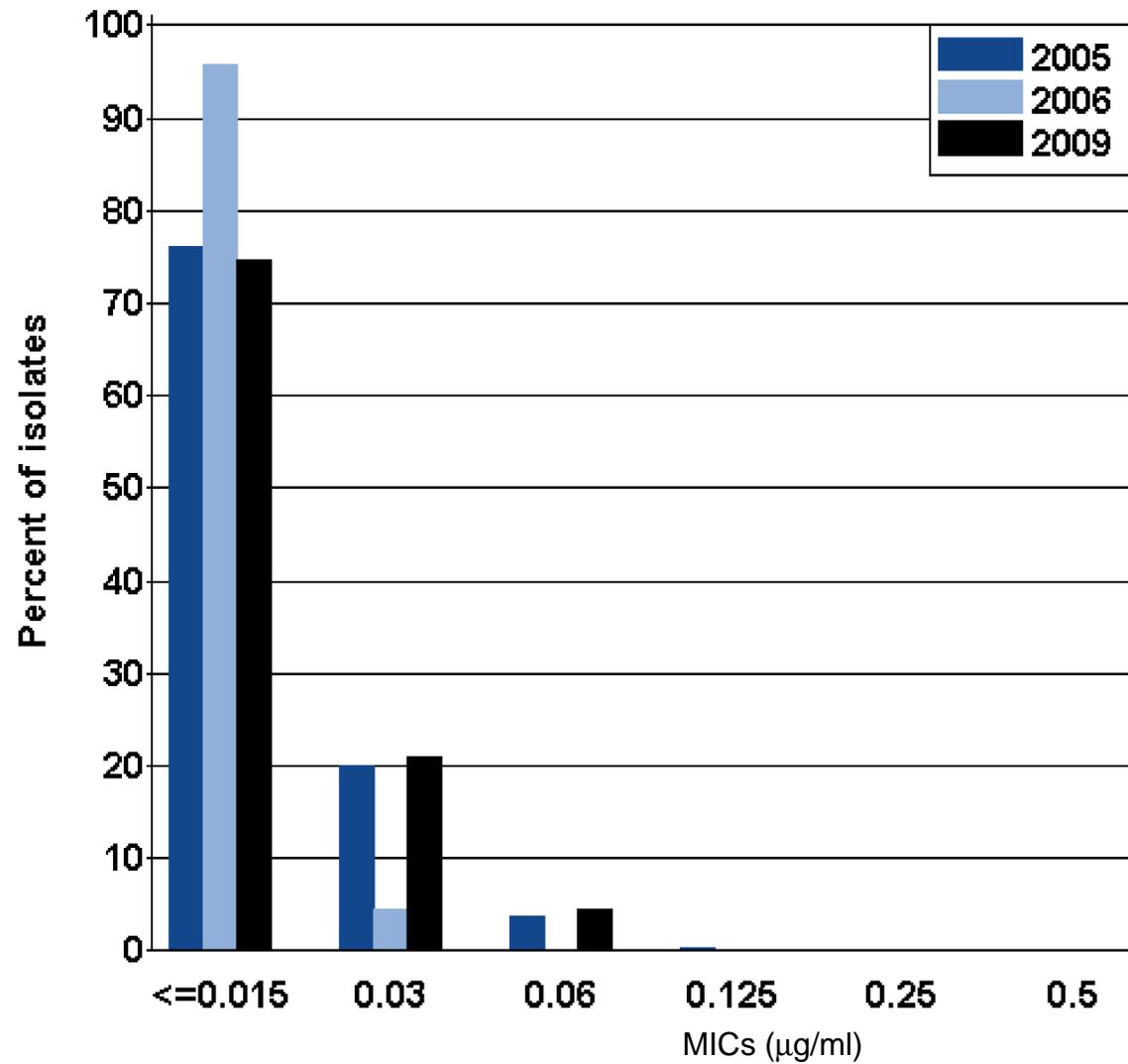
Baltimore, Maryland

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Baltimore, Maryland

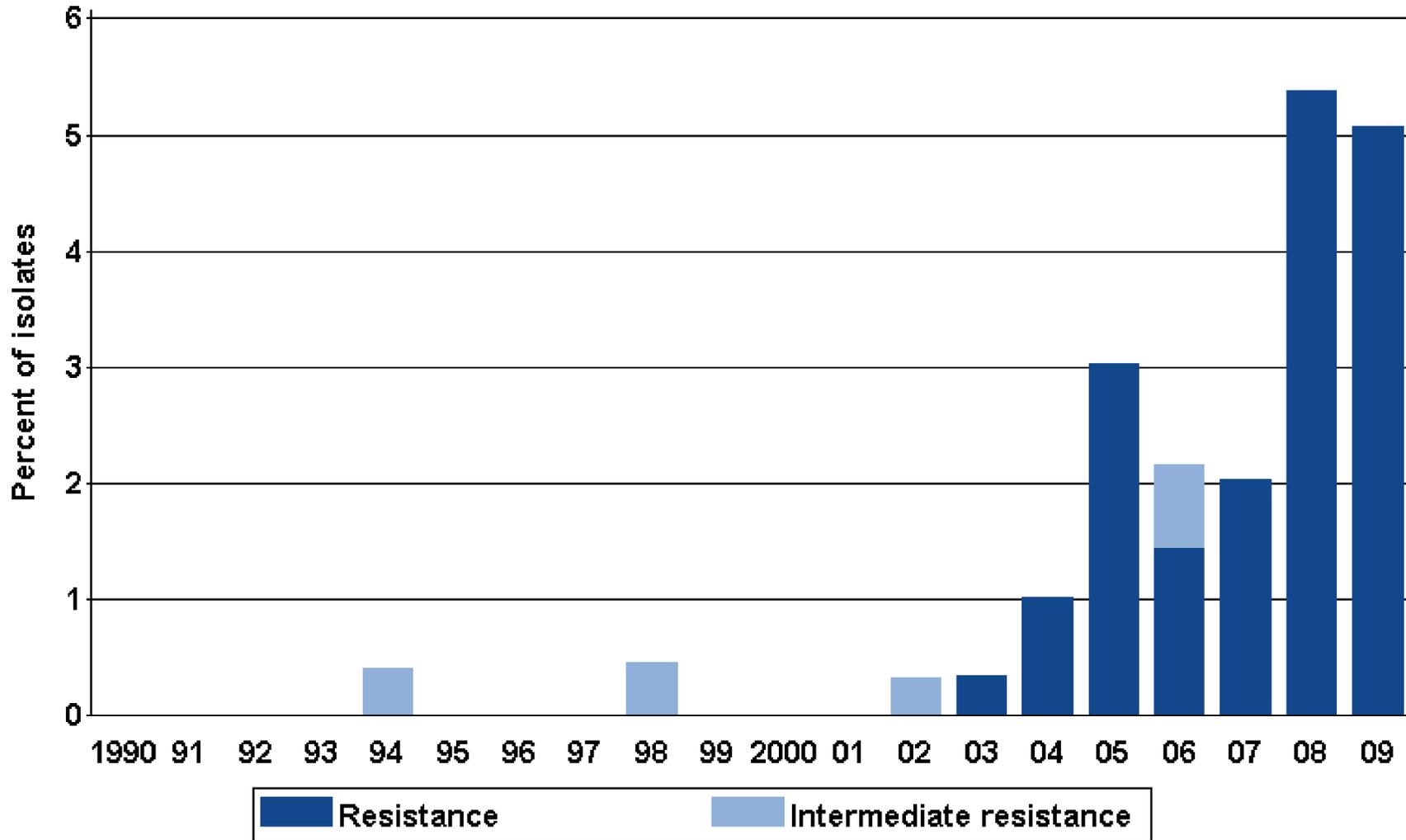
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Baltimore, Maryland

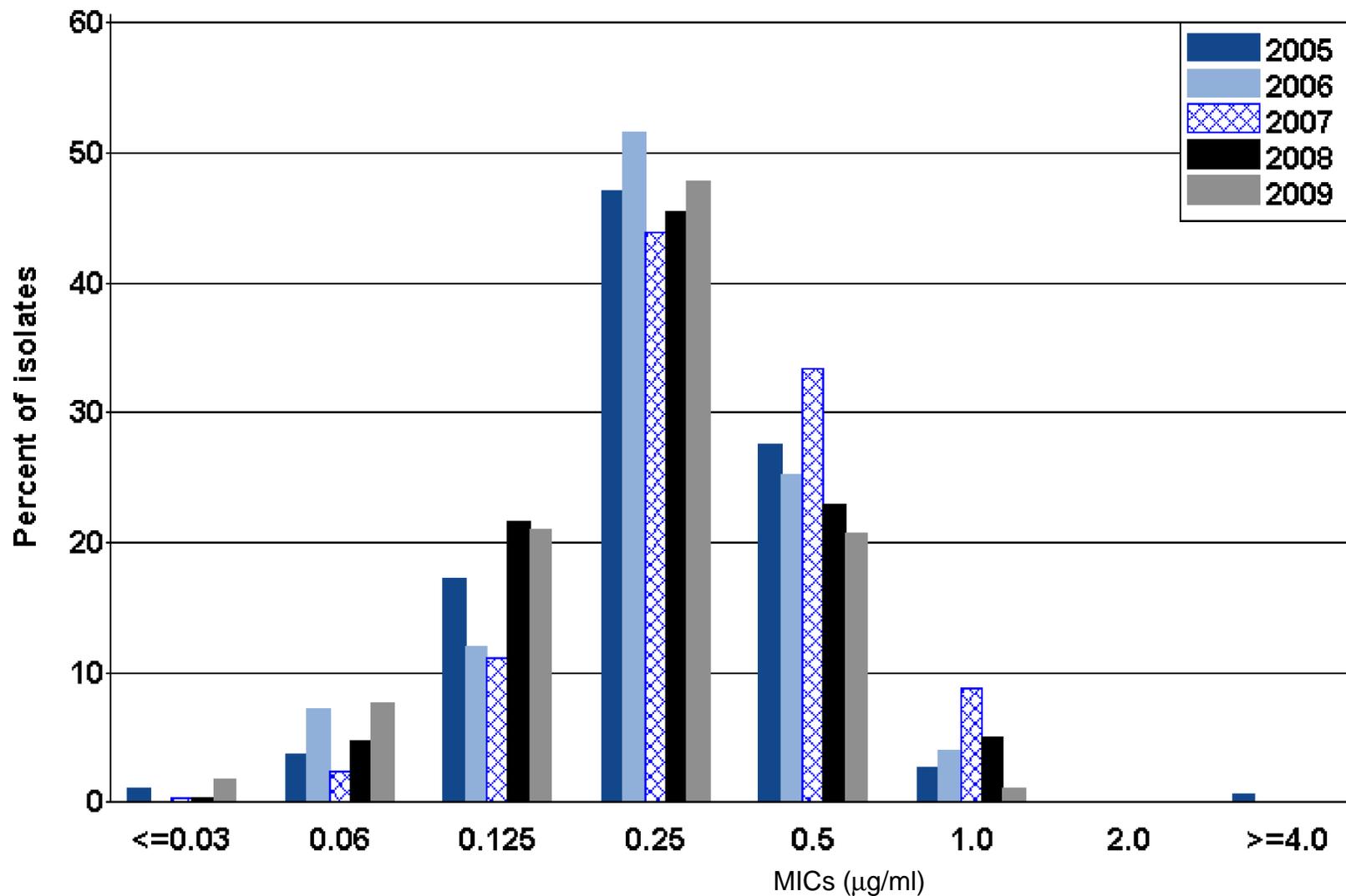
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

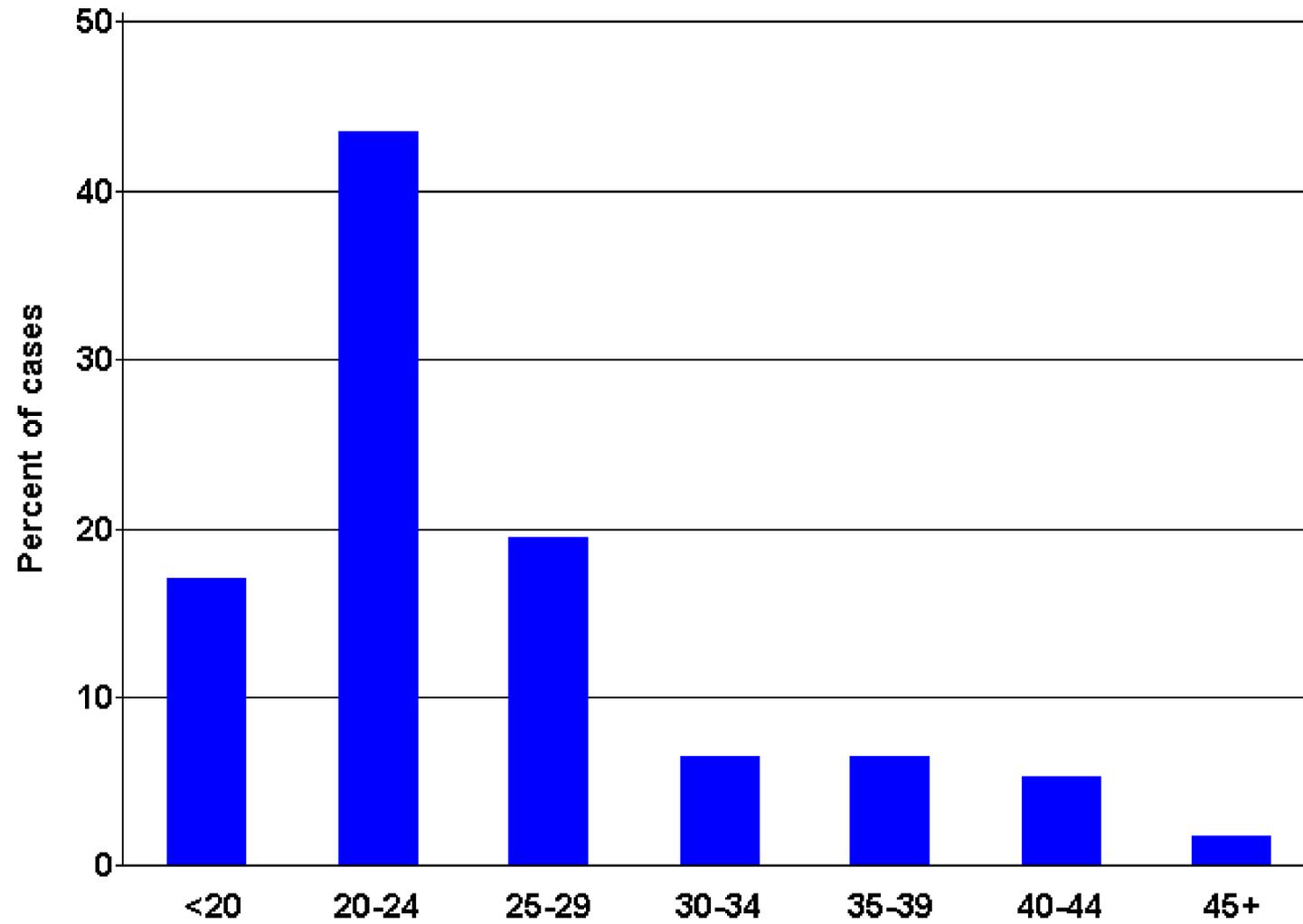
Baltimore, Maryland

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



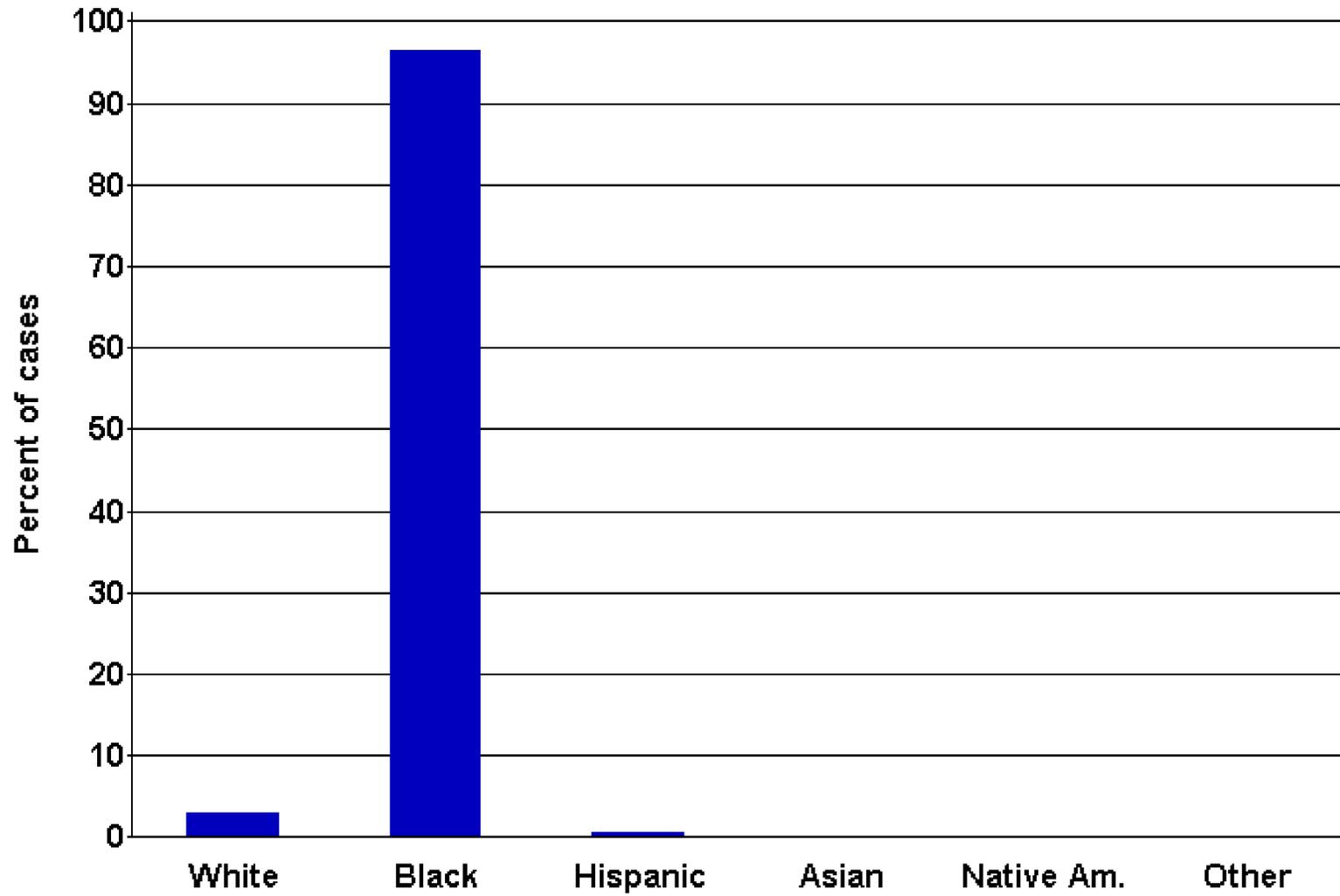
Birmingham, Alabama (N=209)

Figure A. Age of GISP participants, in years, 2009



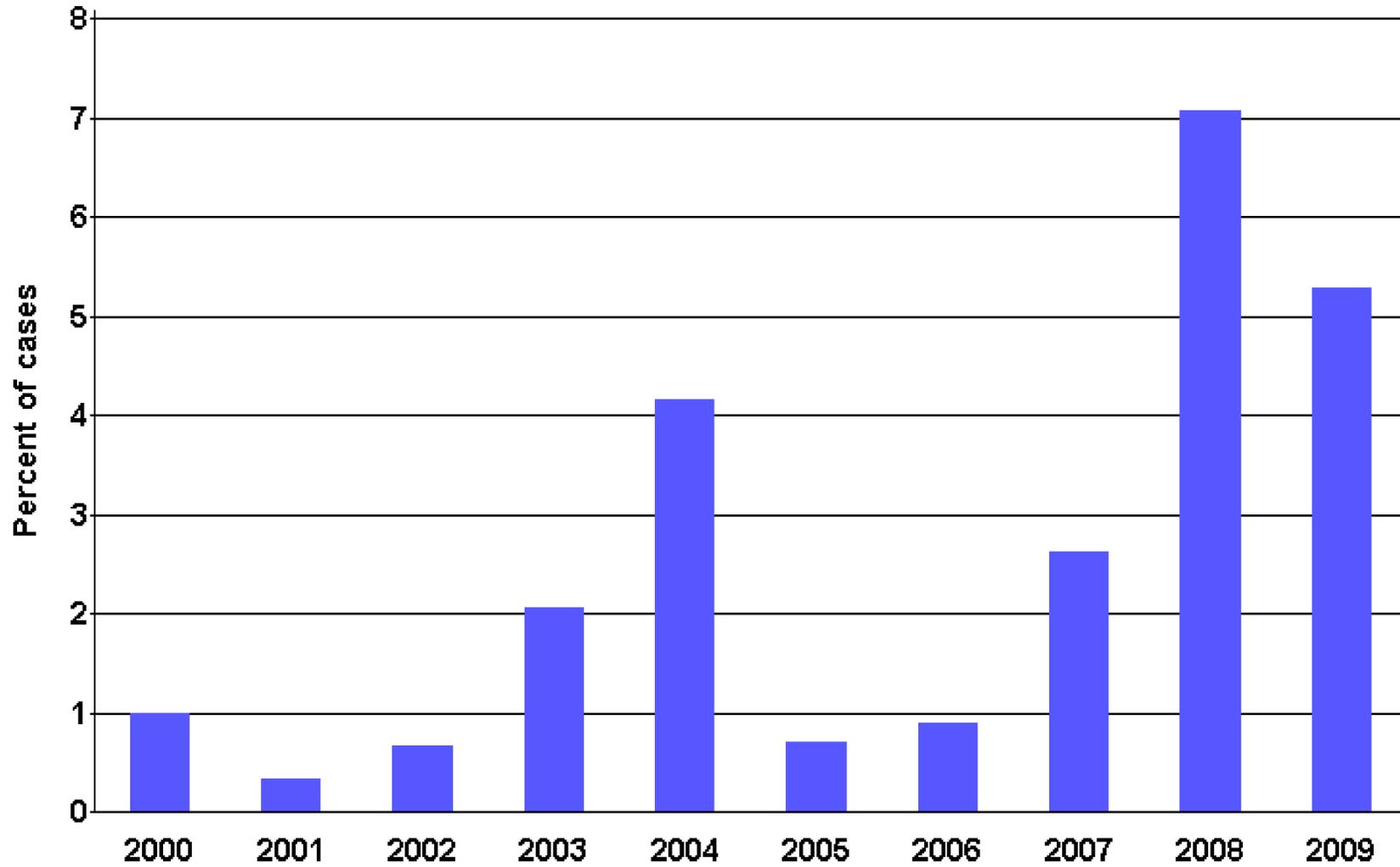
Birmingham, Alabama (N=209)

Figure B. Race/ethnicity of GISP participants, 2009



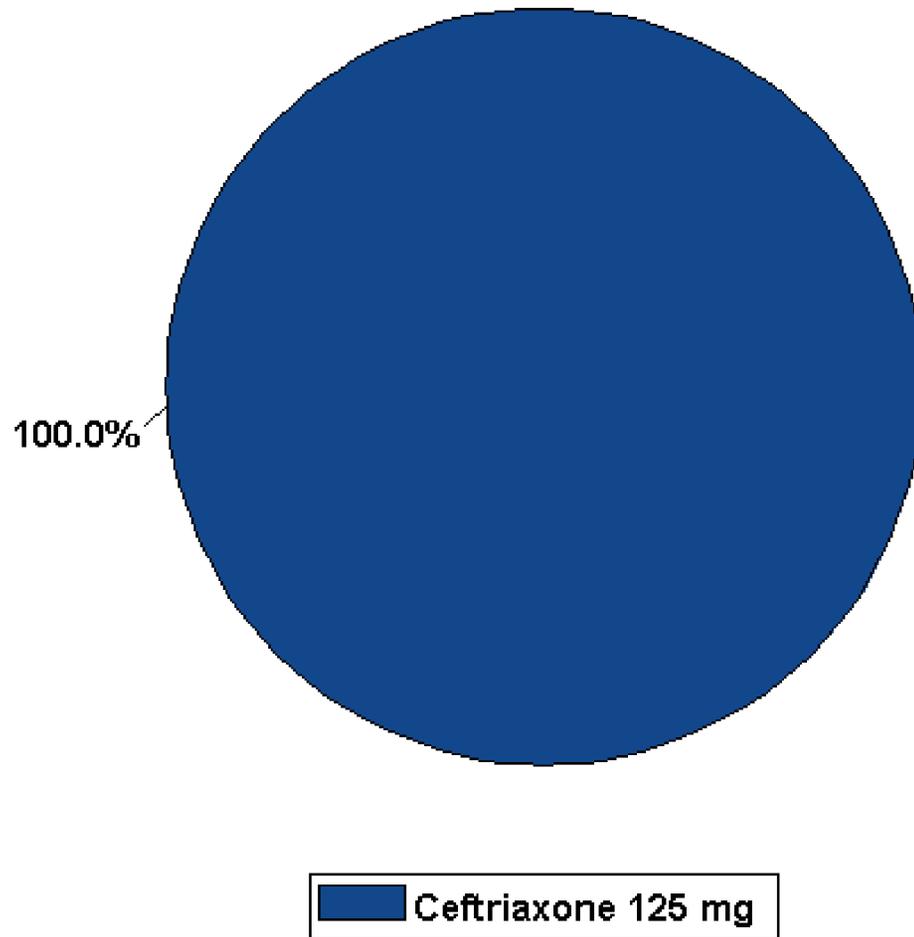
Birmingham, Alabama

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



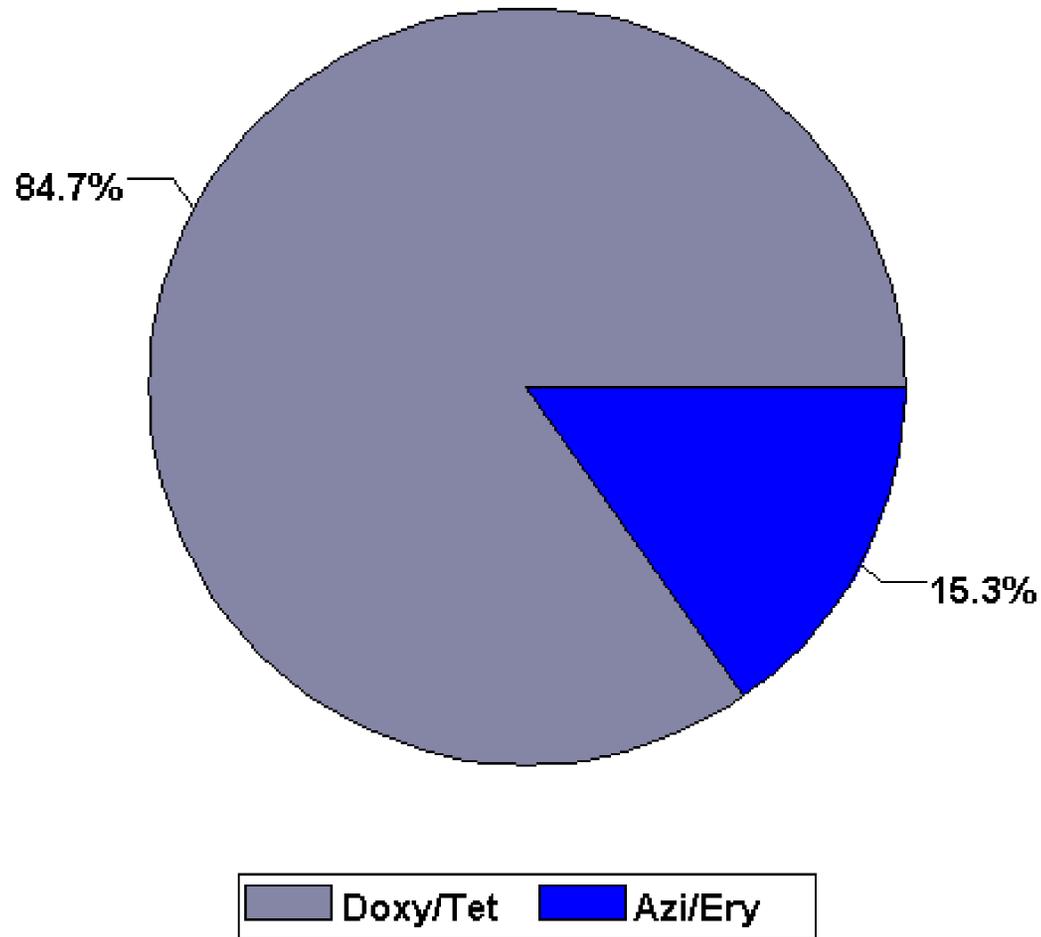
Birmingham, Alabama (N=209)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



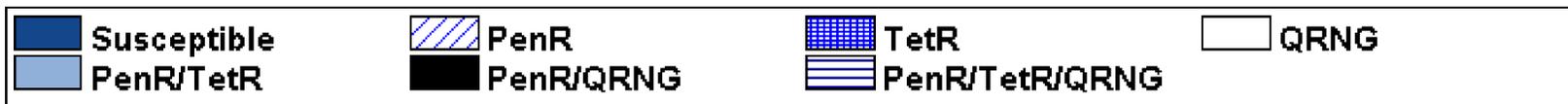
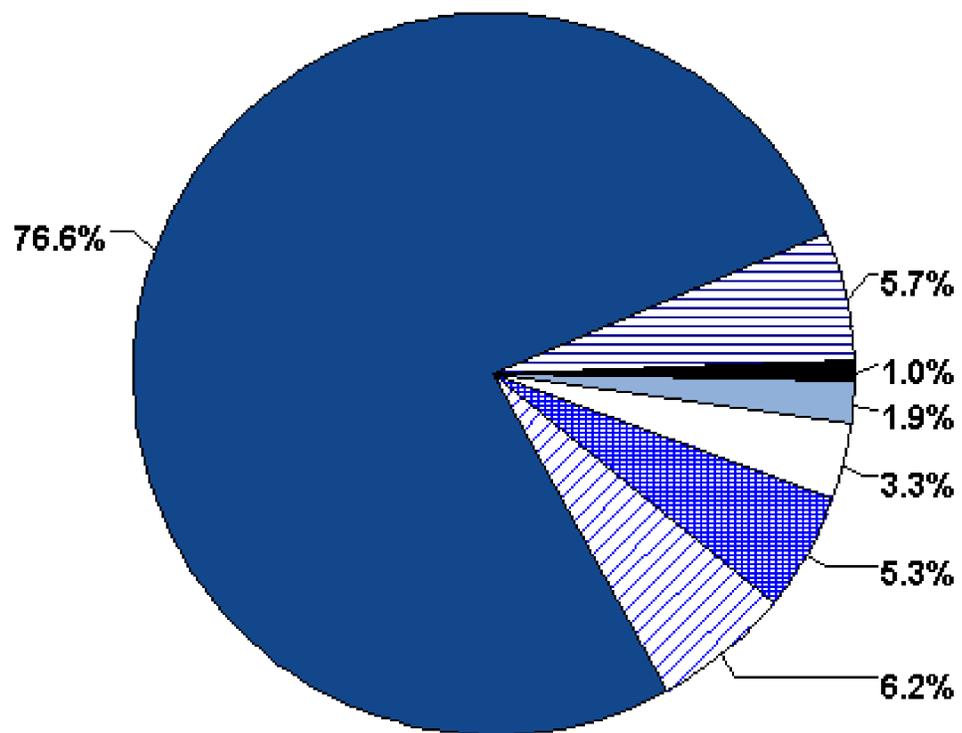
Birmingham, Alabama (N=209)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



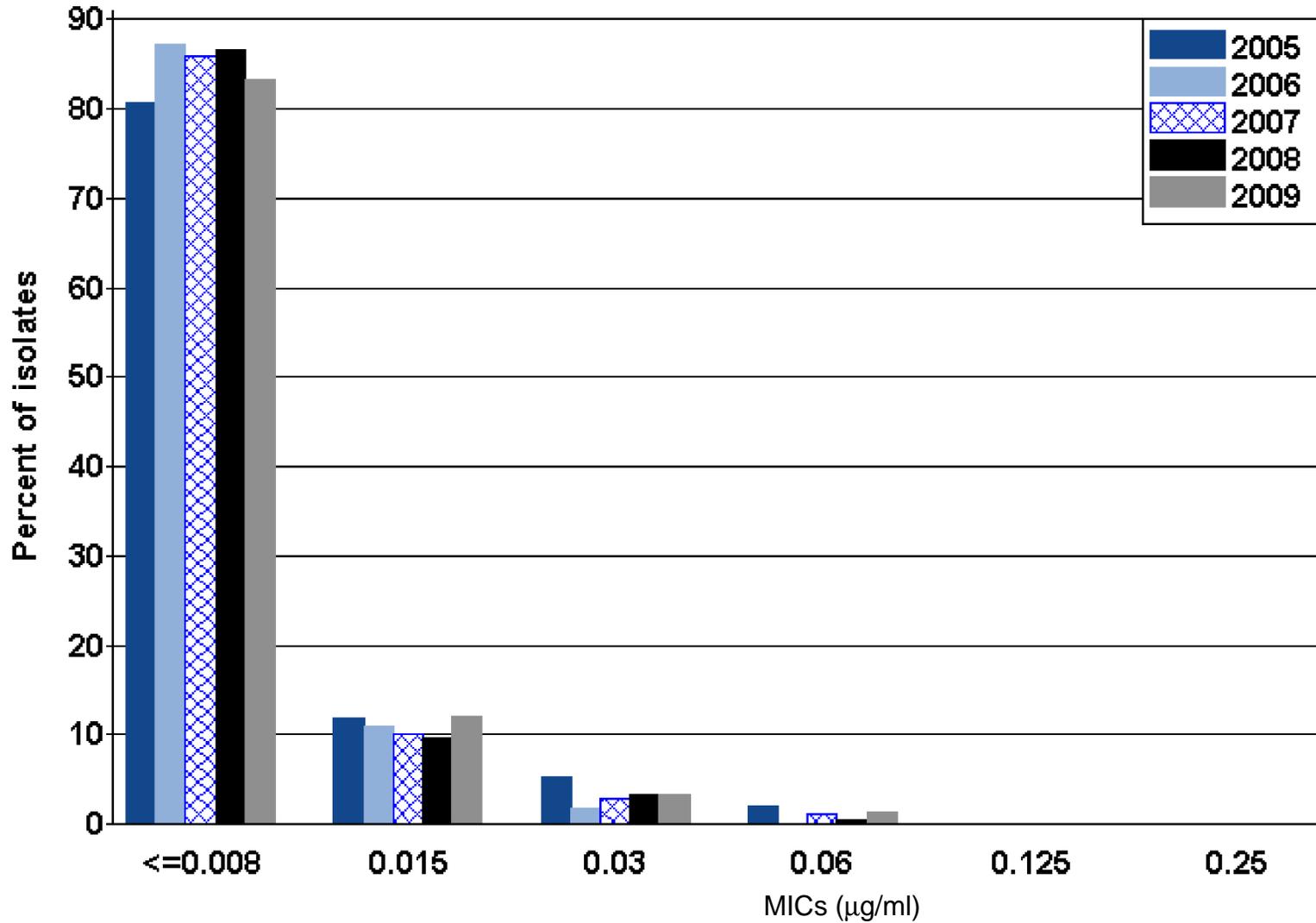
Birmingham, Alabama (N=209)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



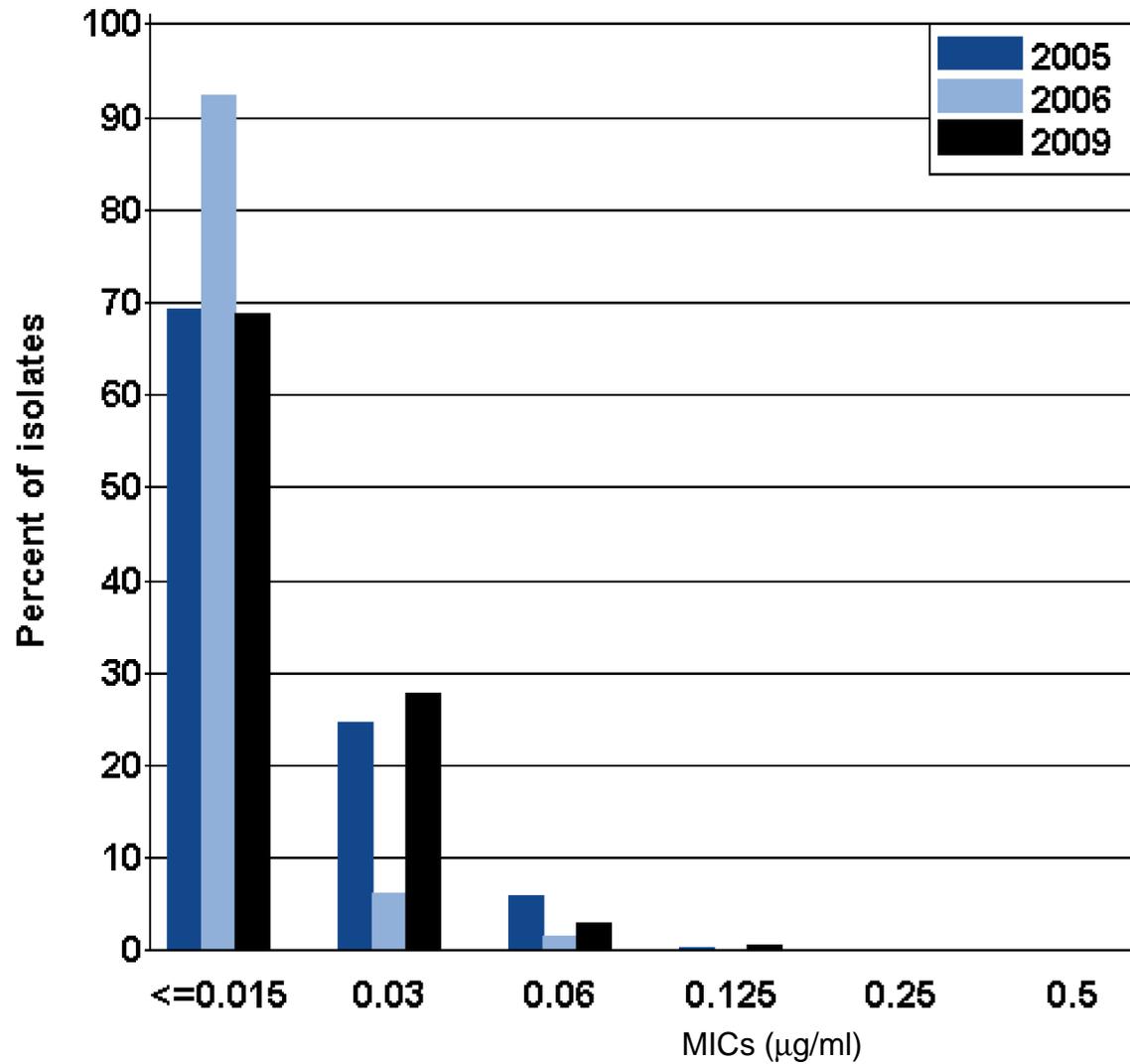
Birmingham, Alabama

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Birmingham, Alabama

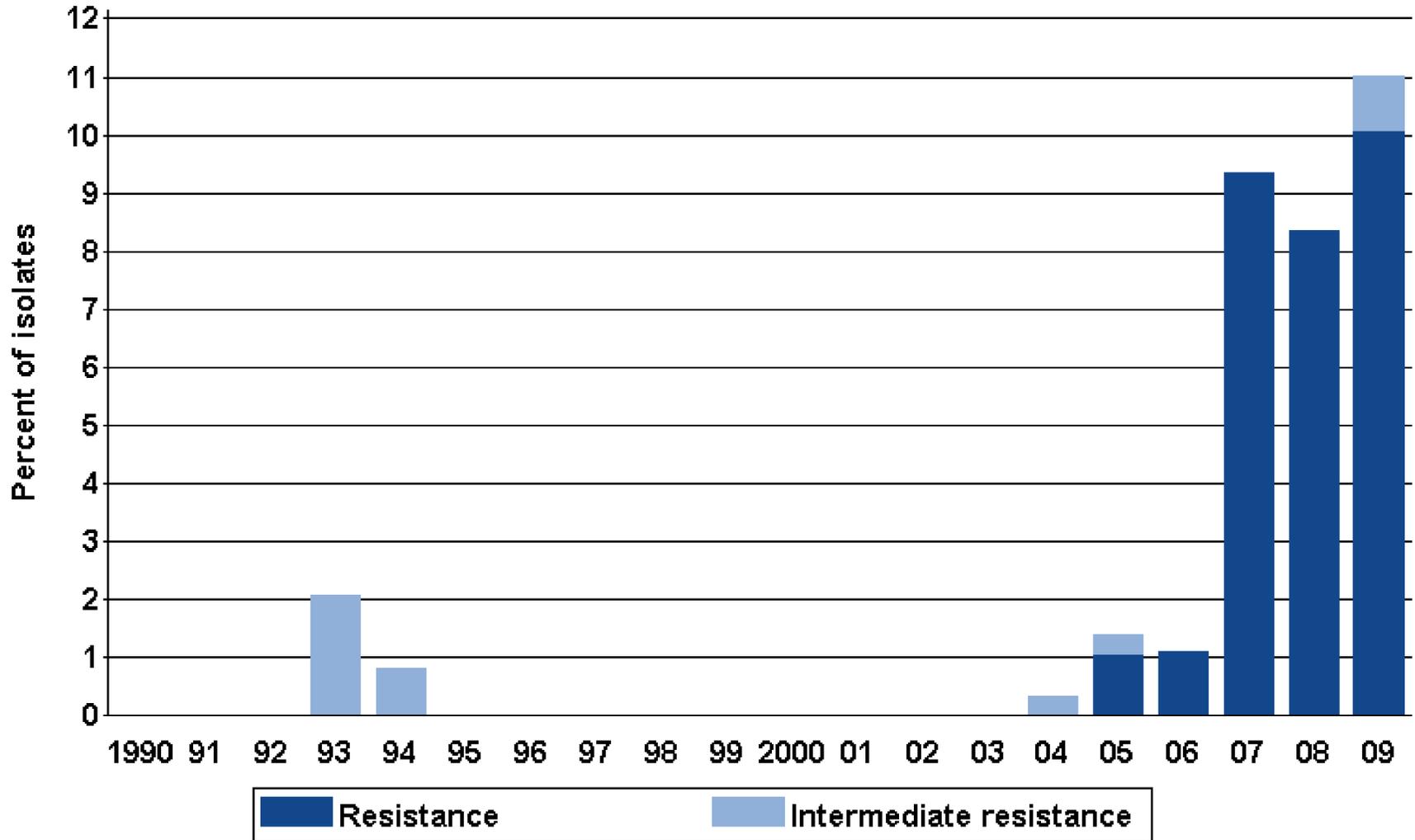
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Birmingham, Alabama

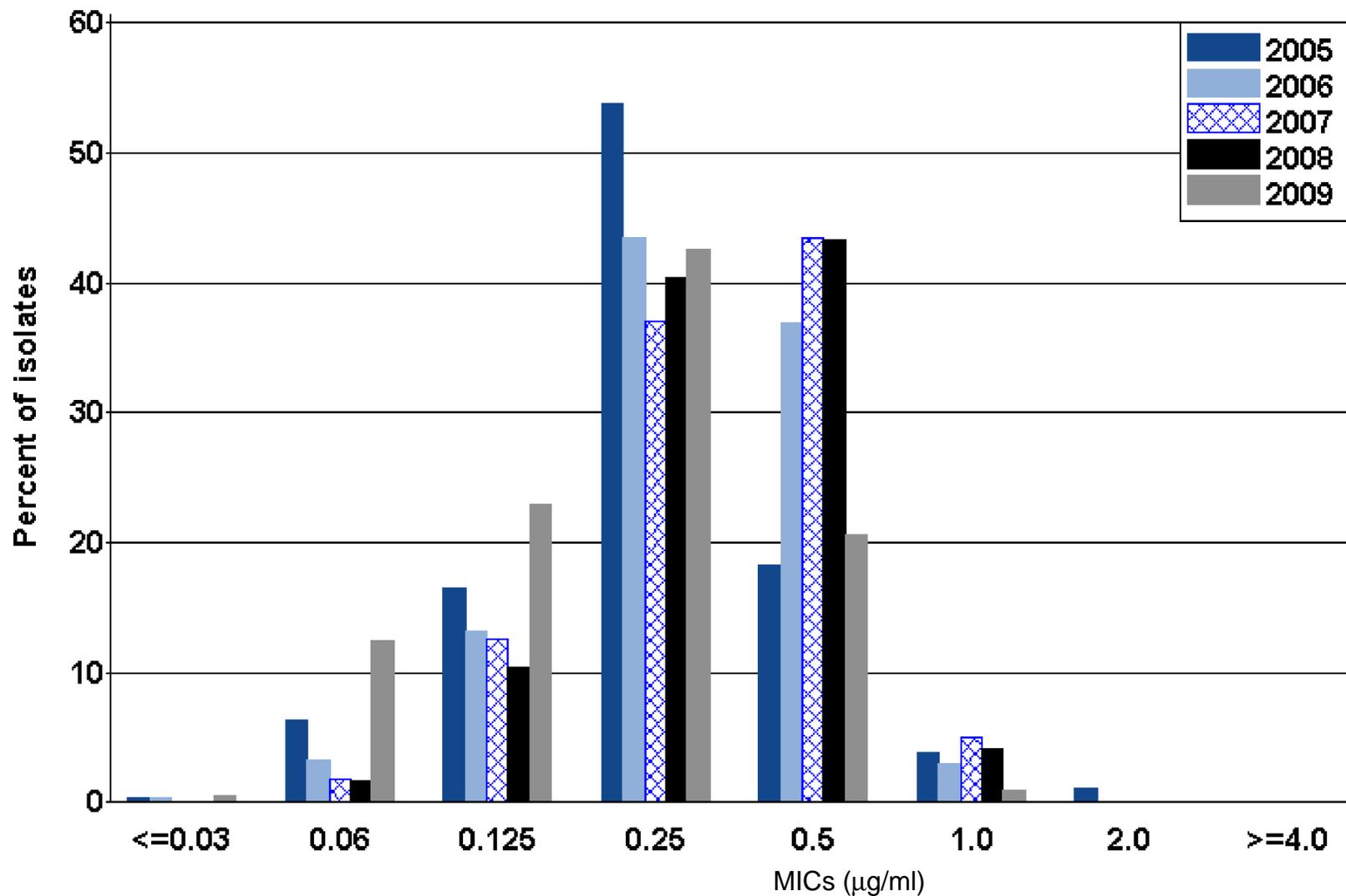
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

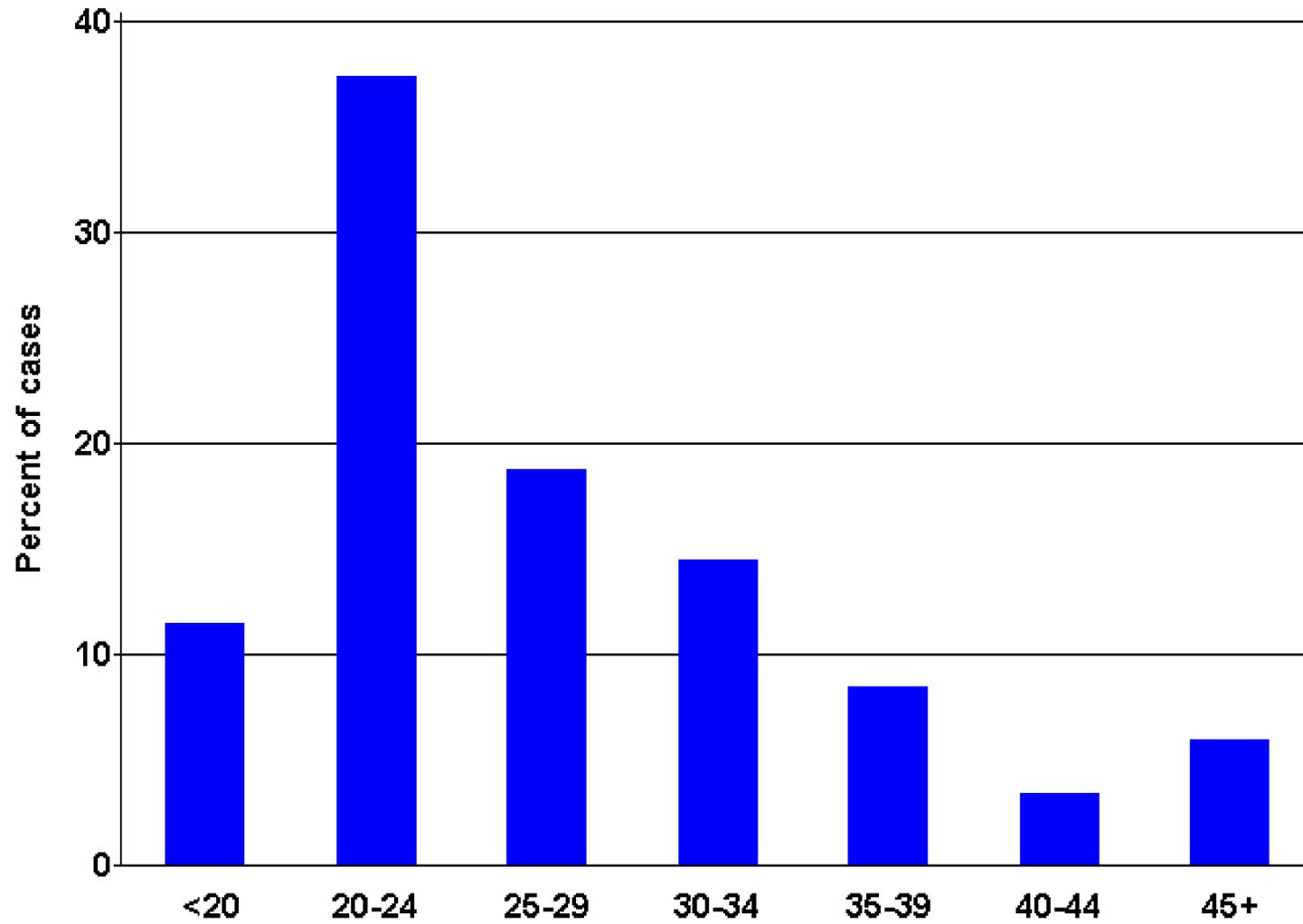
Birmingham, Alabama

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



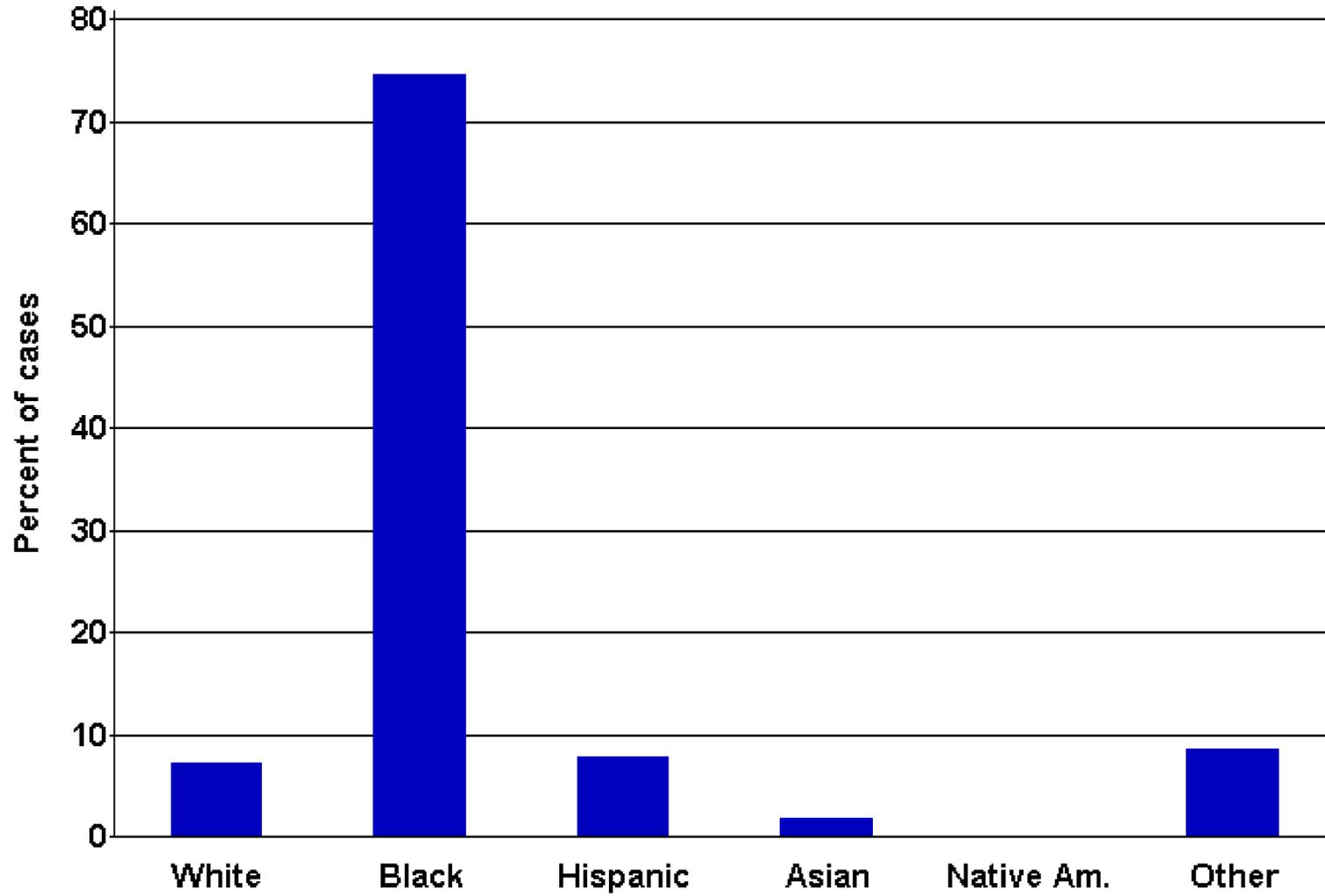
Chicago, Illinois (N=235)

Figure A. Age of GISP participants, in years, 2009



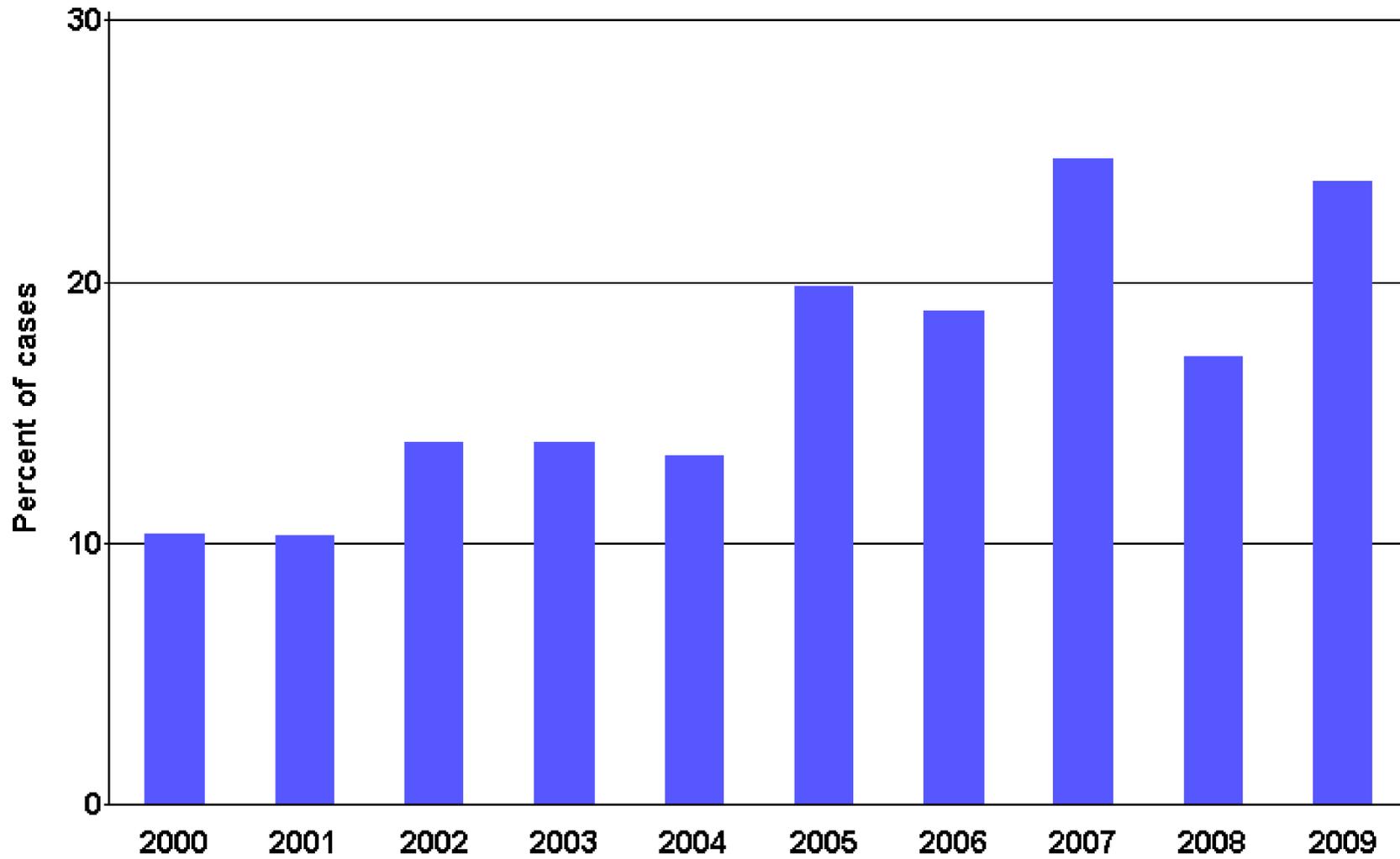
Chicago, Illinois (N=235)

Figure B. Race/ethnicity of GISP participants, 2009



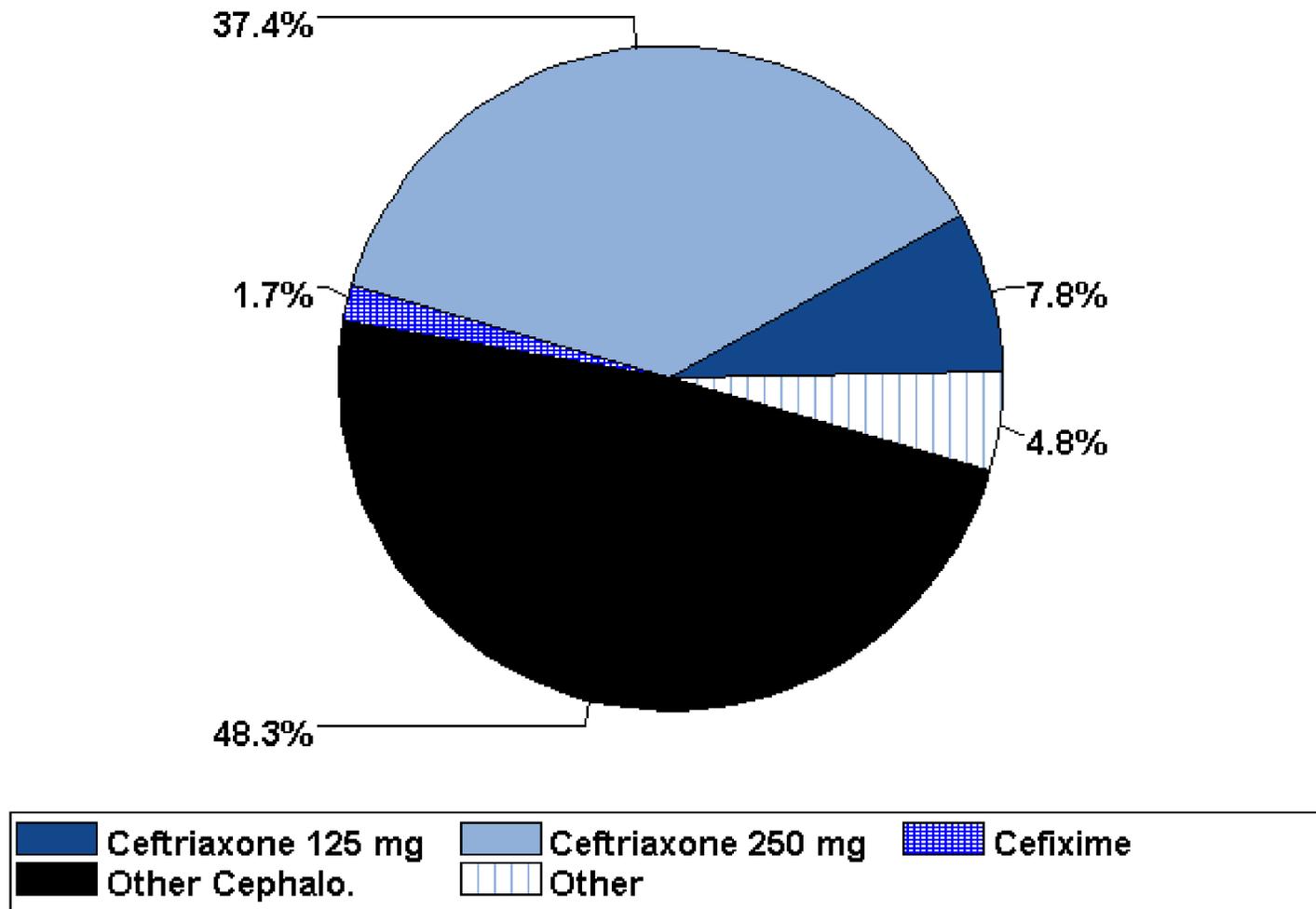
Chicago, Illinois

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



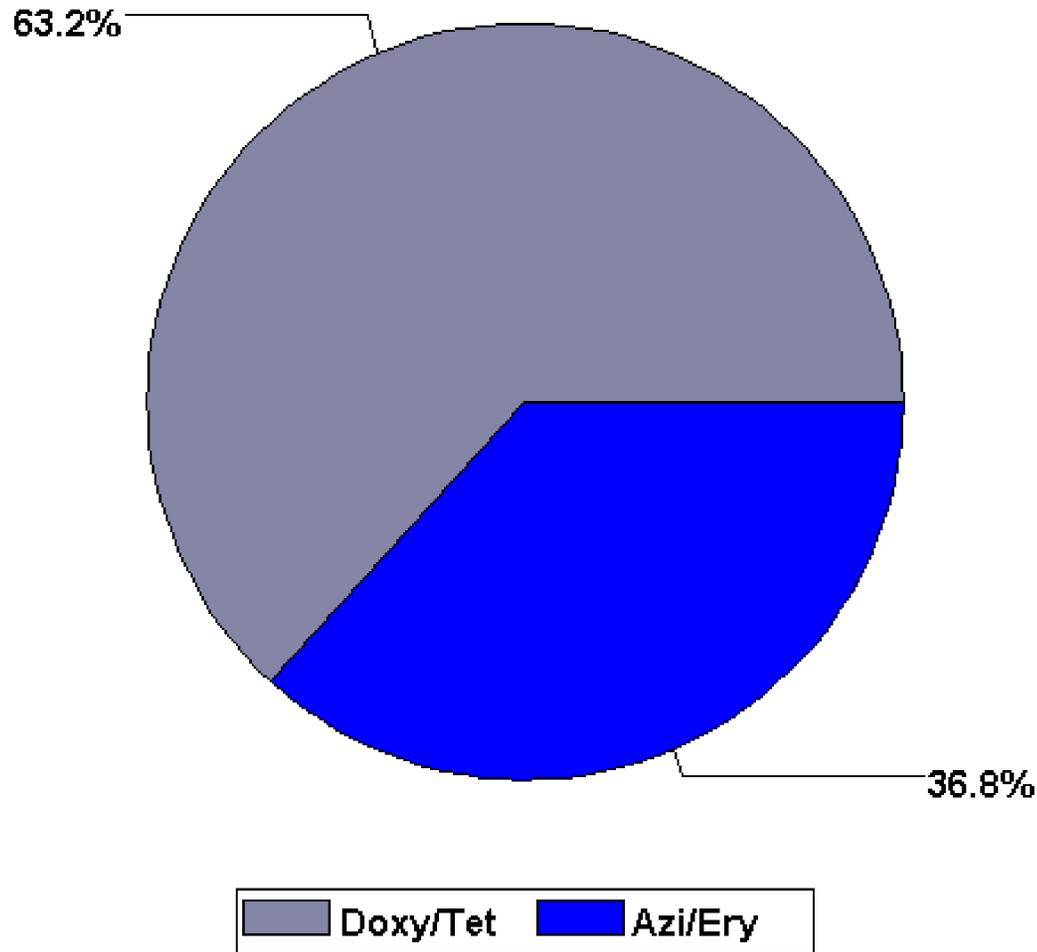
Chicago, Illinois (N=235)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



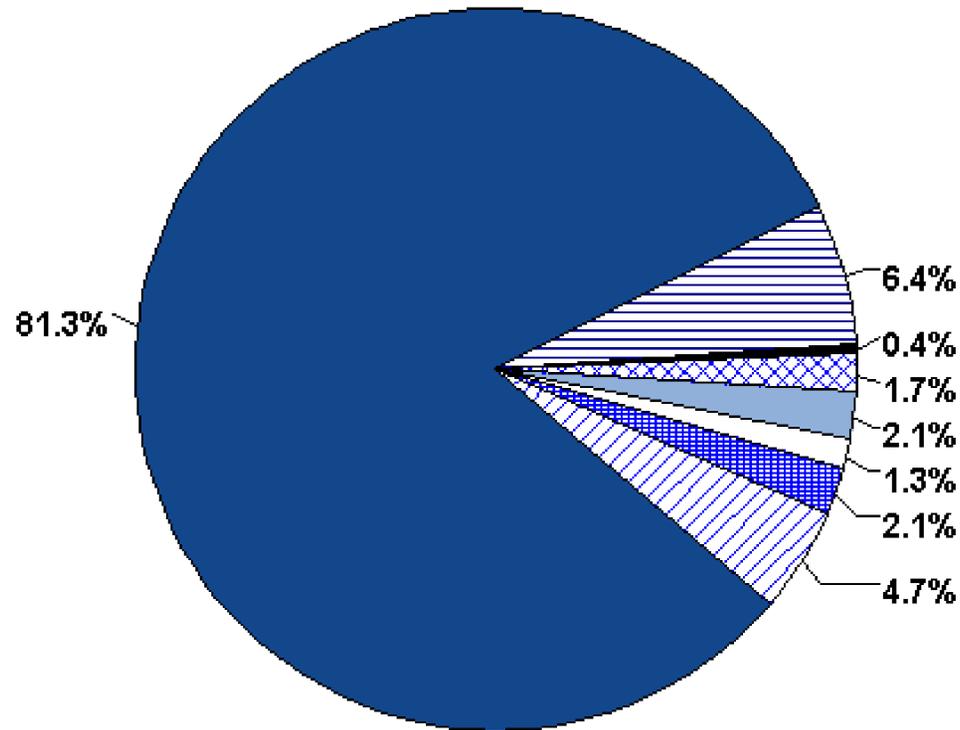
Chicago, Illinois (N=235)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



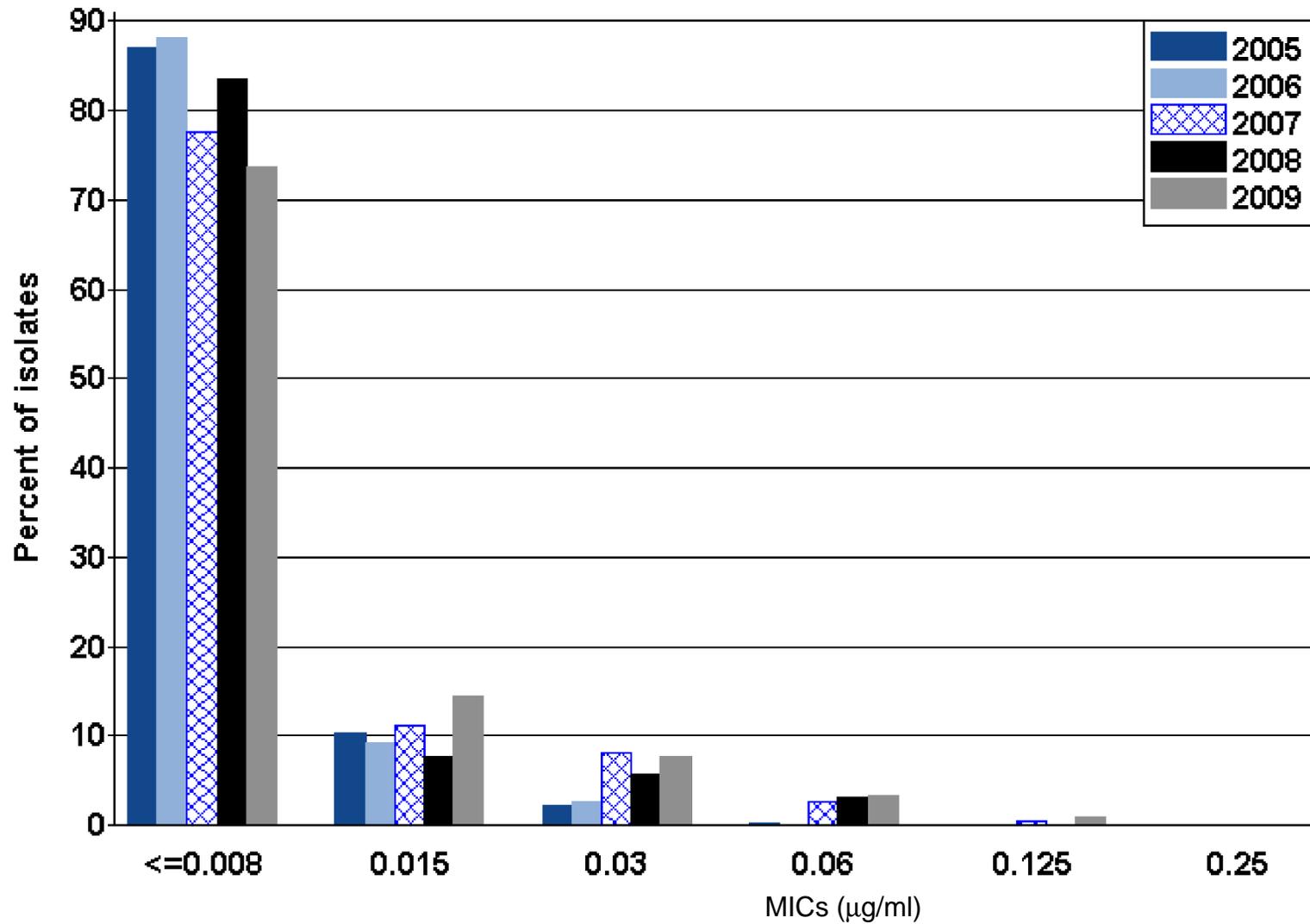
Chicago, Illinois (N=235)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



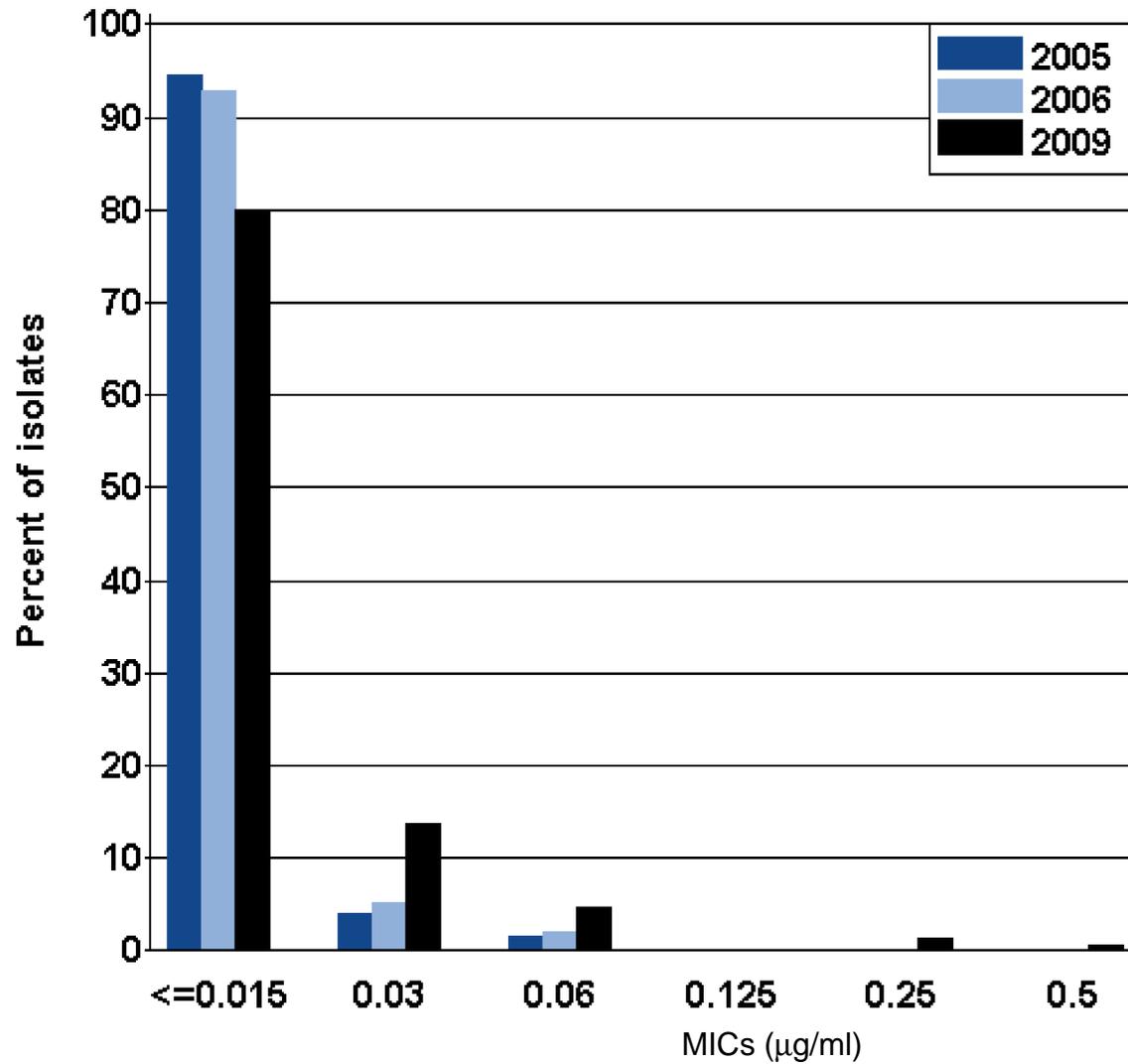
Chicago, Illinois

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Chicago, Illinois

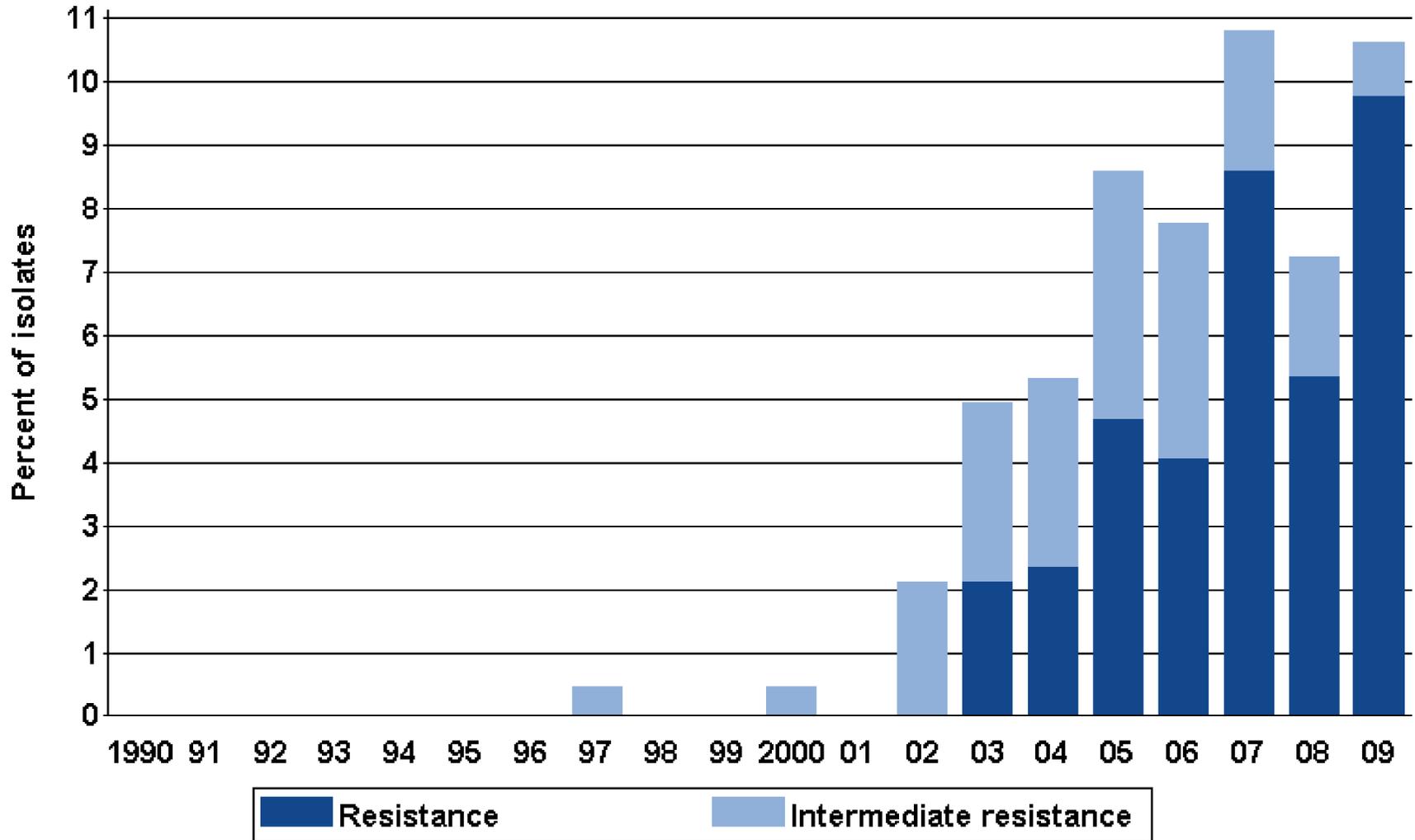
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Chicago, Illinois

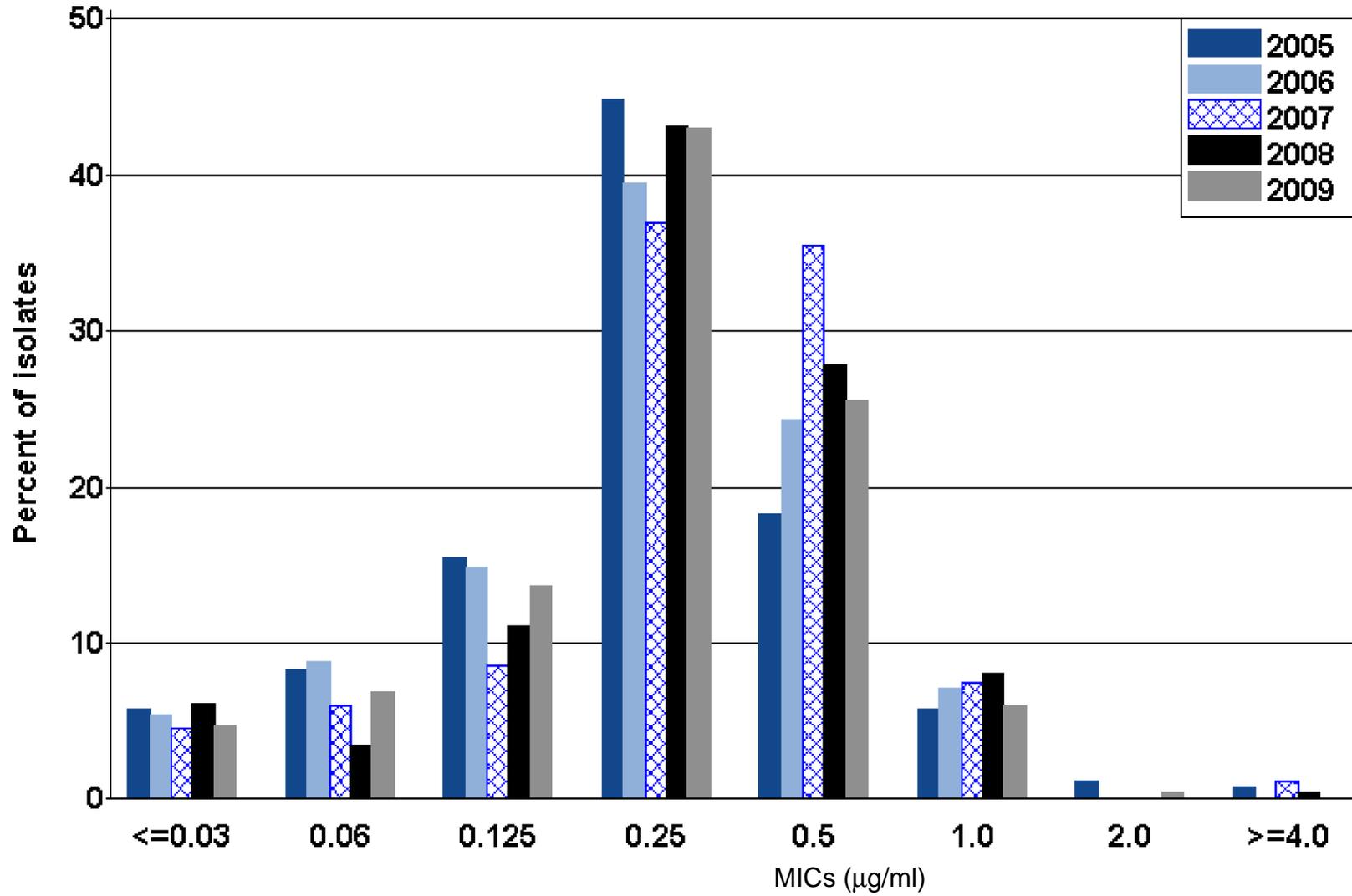
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

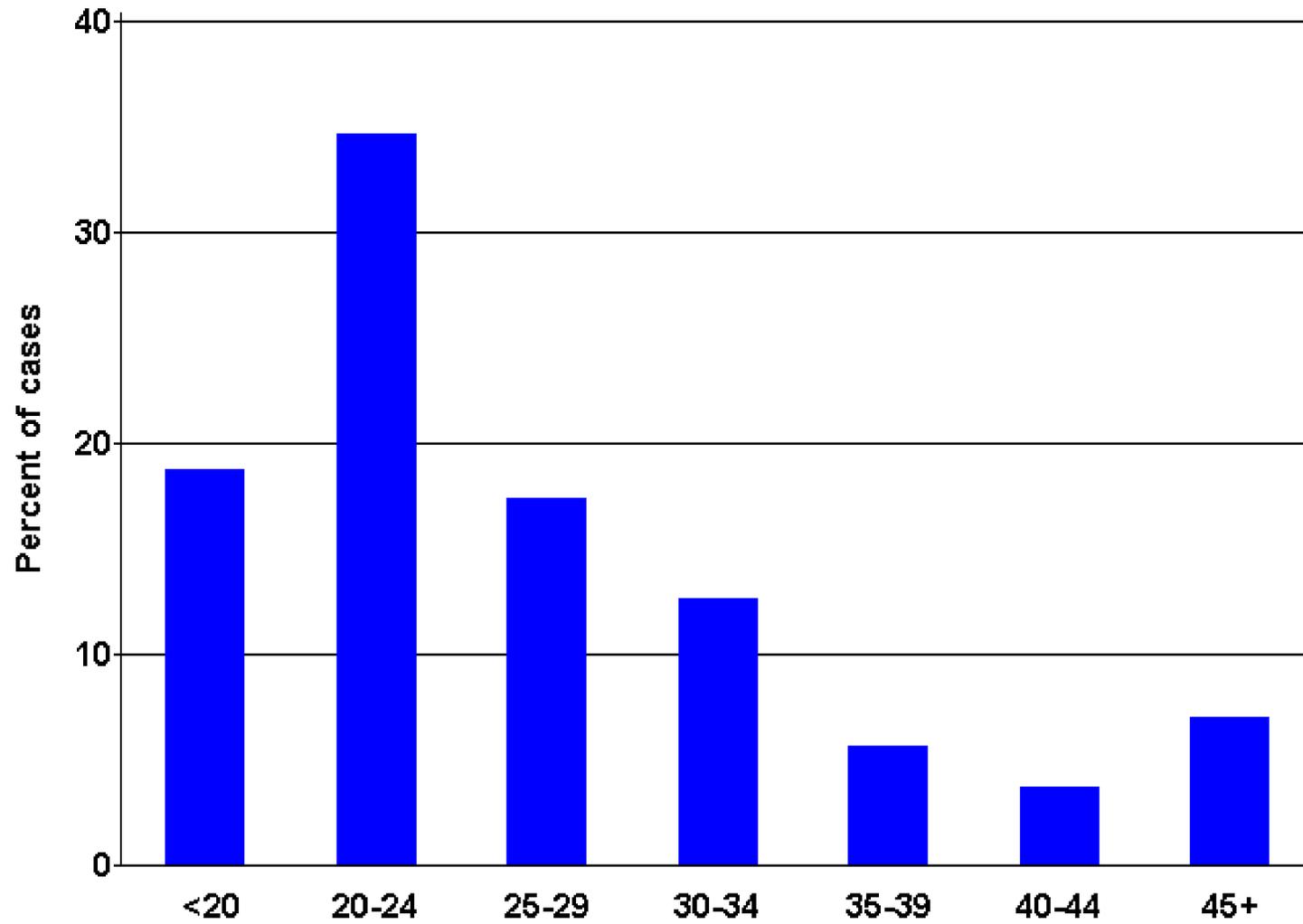
Chicago, Illinois

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



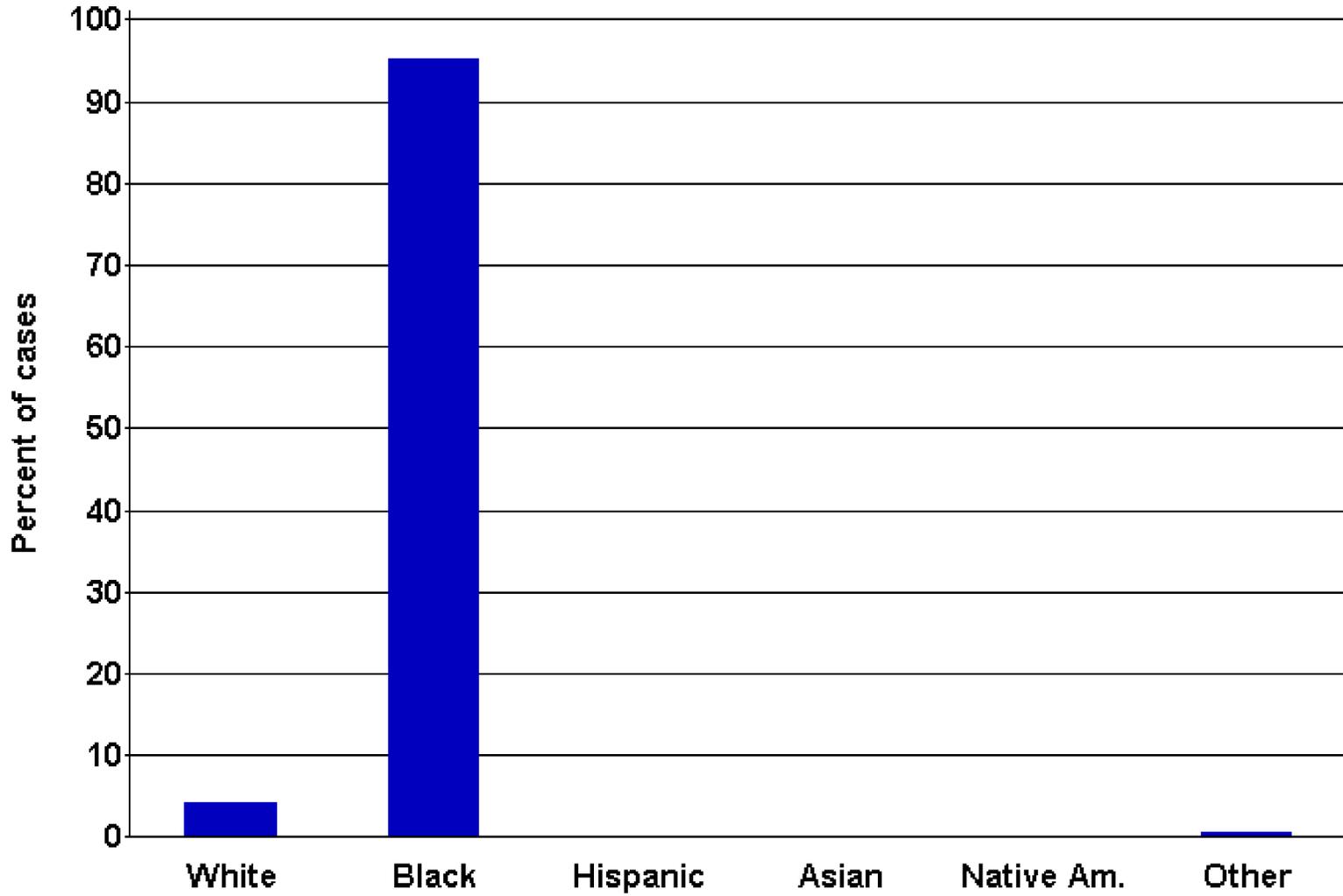
Cincinnati, Ohio (N=213)

Figure A. Age of GISP participants, in years, 2009



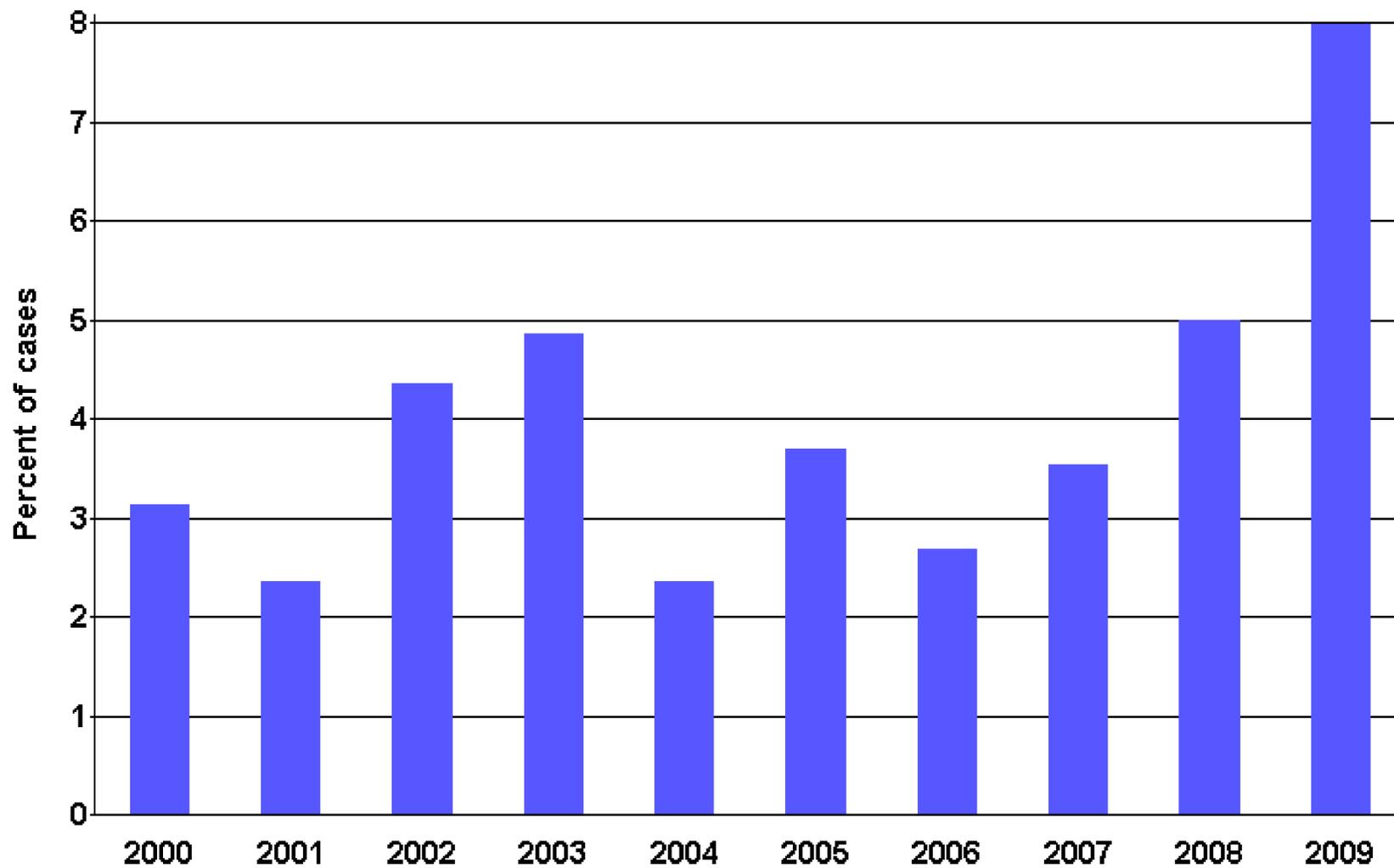
Cincinnati, Ohio (N=213)

Figure B. Race/ethnicity of GISP participants, 2009



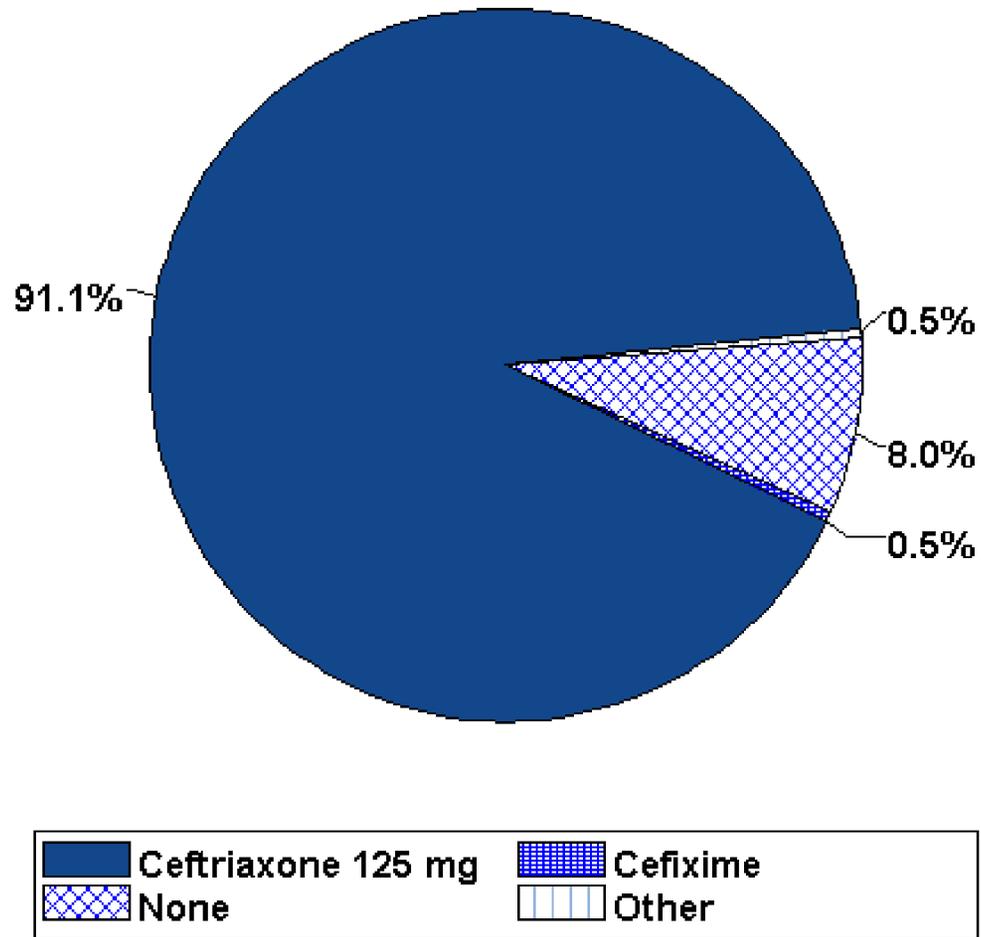
Cincinnati, Ohio

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



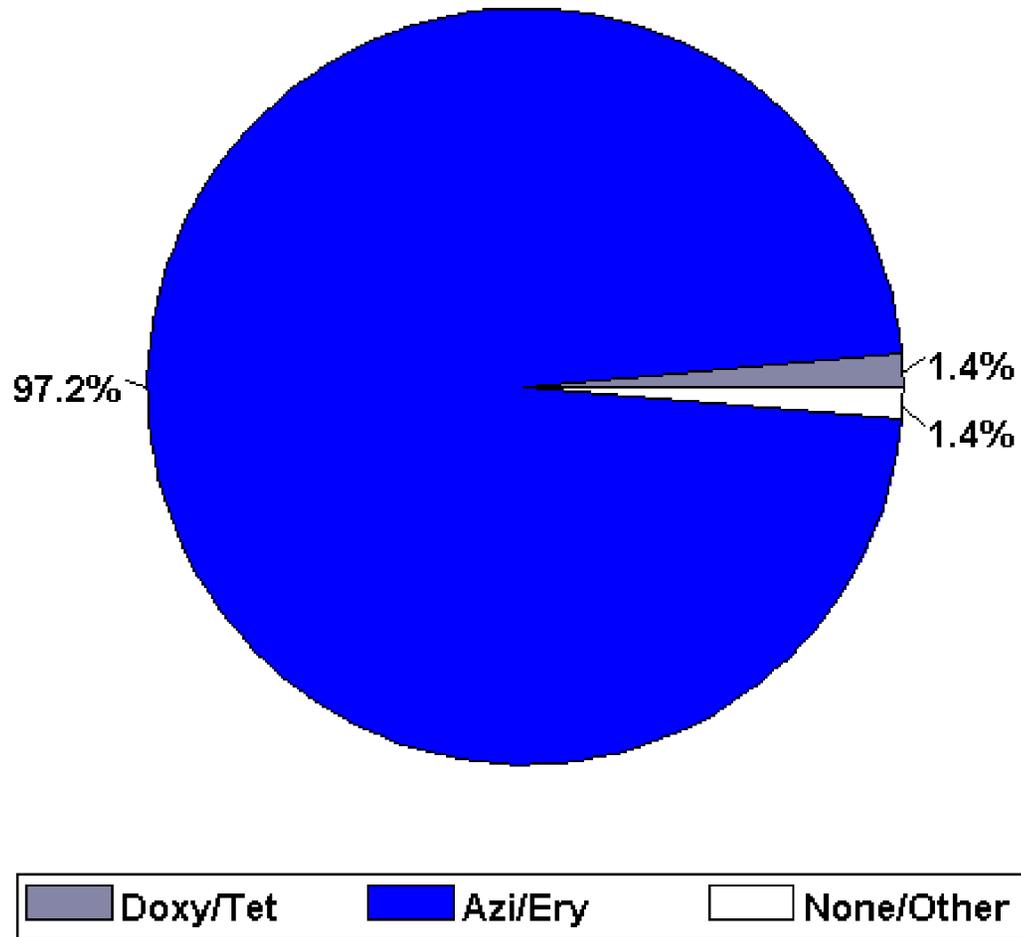
Cincinnati, Ohio (N=213)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



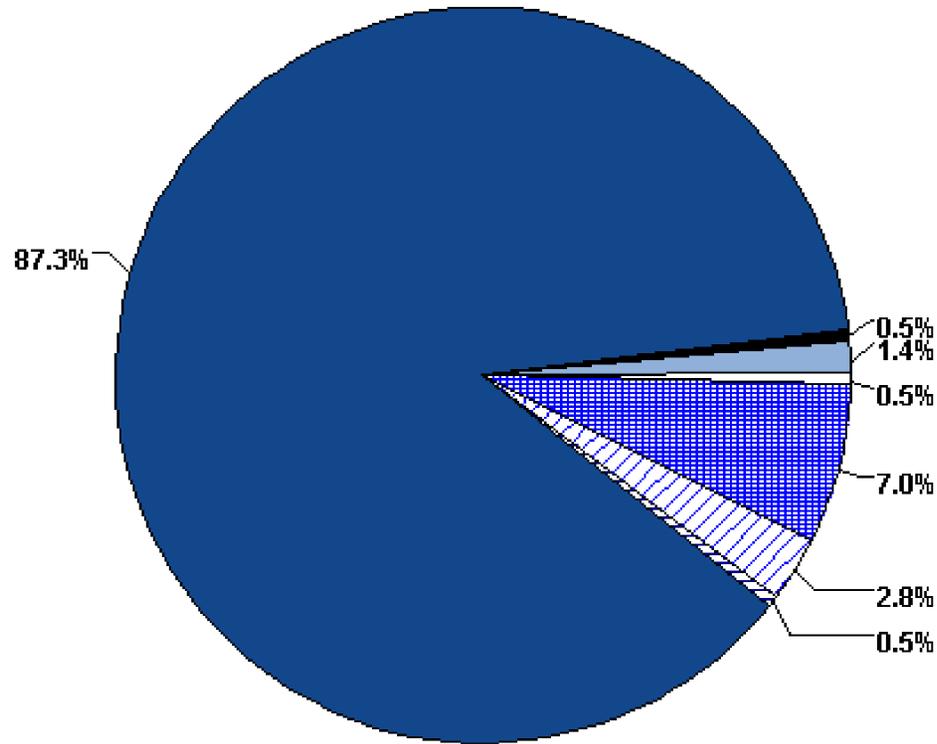
Cincinnati, Ohio (N=213)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



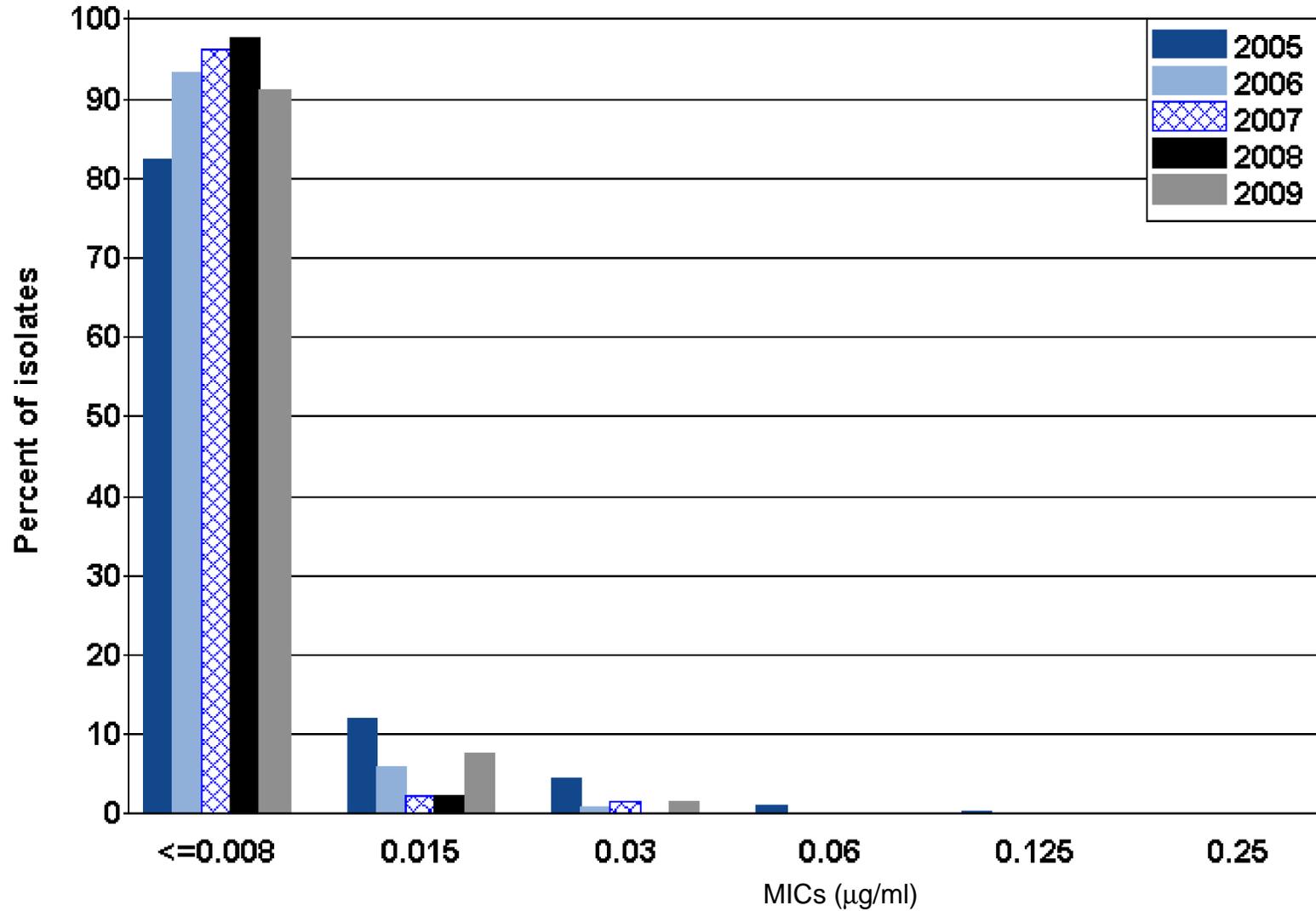
Cincinnati, Ohio (N=213)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



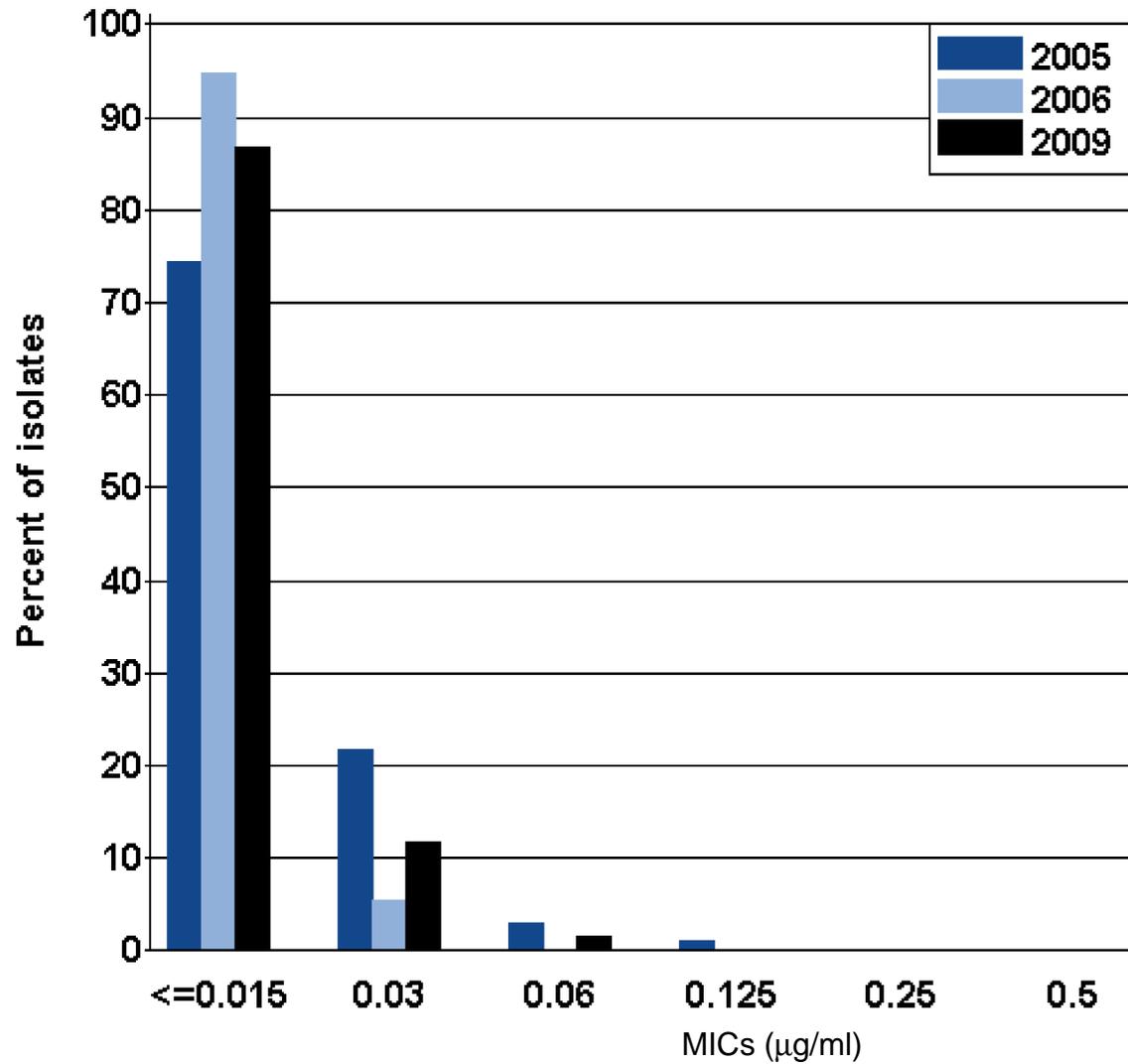
Cincinnati, Ohio

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Cincinnati, Ohio

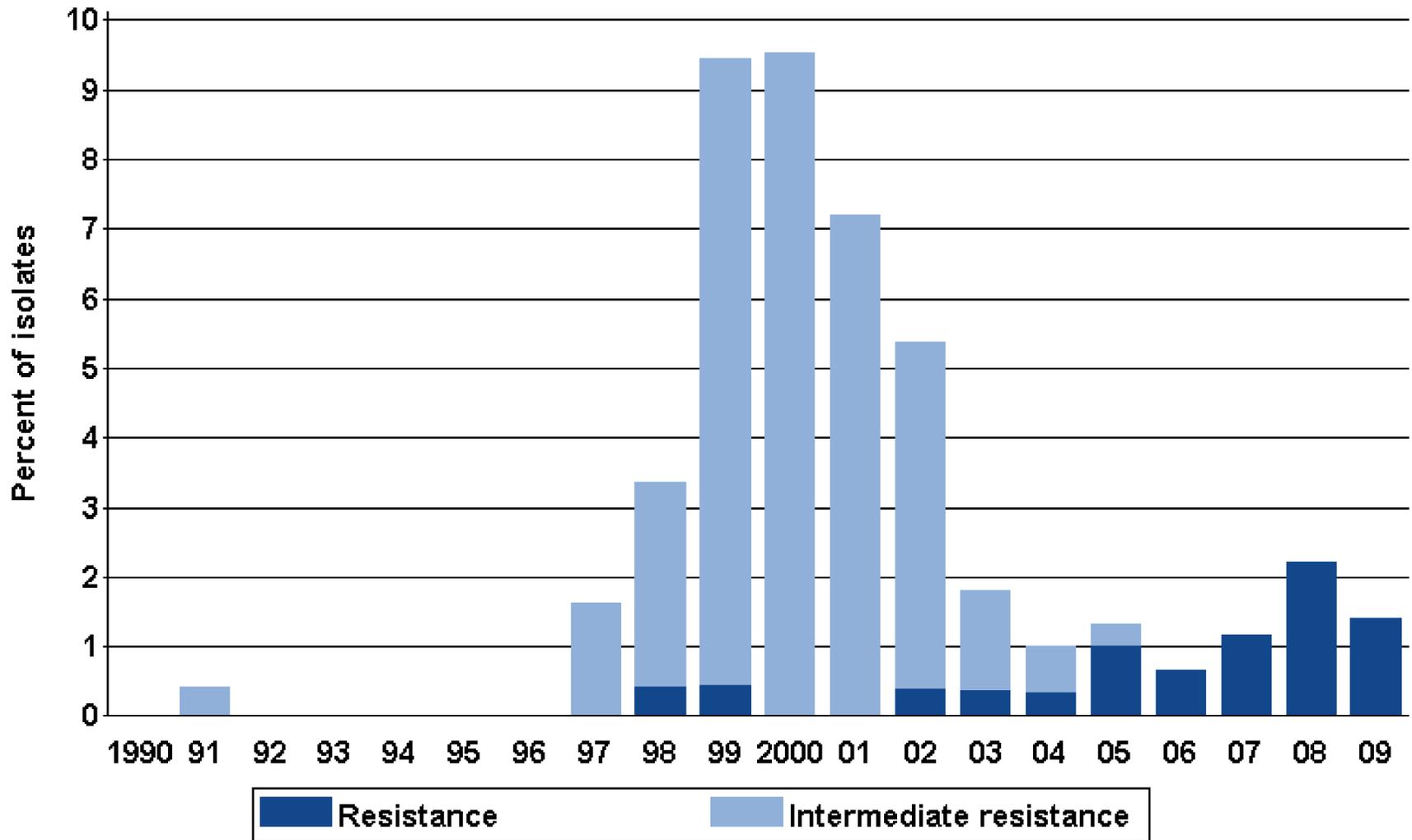
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Cincinnati, Ohio

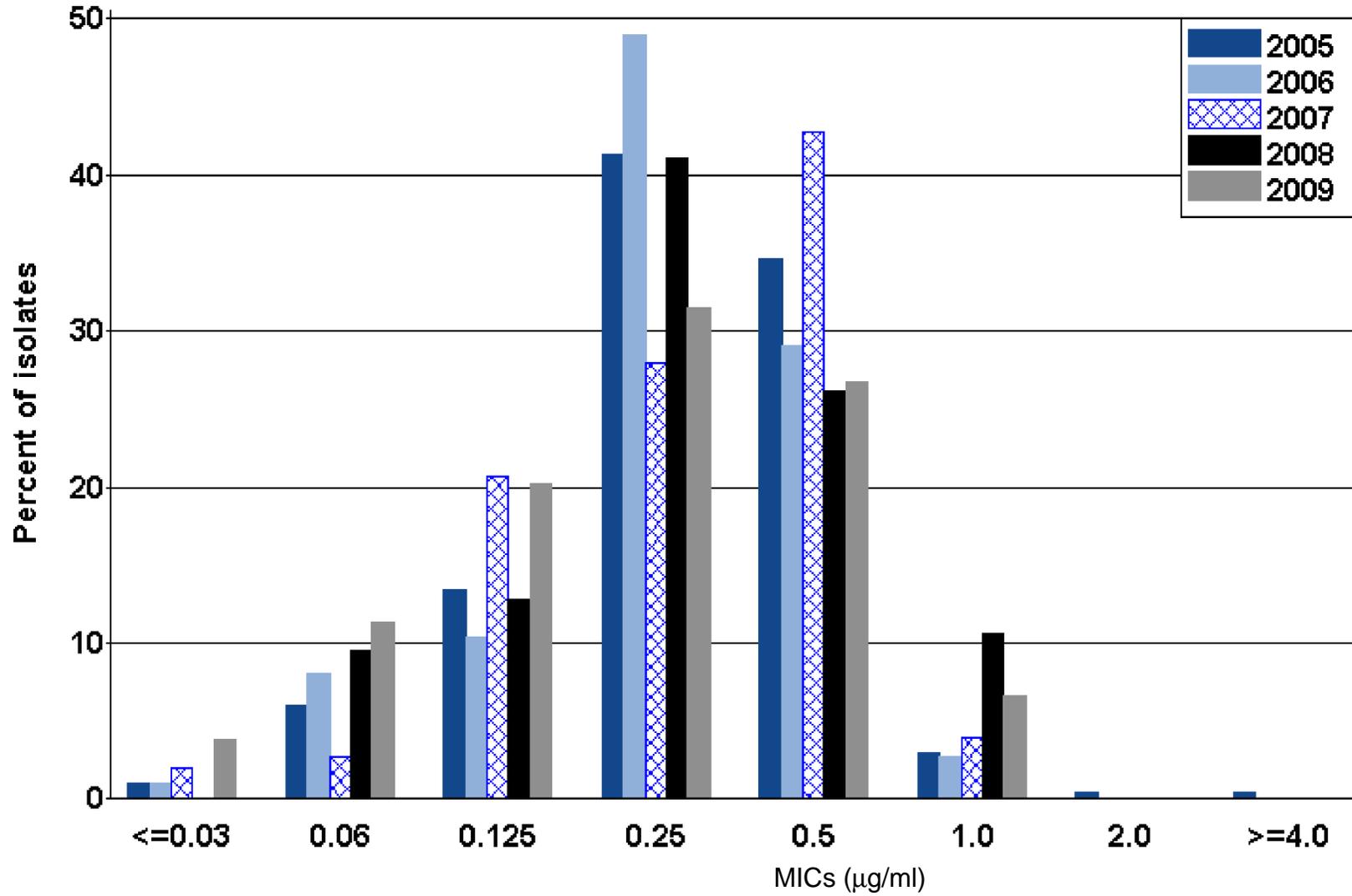
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

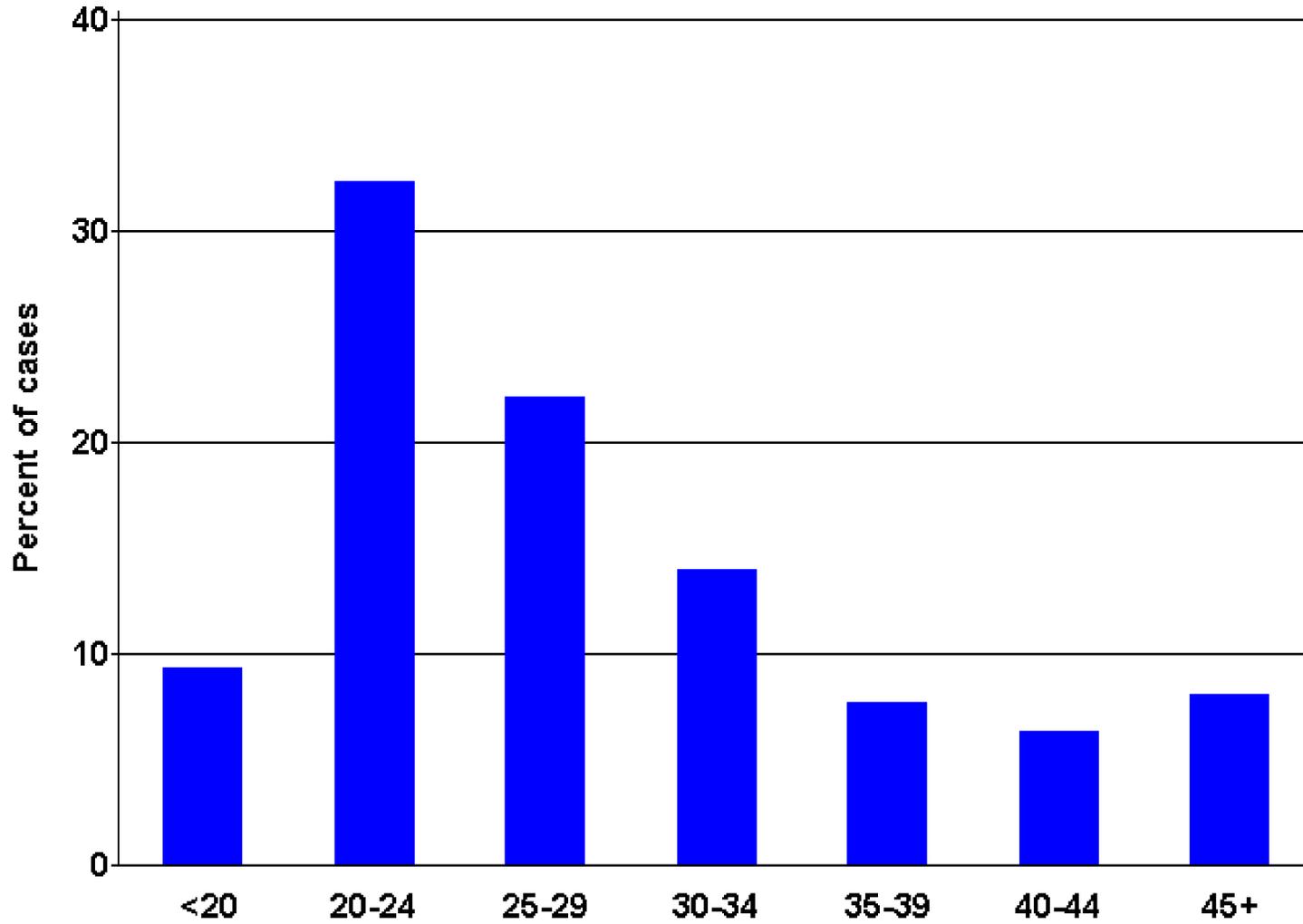
Cincinnati, Ohio

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



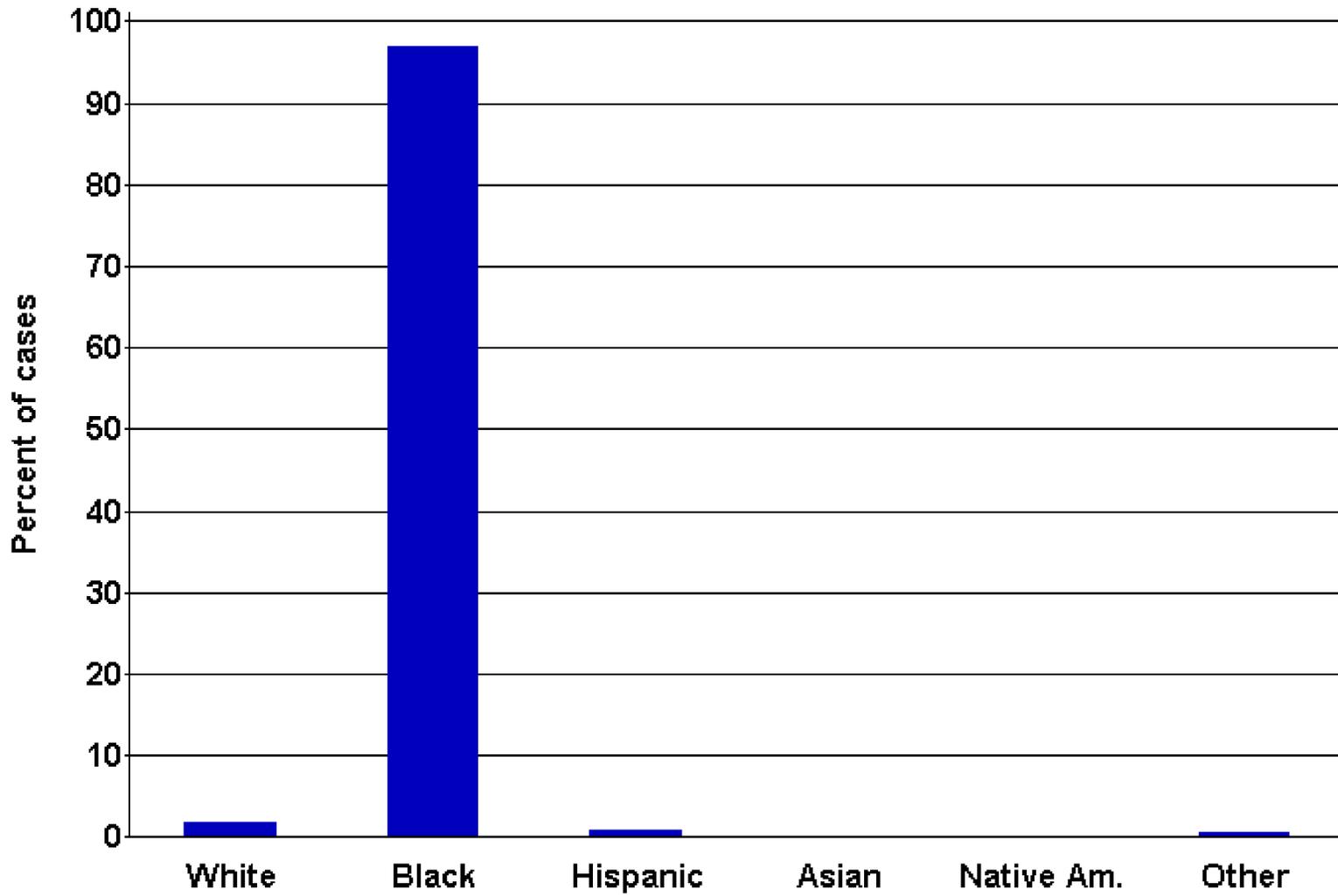
Cleveland, Ohio (N=235)

Figure A. Age of GISP participants, in years, 2009



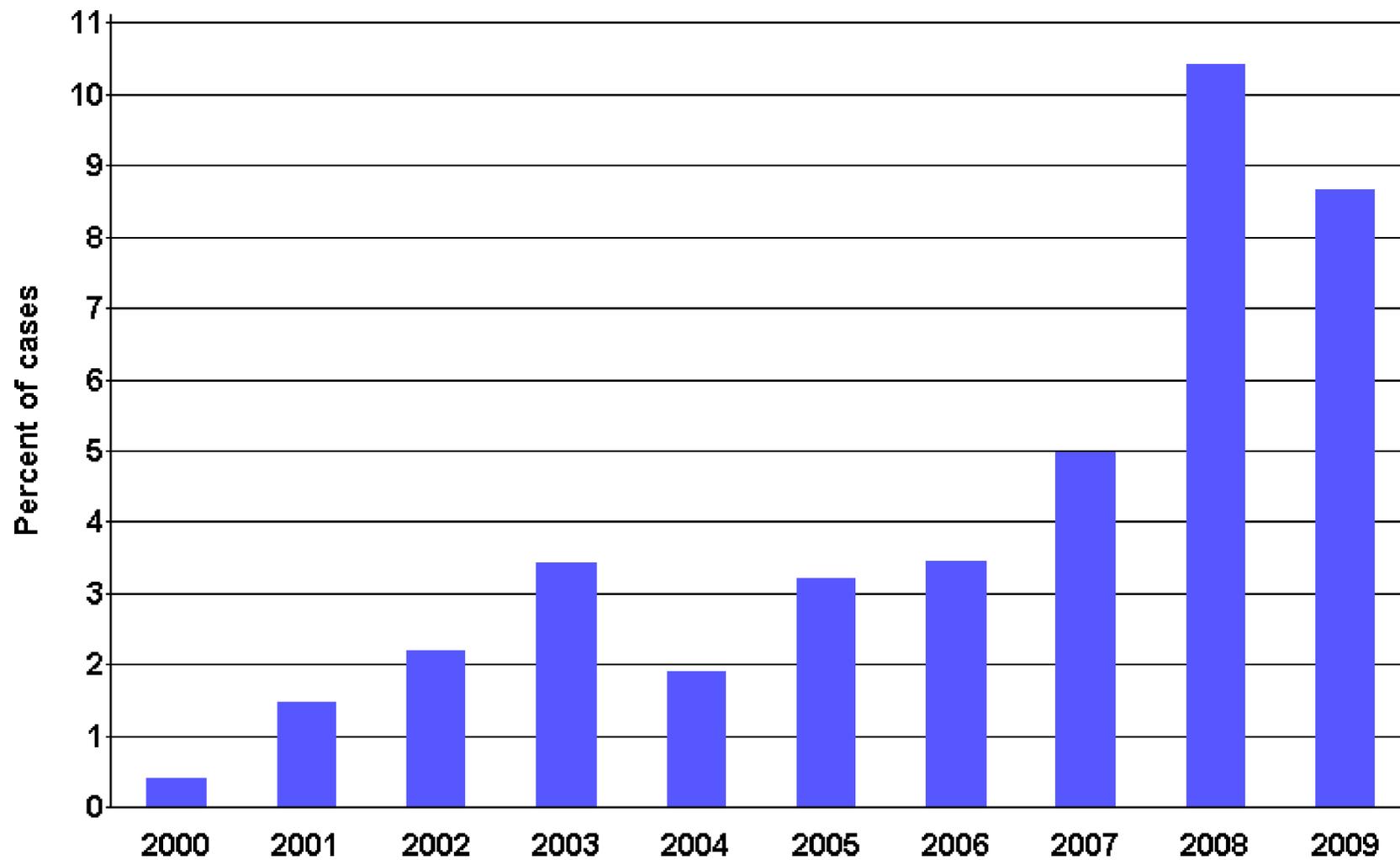
Cleveland, Ohio (N=235)

Figure B. Race/ethnicity of GISP participants, 2009



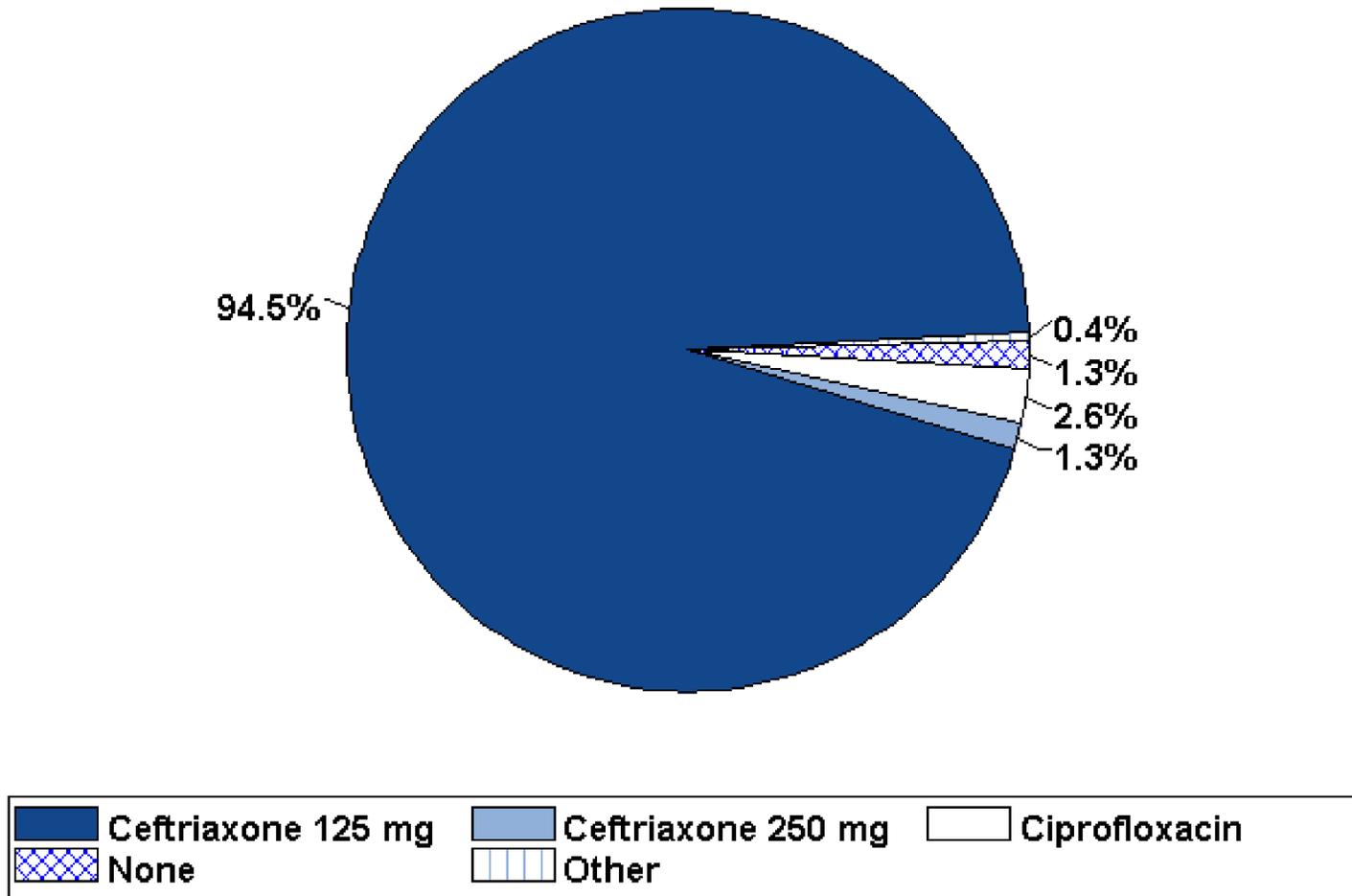
Cleveland, Ohio

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



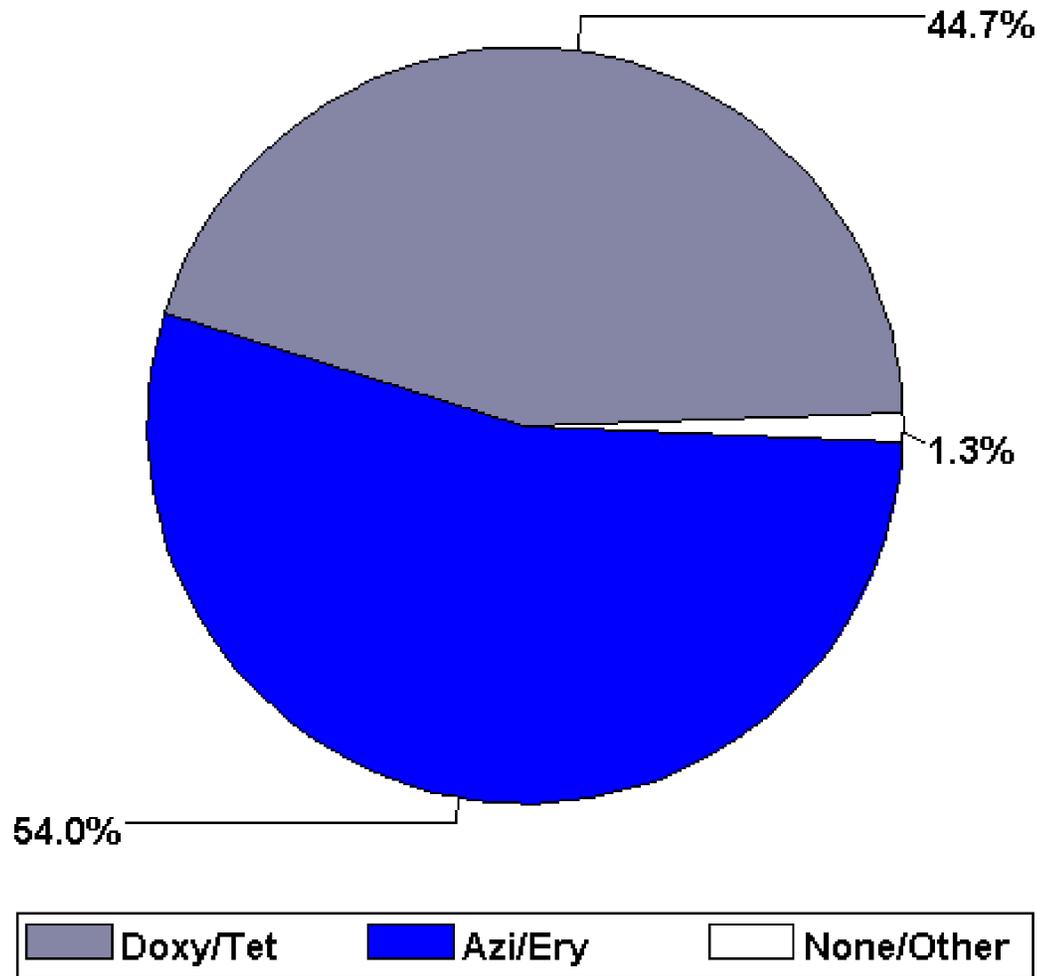
Cleveland, Ohio (N=235)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



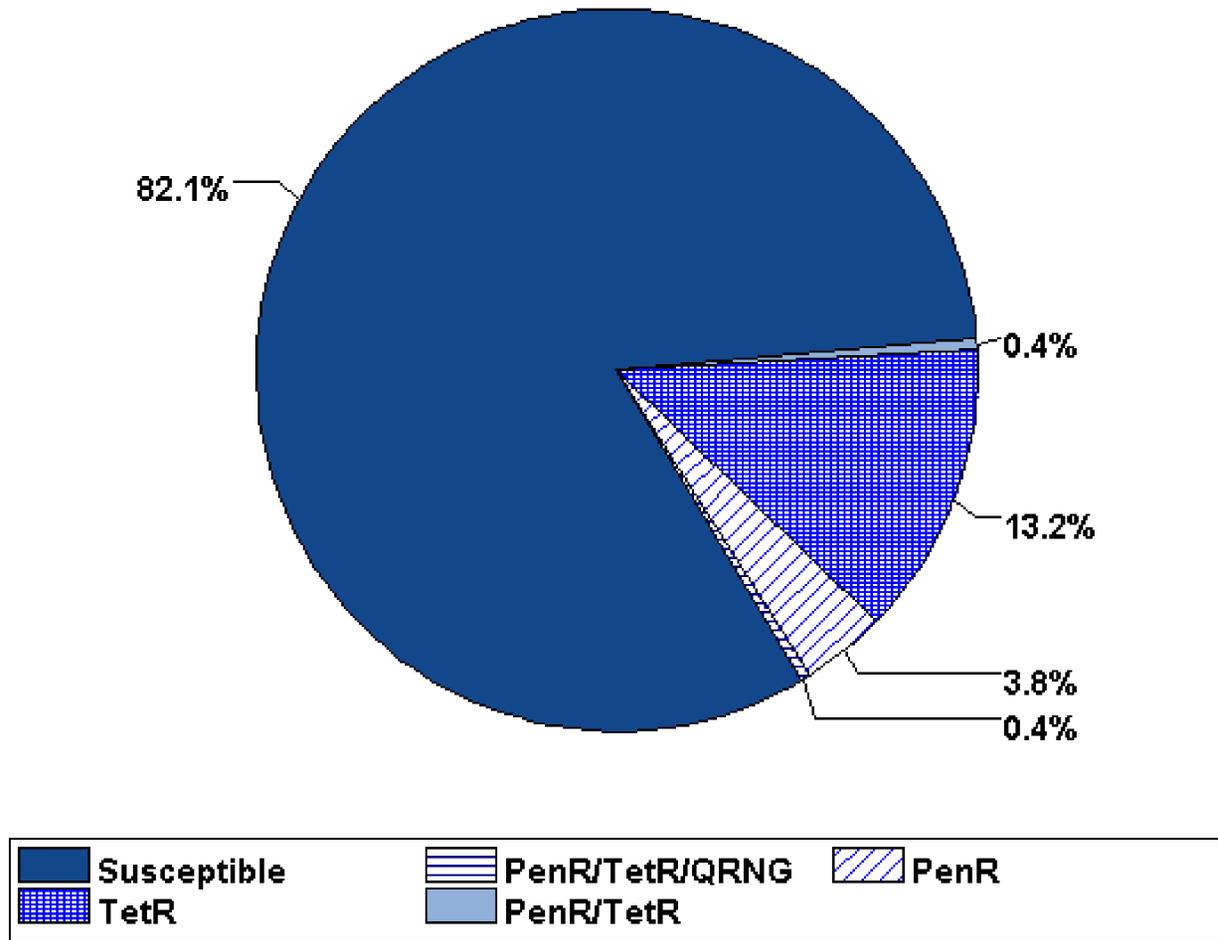
Cleveland, Ohio (N=235)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



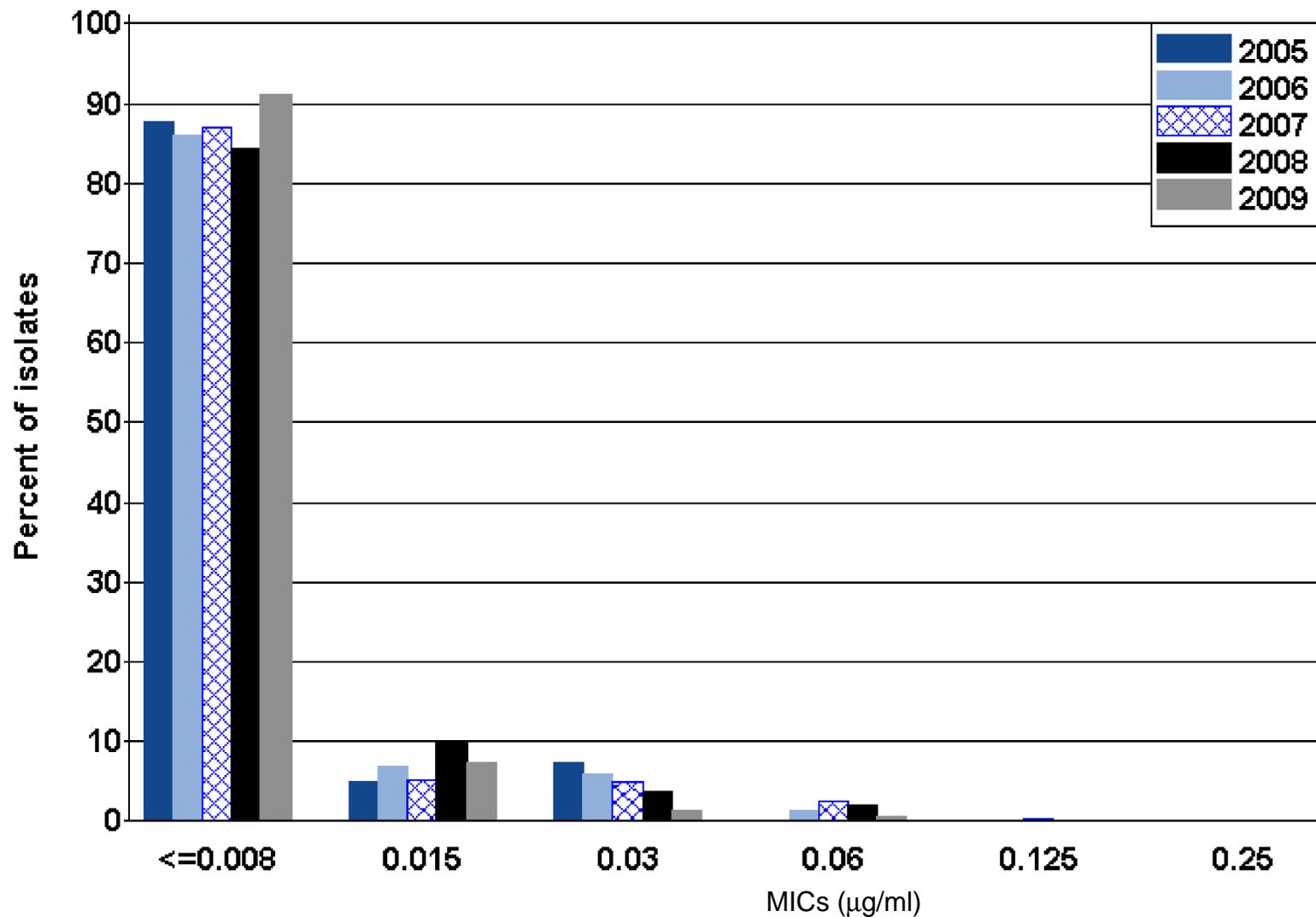
Cleveland, Ohio (N=235)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



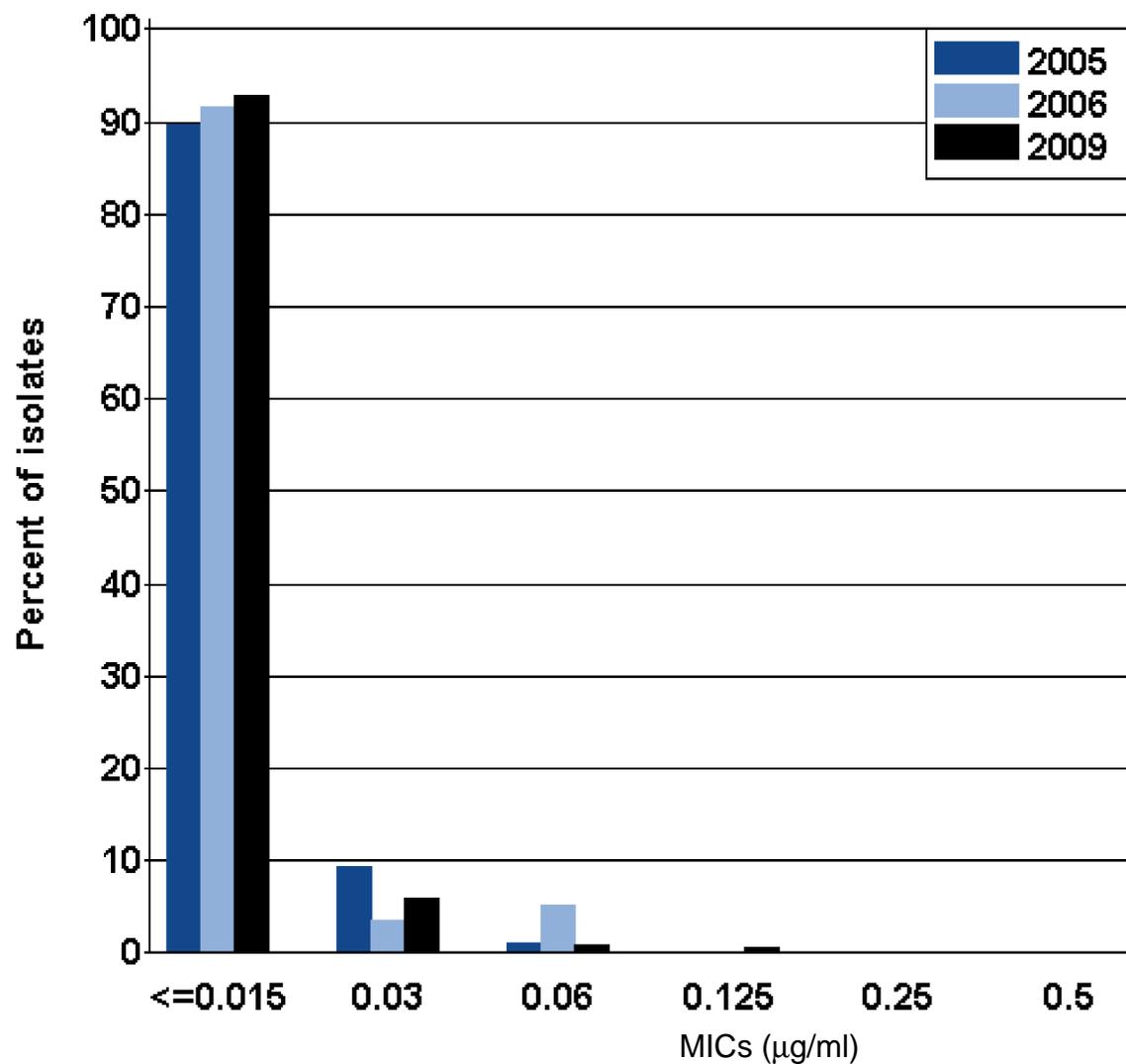
Cleveland, Ohio

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Cleveland, Ohio

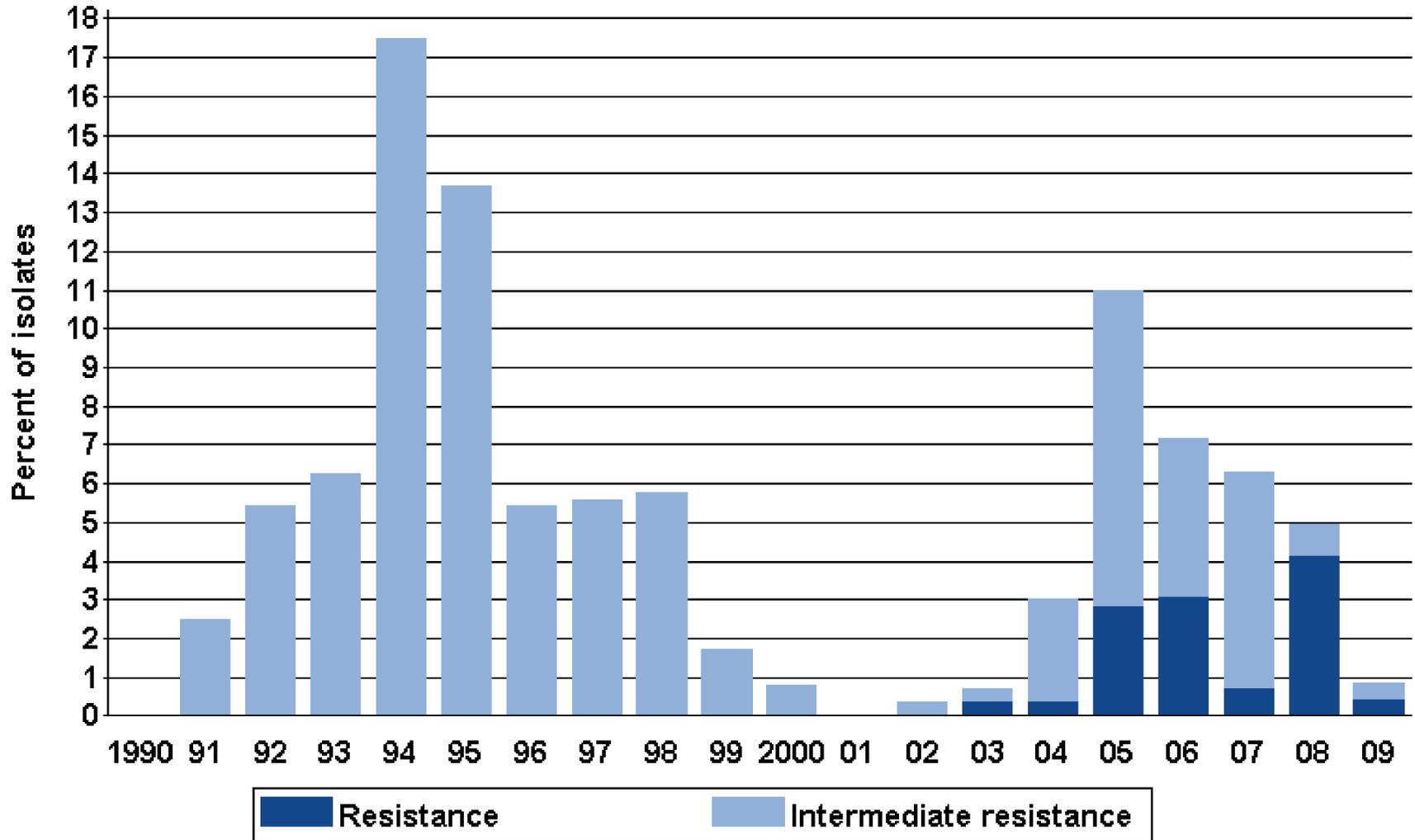
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Cleveland, Ohio

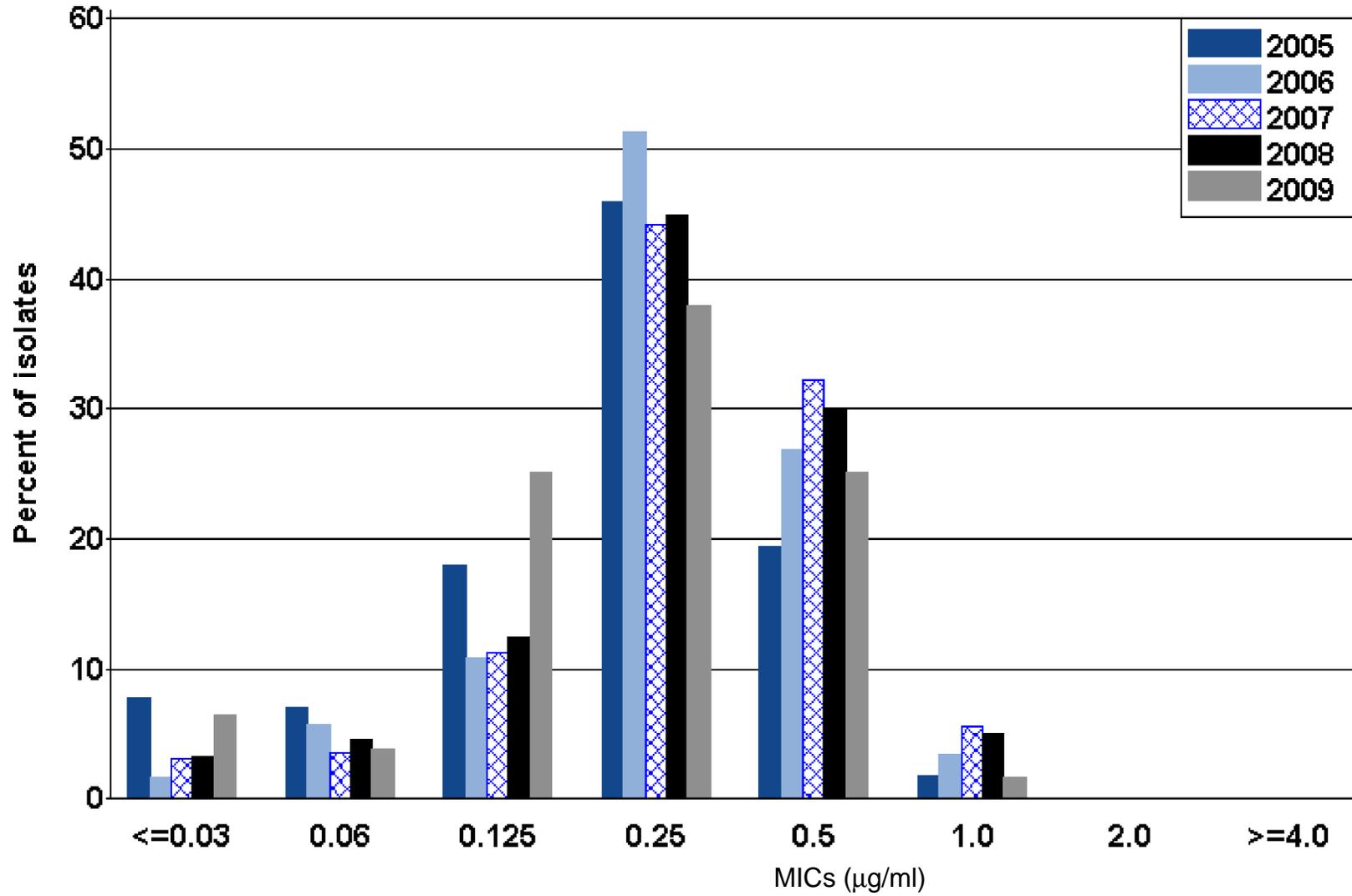
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

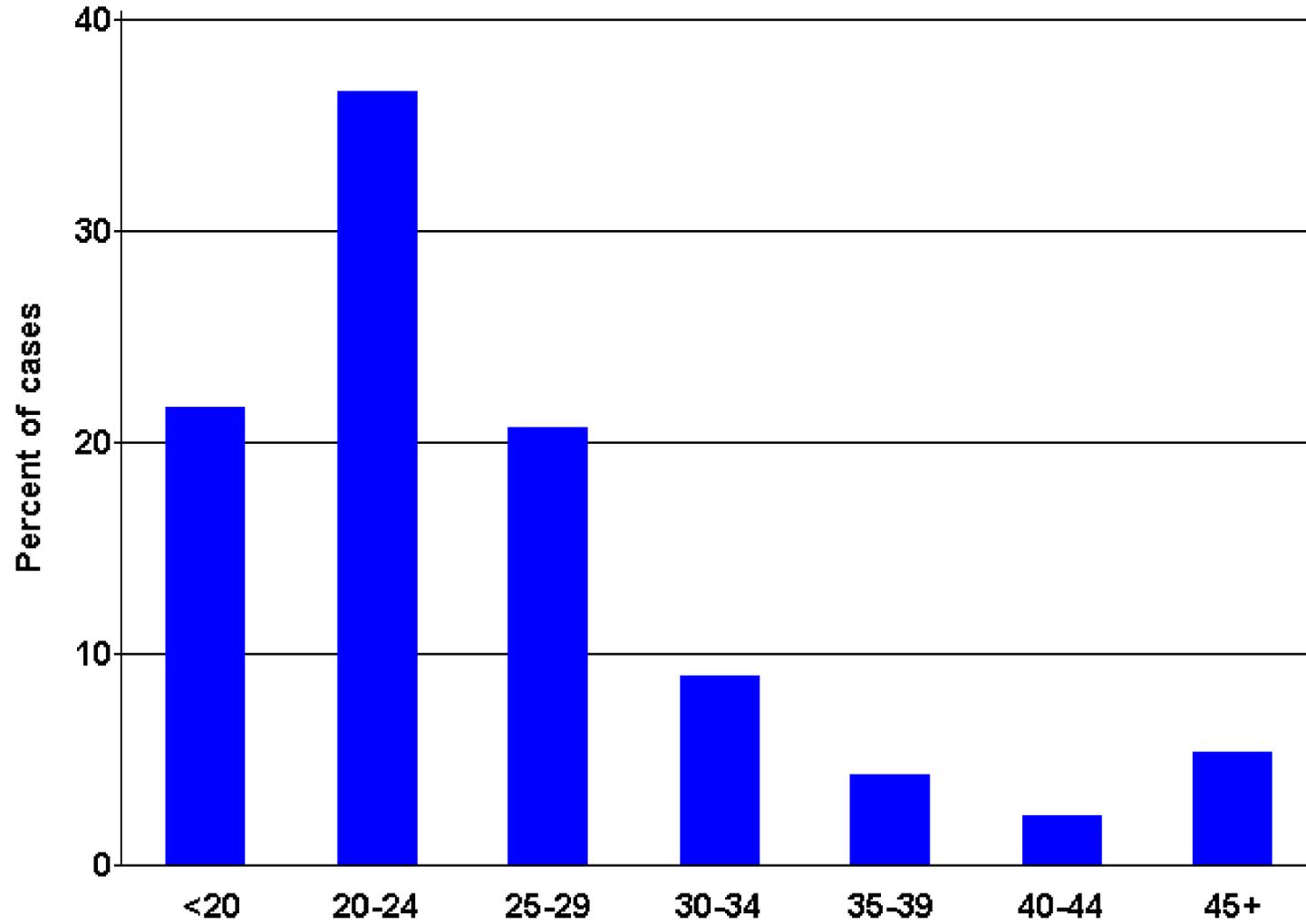
Cleveland, Ohio

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



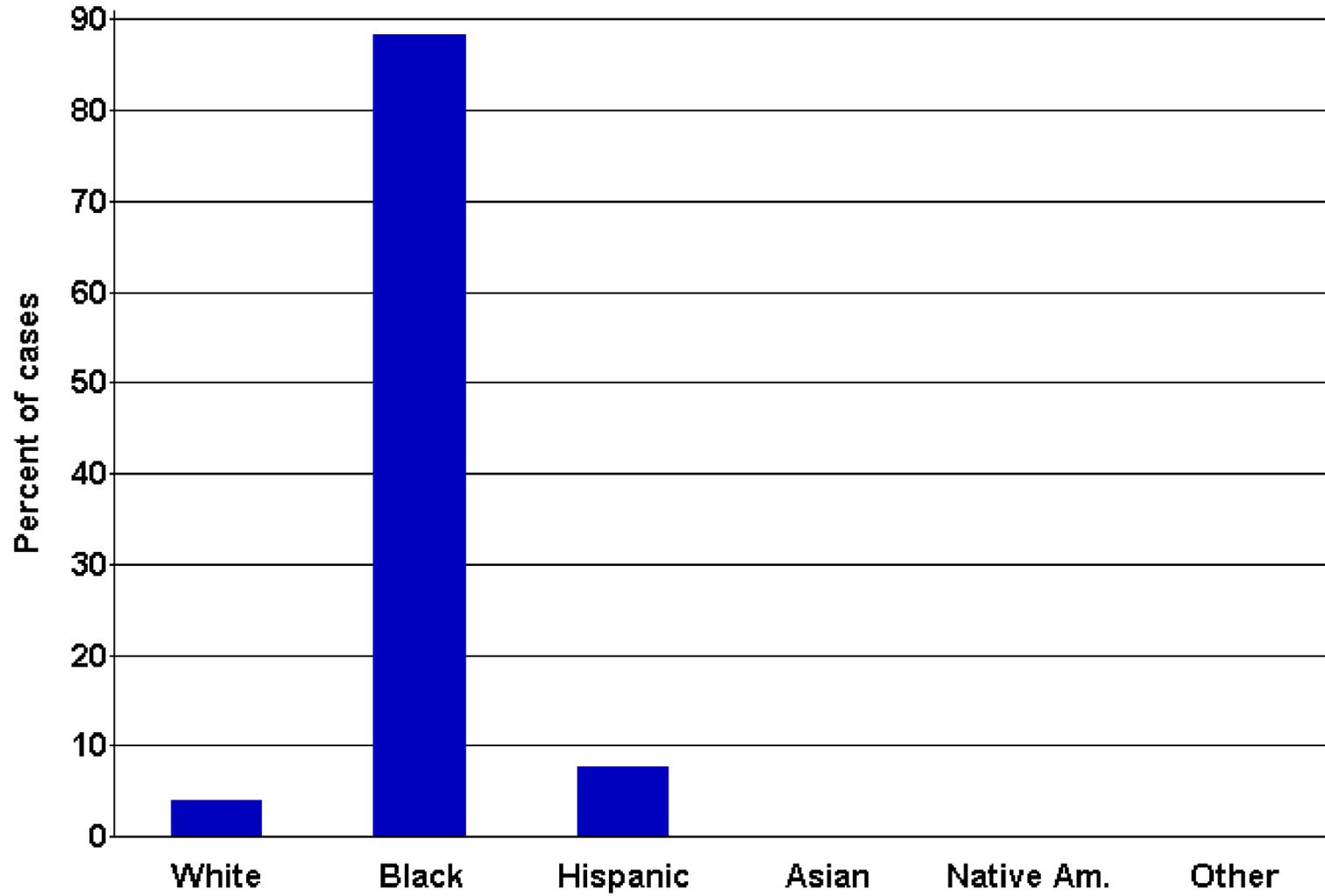
Dallas, Texas (N=300)

Figure A. Age of GISP participants, in years, 2009



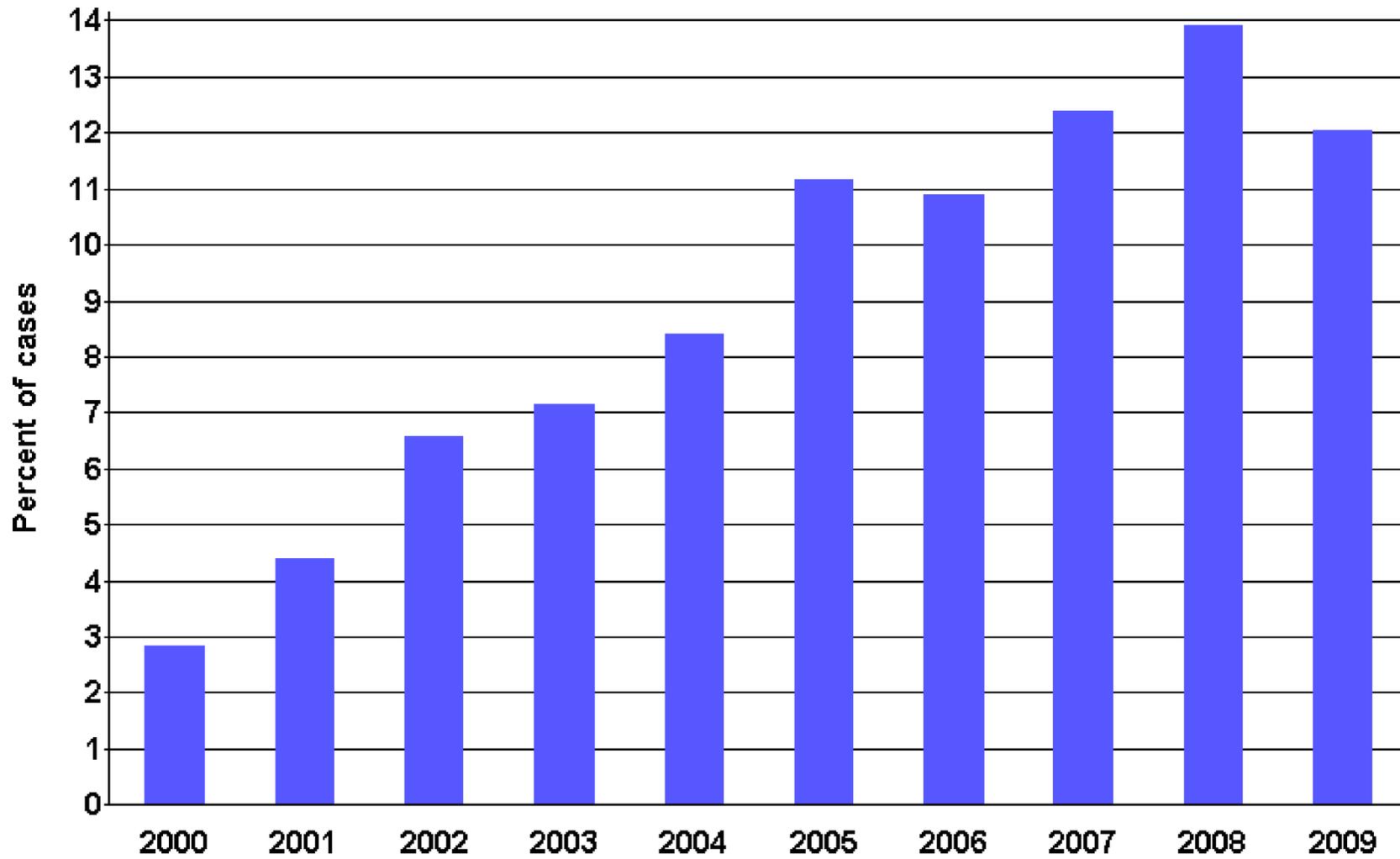
Dallas, Texas (N=300)

Figure B. Race/ethnicity of GISP participants, 2009



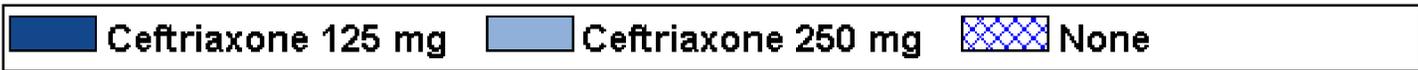
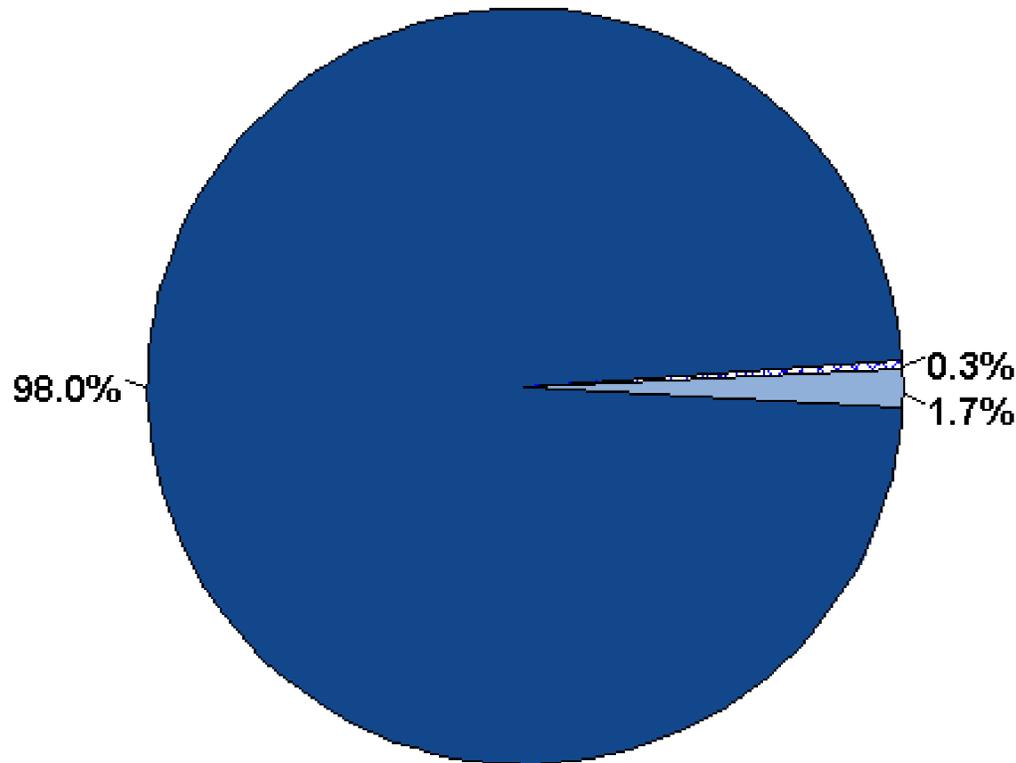
Dallas, Texas

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



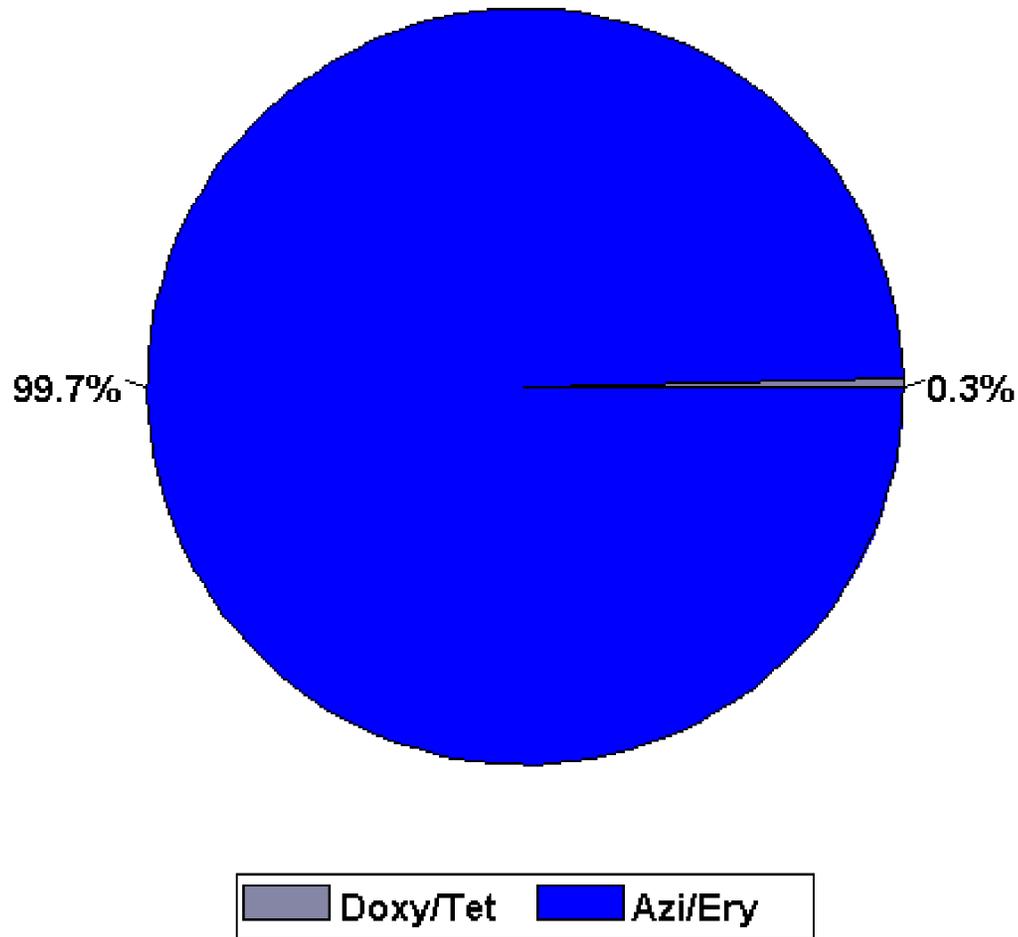
Dallas, Texas (N=300)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



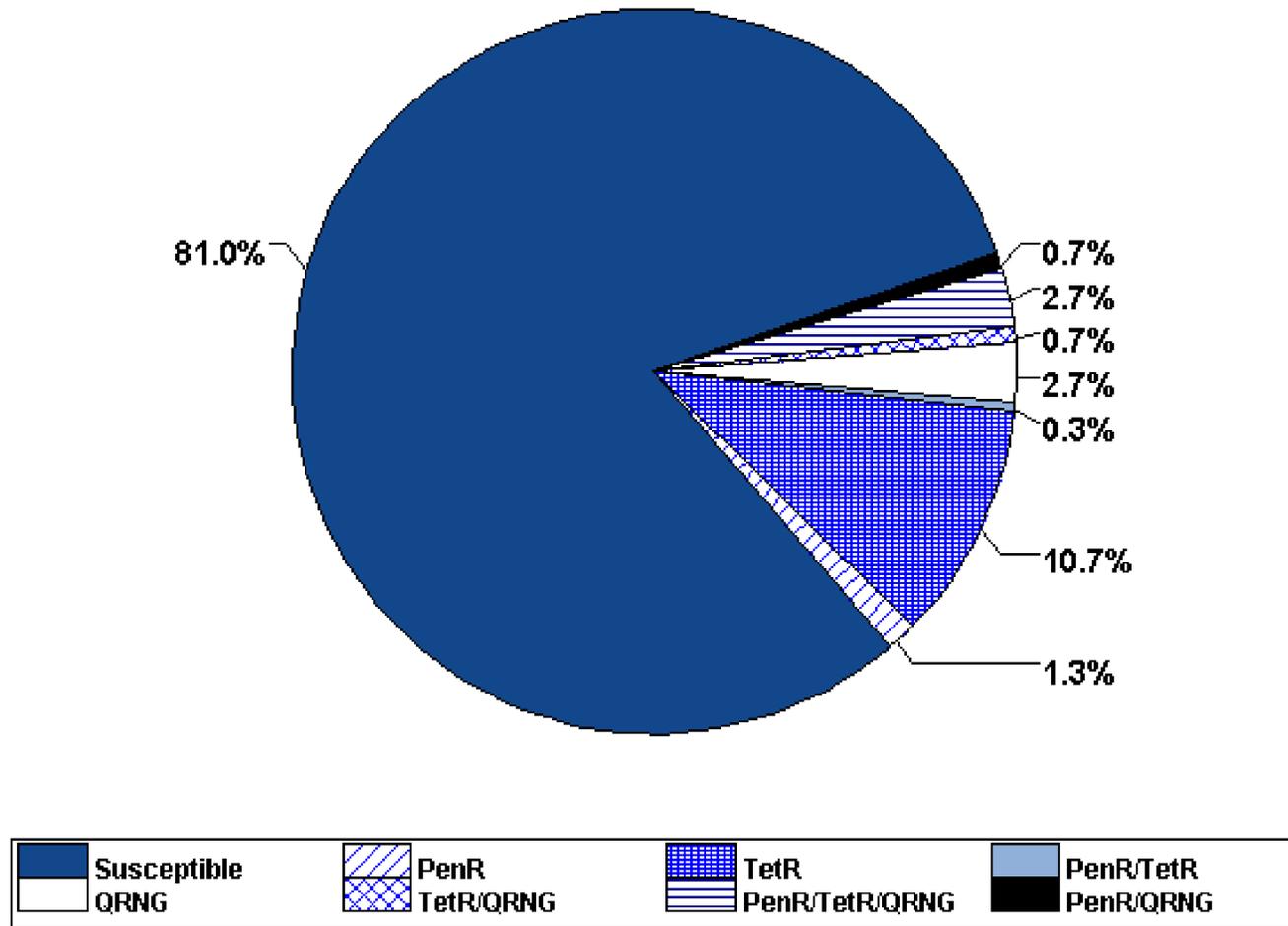
Dallas, Texas (N=300)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



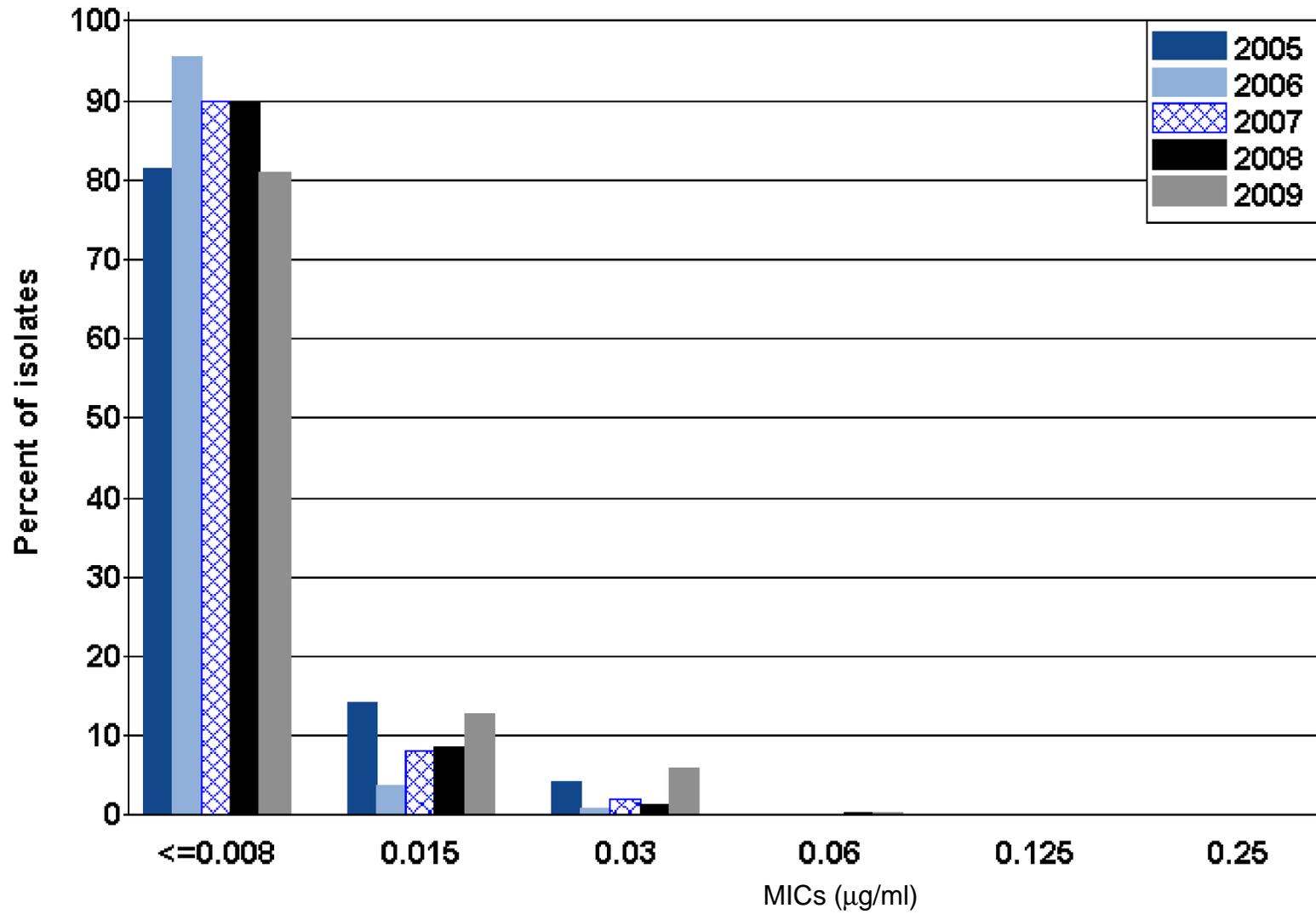
Dallas, Texas (N=300)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



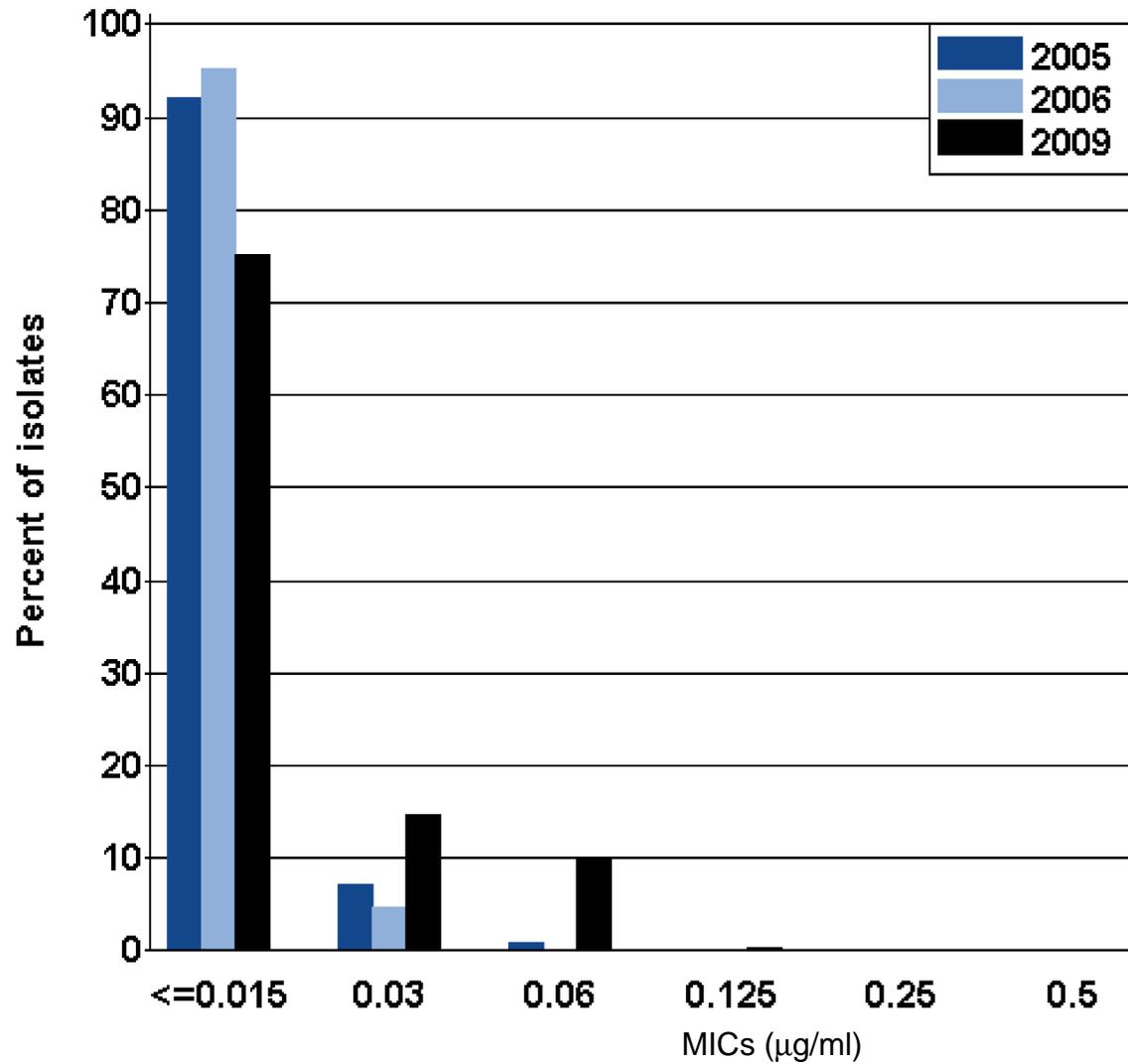
Dallas, Texas

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Dallas, Texas

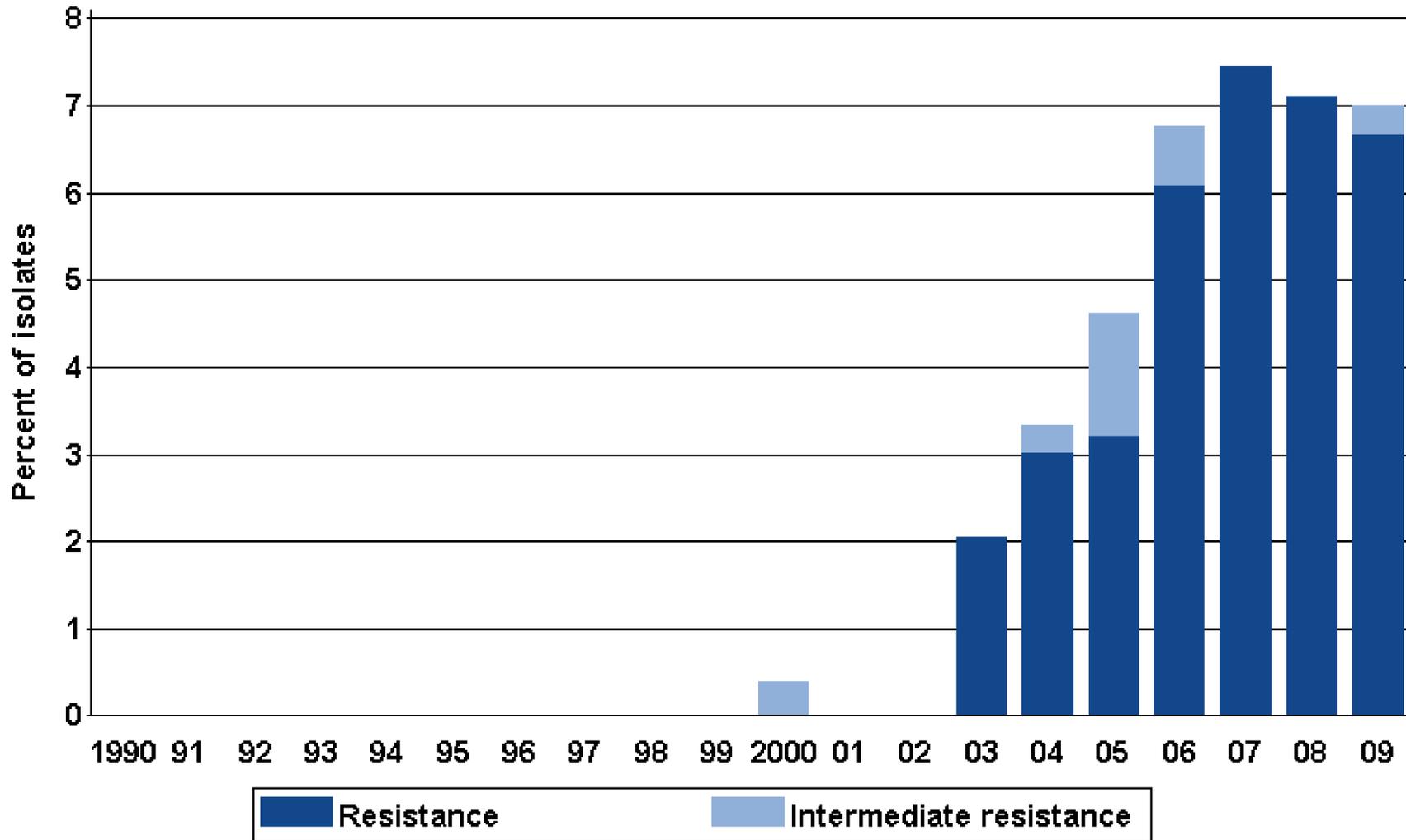
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Dallas, Texas

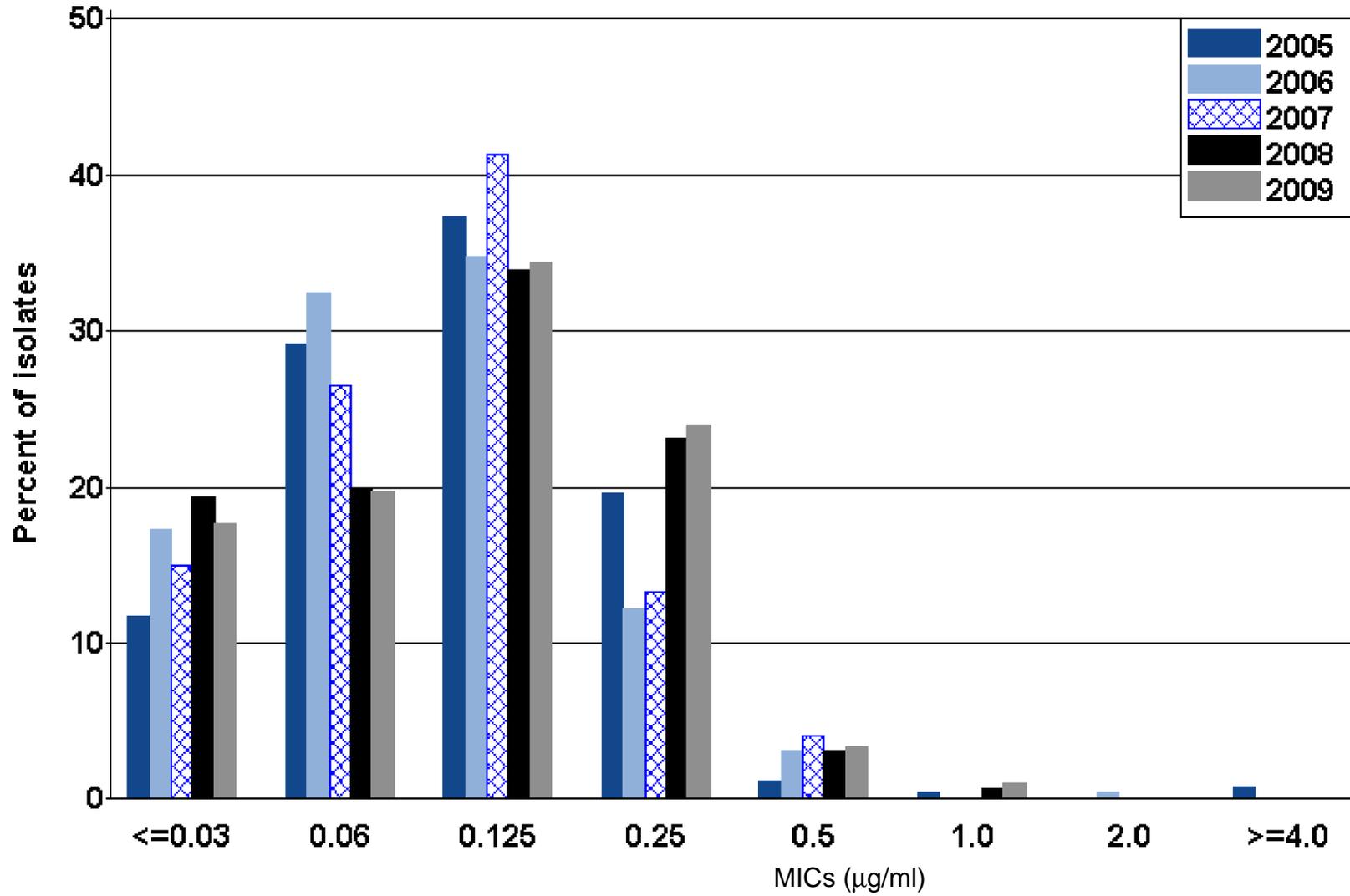
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

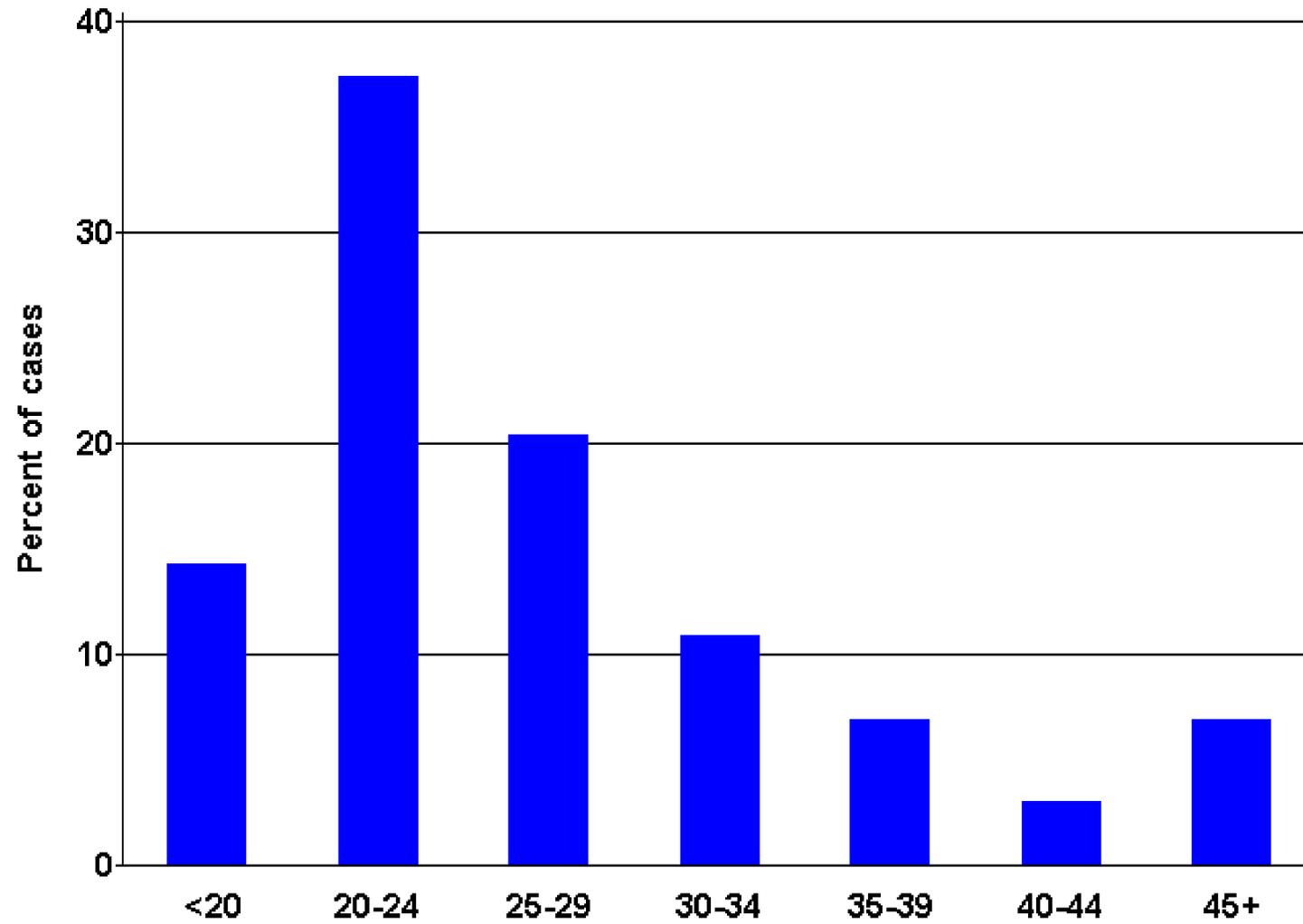
Dallas, Texas

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



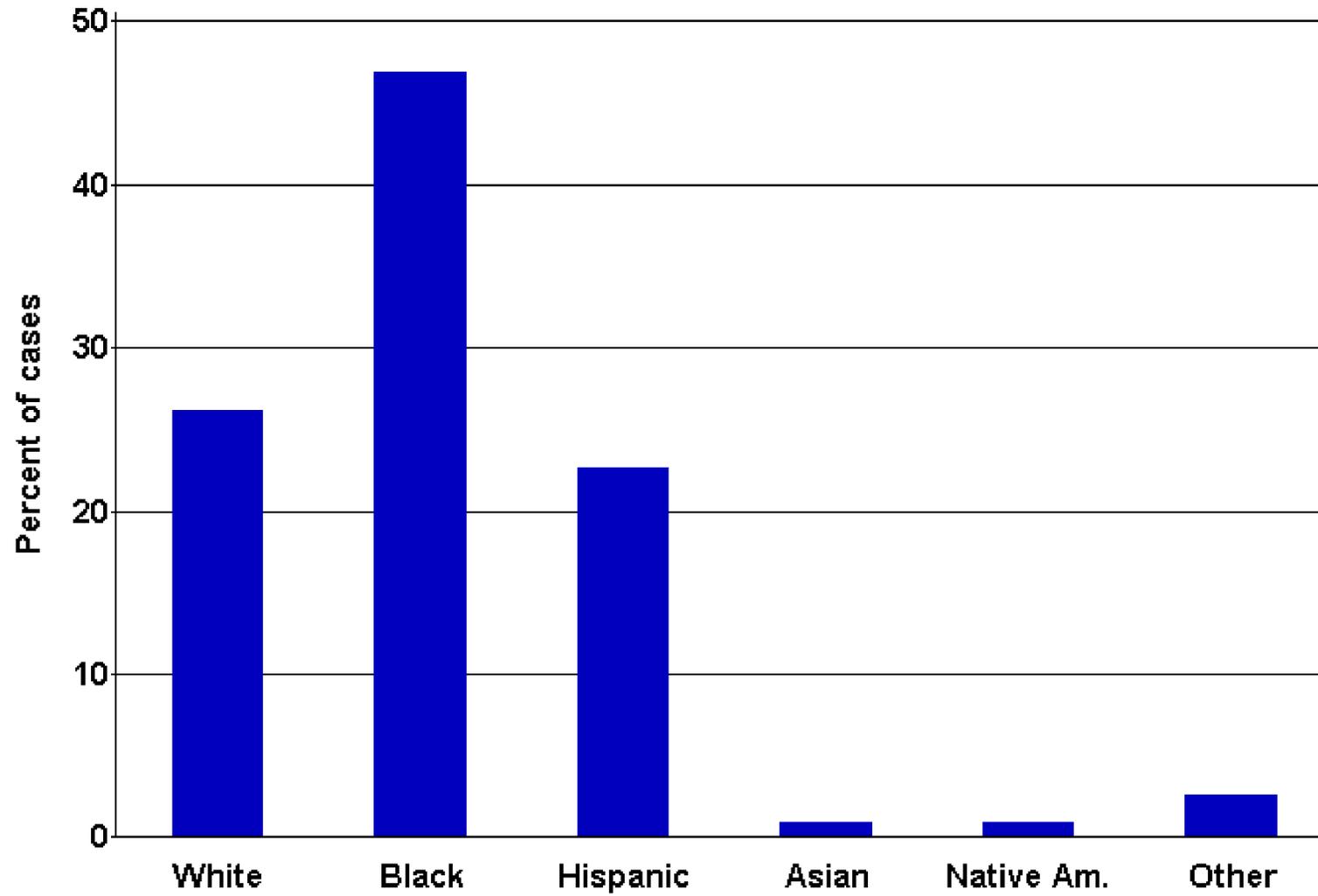
Denver, Colorado (N=230)

Figure A. Age of GISP participants, in years, 2009



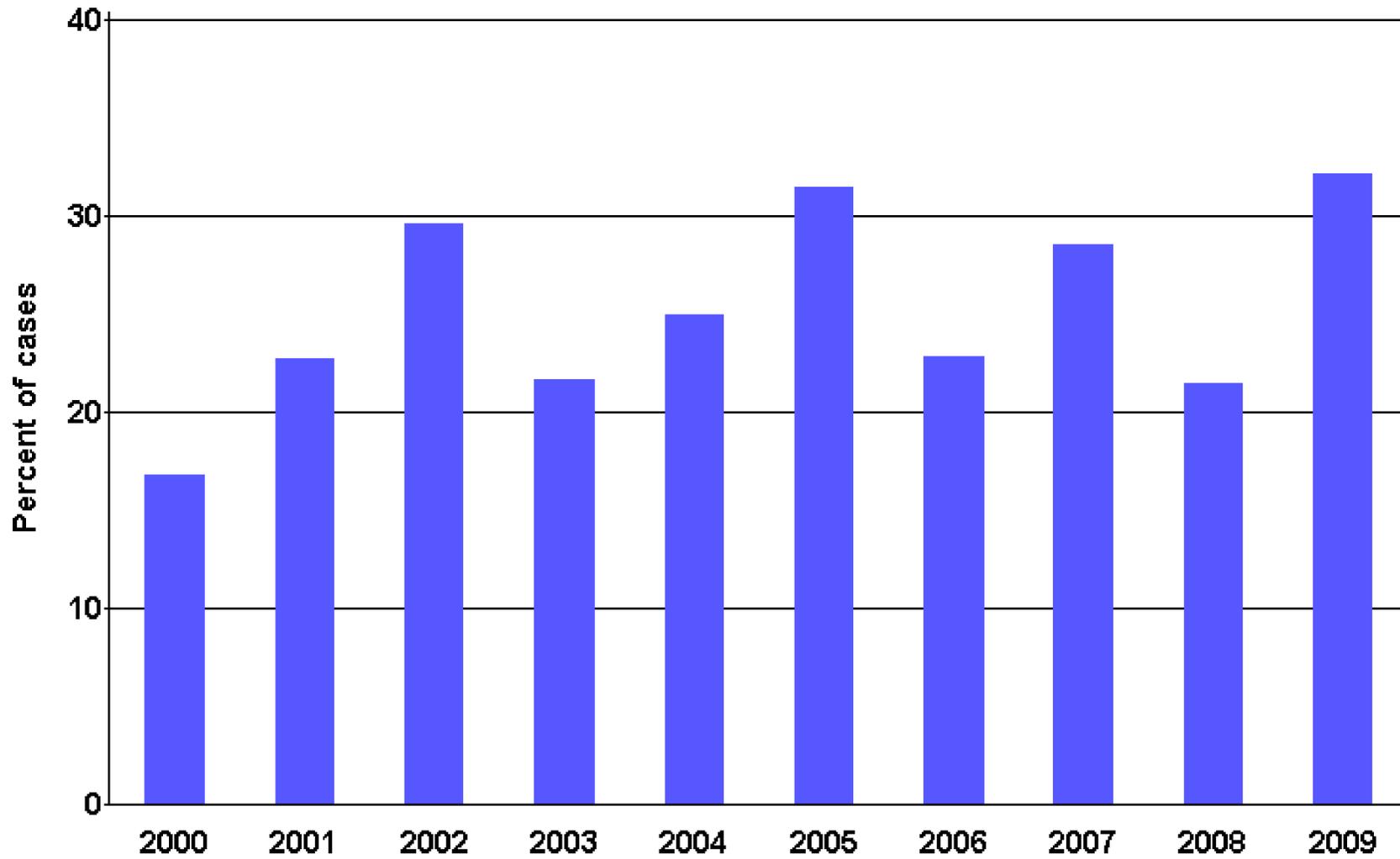
Denver, Colorado (N=230)

Figure B. Race/ethnicity of GISP participants, 2009



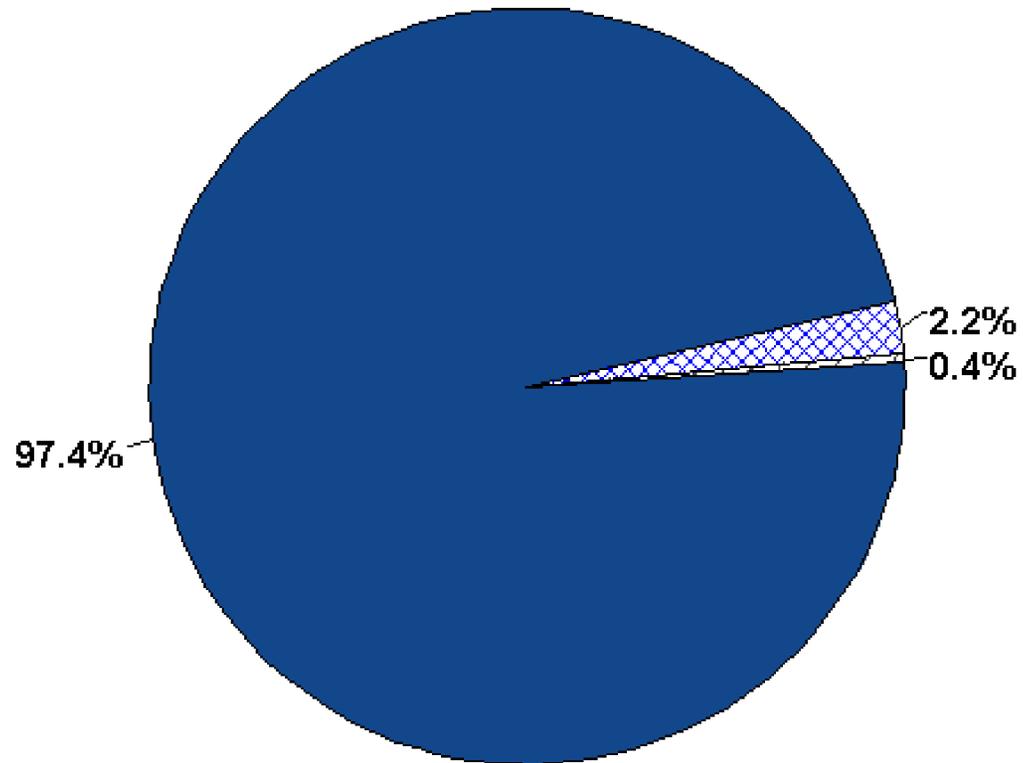
Denver, Colorado

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



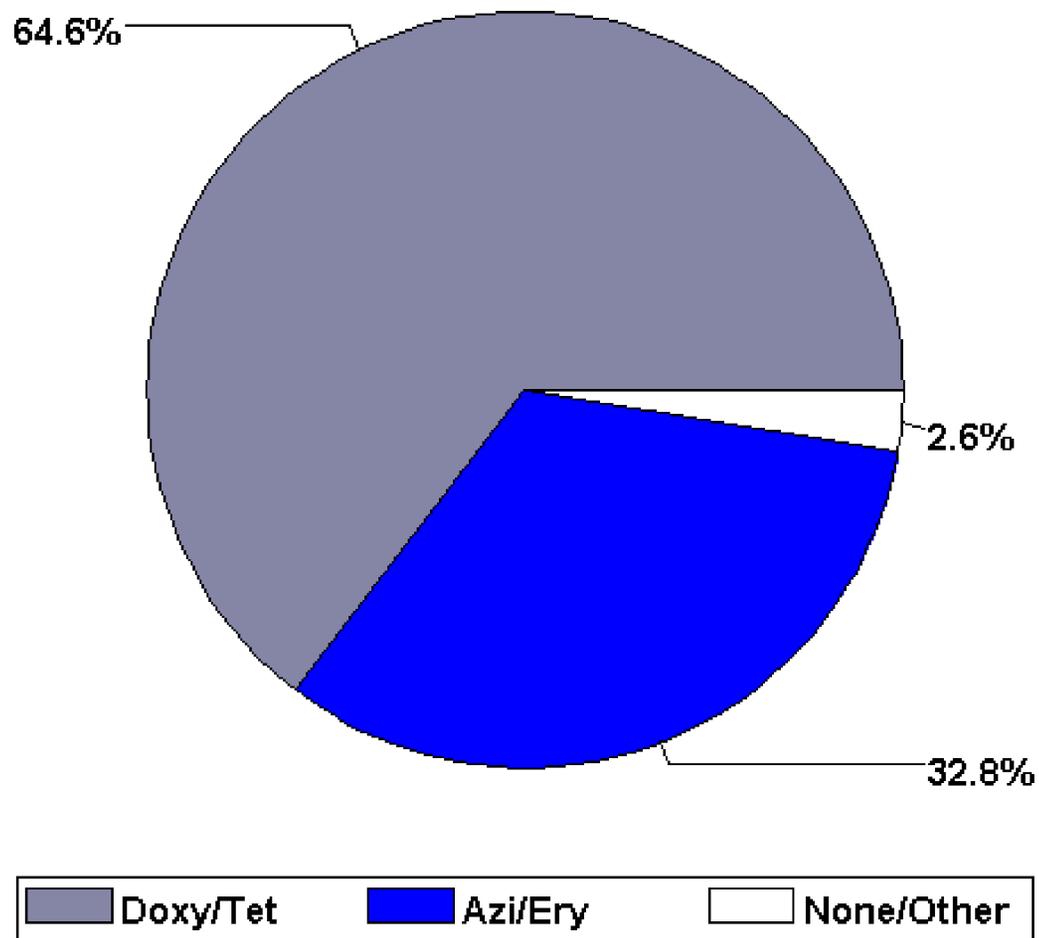
Denver, Colorado (N=230)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



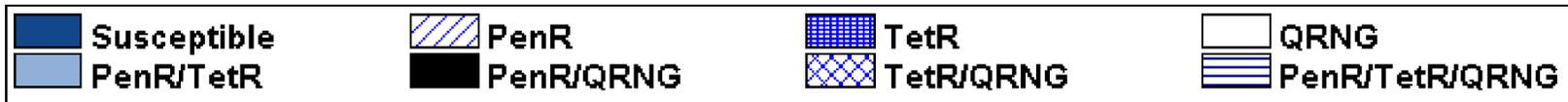
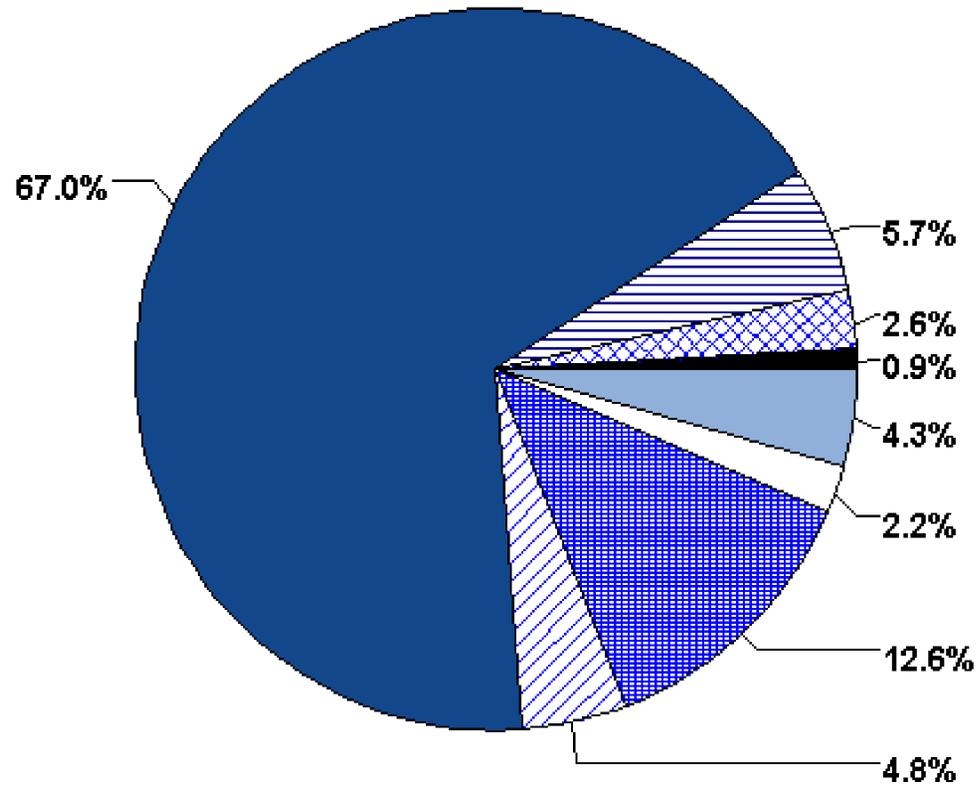
Denver, Colorado (N=230)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



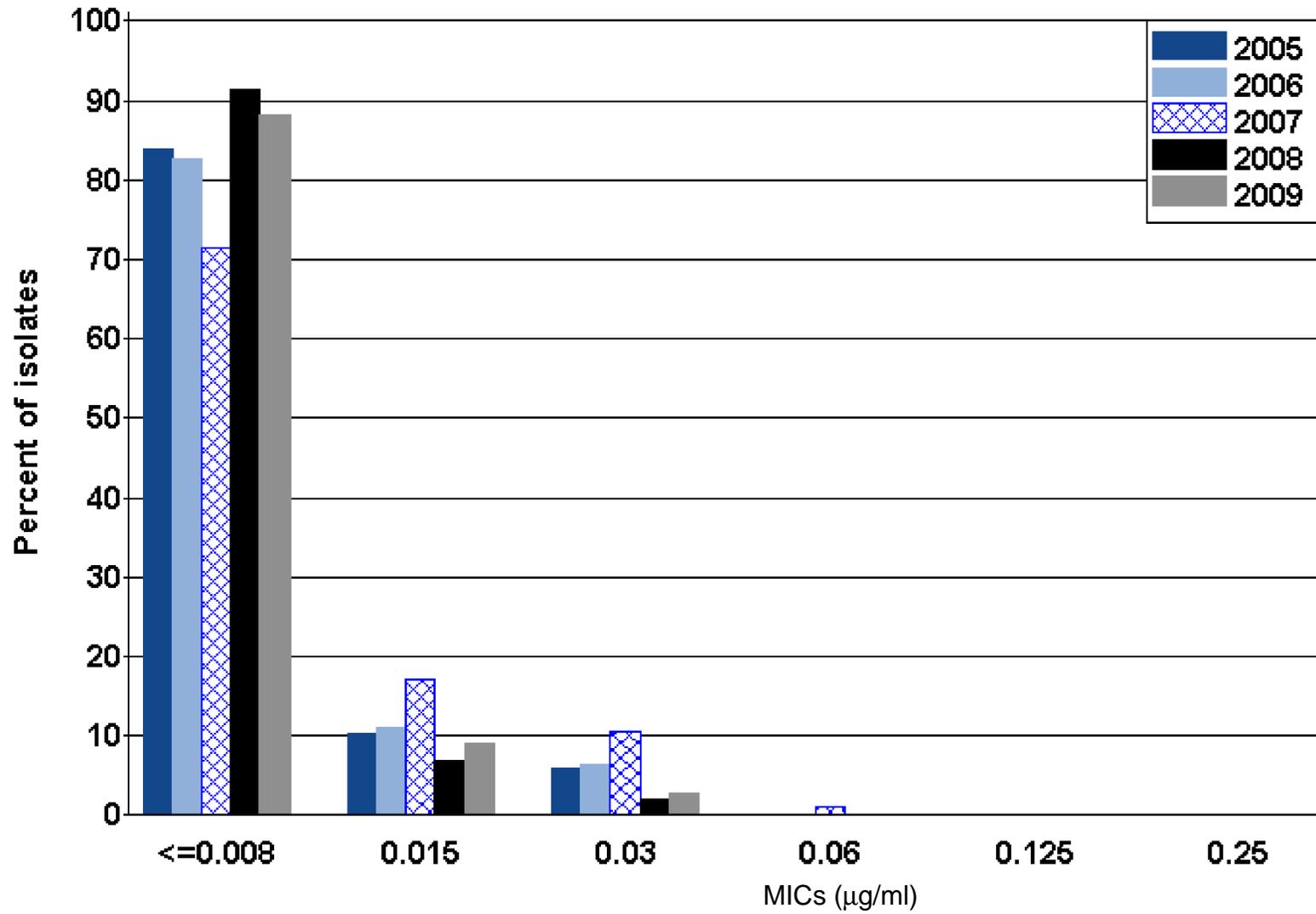
Denver, Colorado (N=230)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



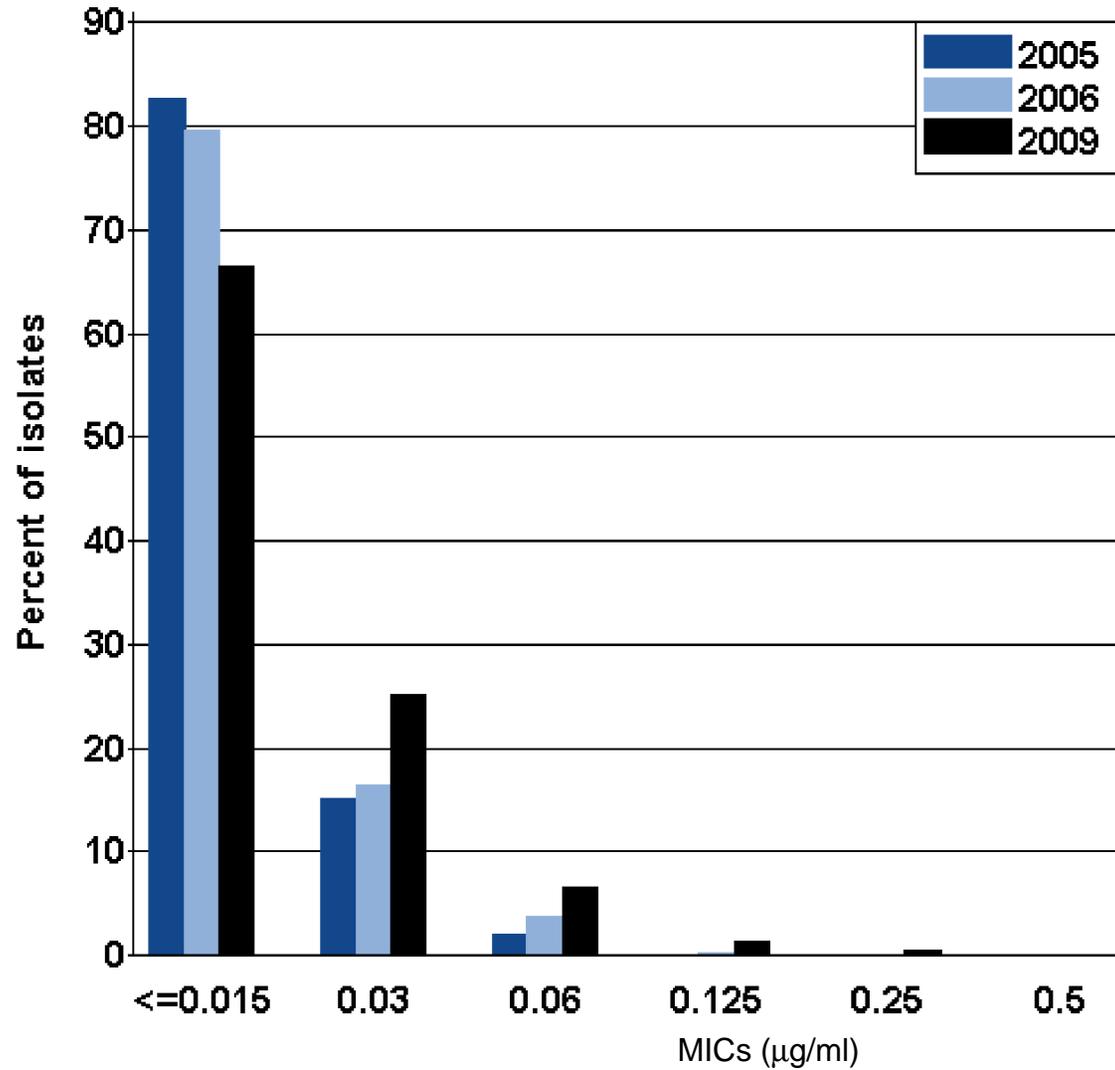
Denver, Colorado

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Denver, Colorado

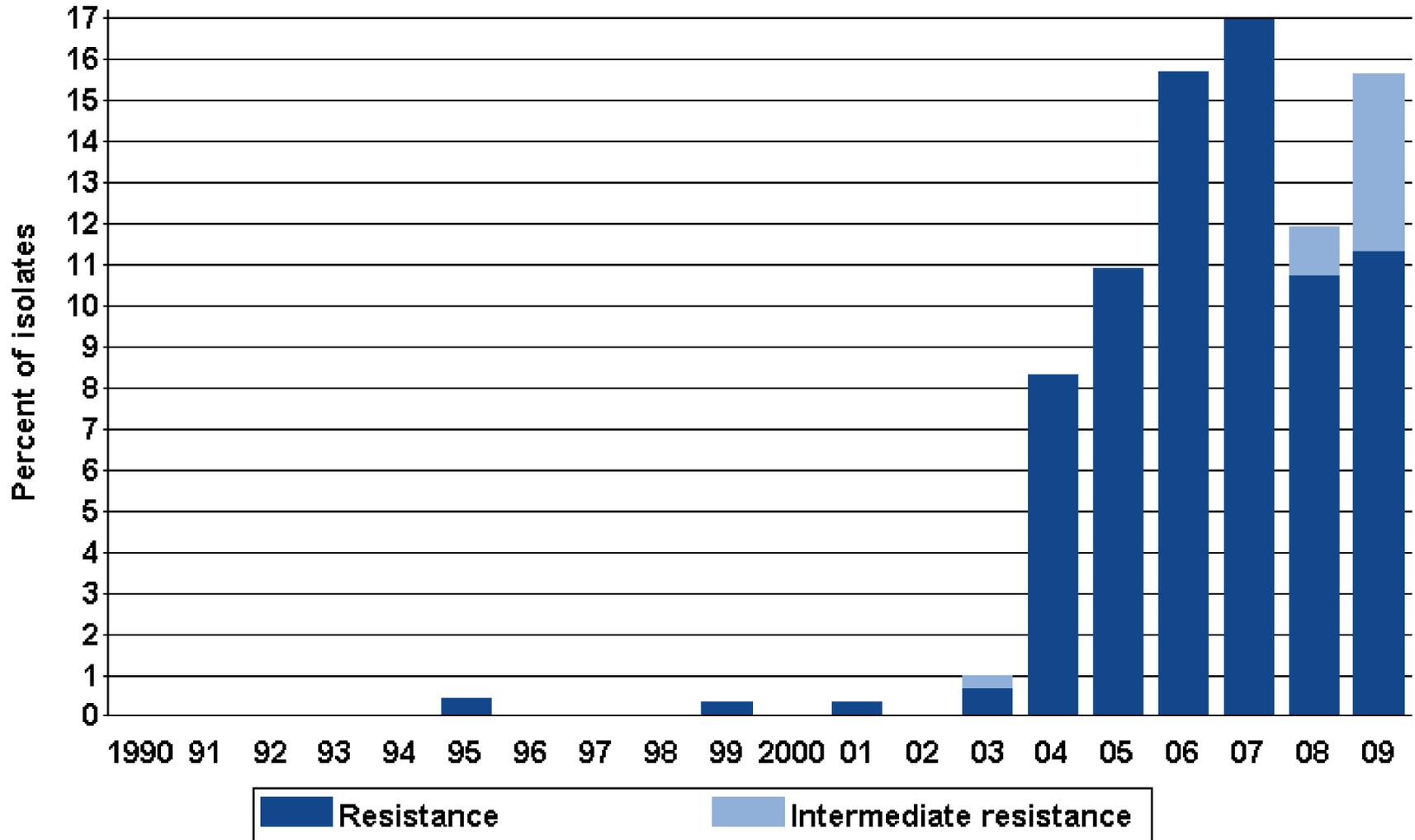
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Denver, Colorado

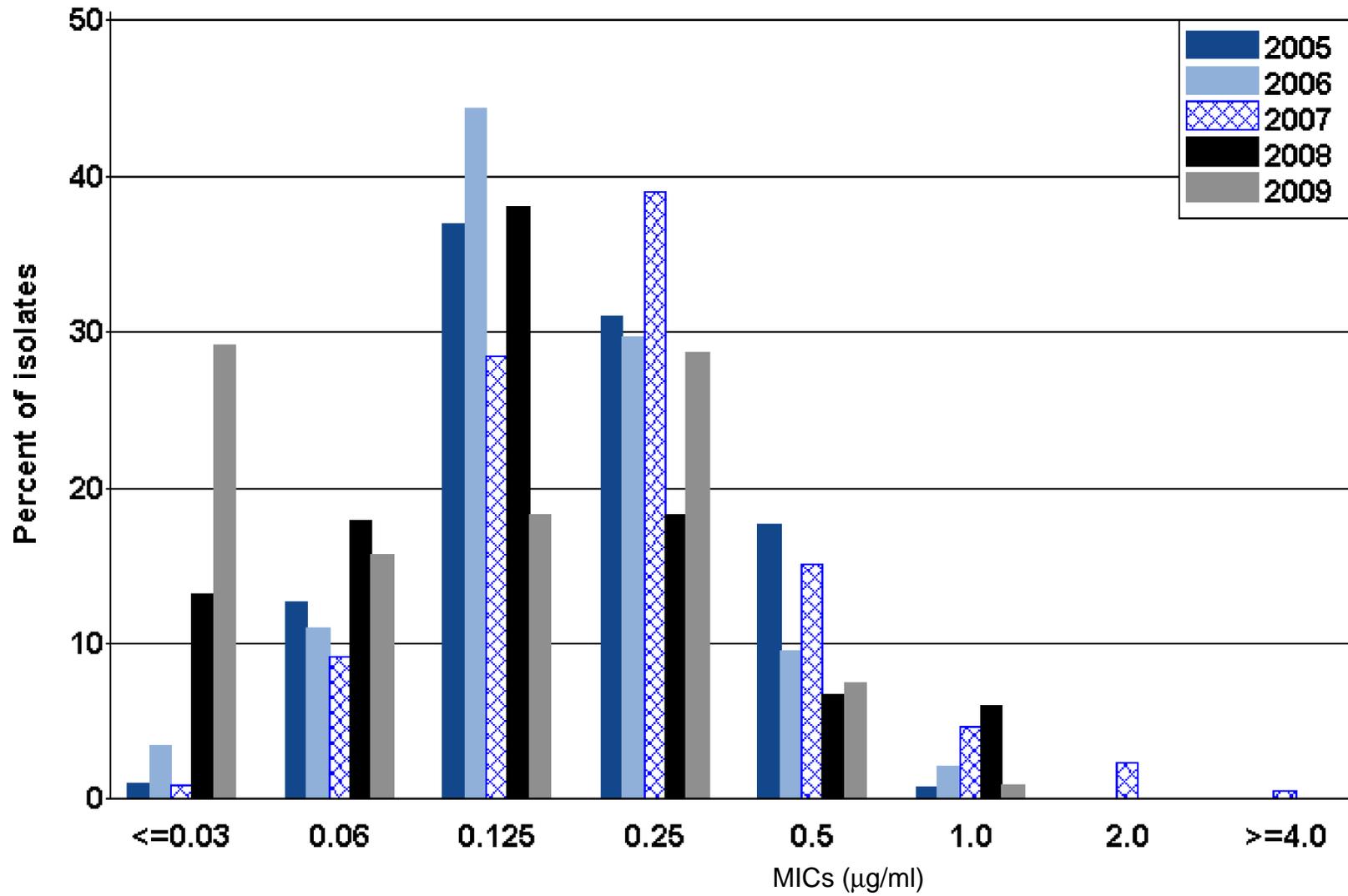
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

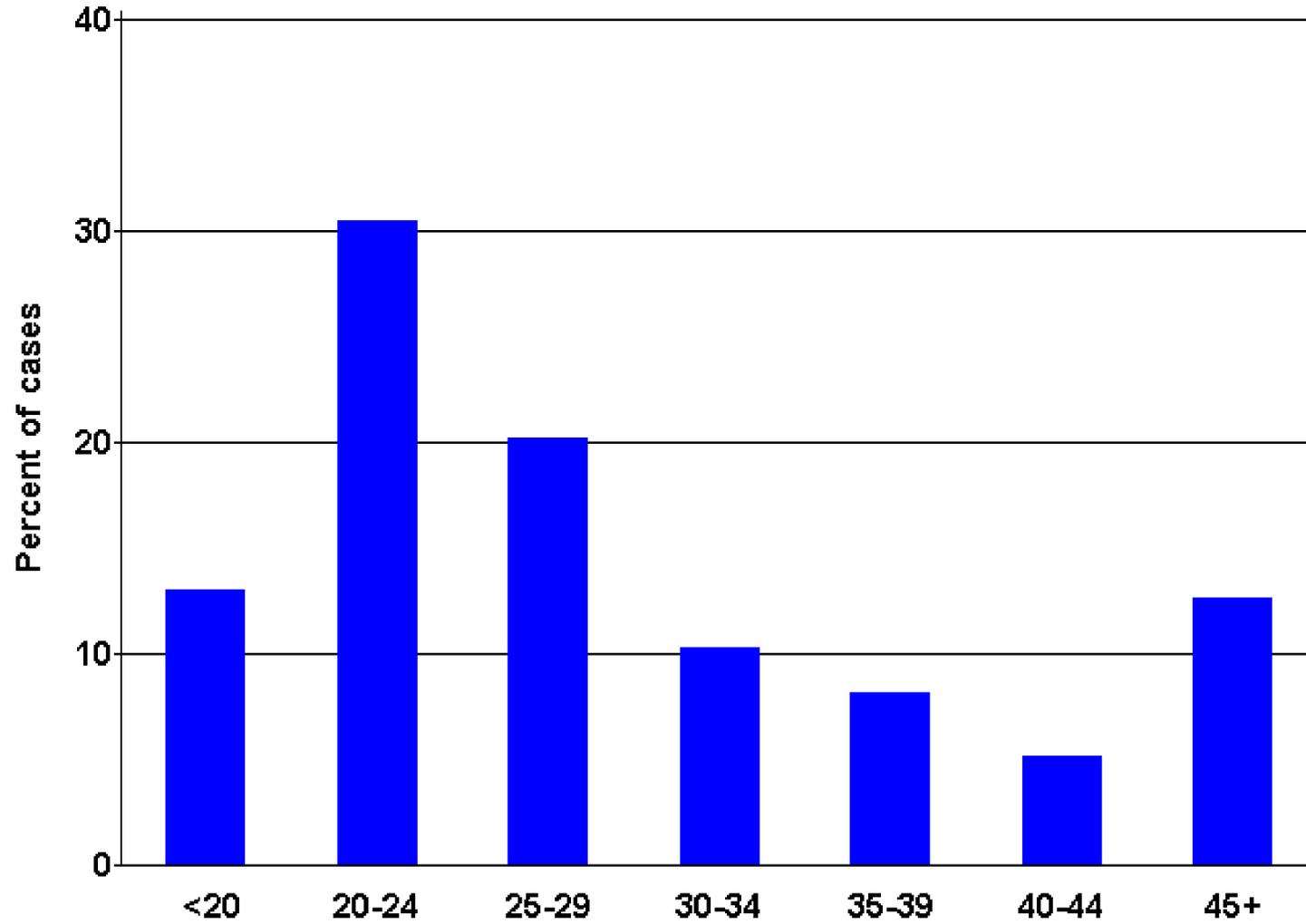
Denver, Colorado

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



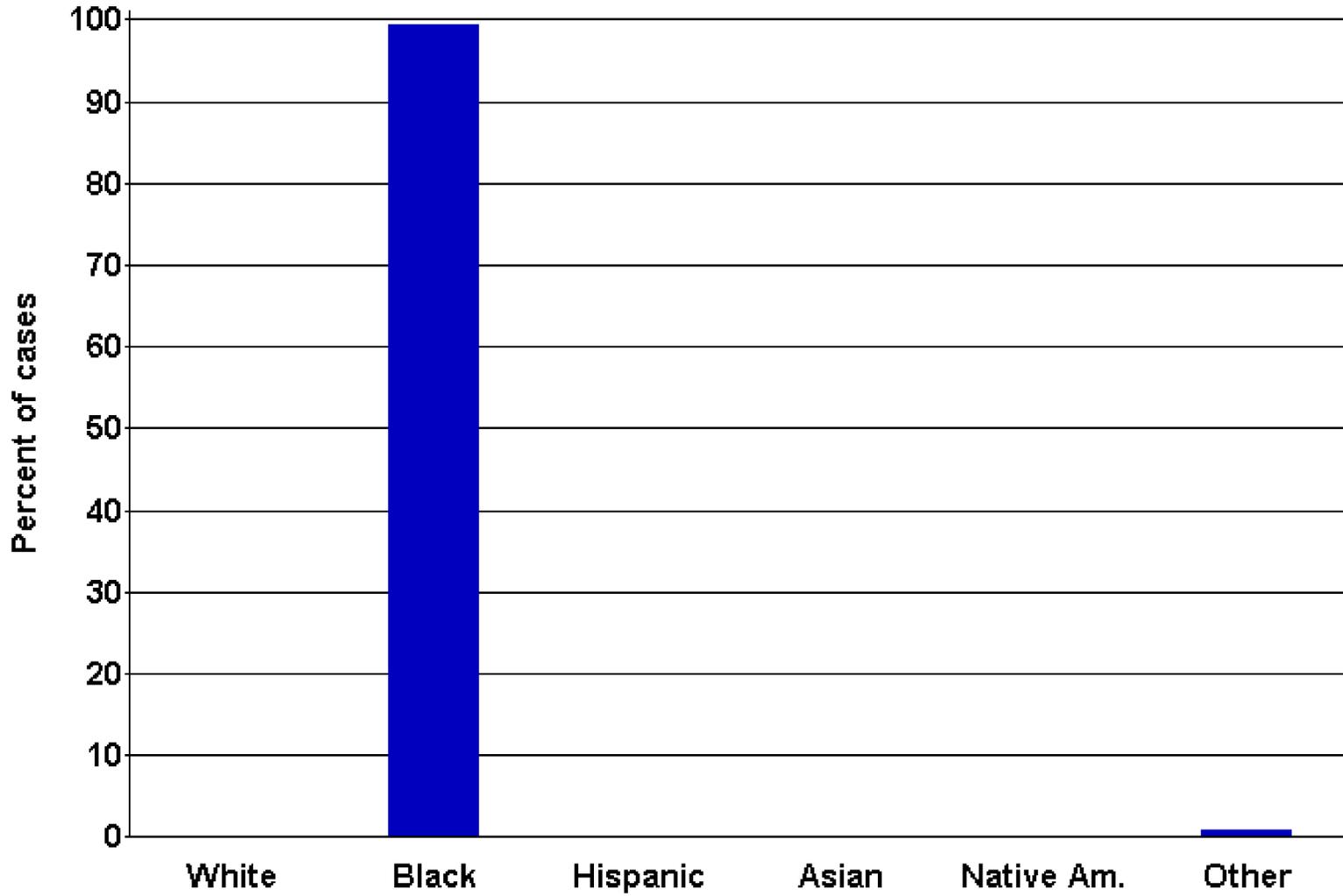
Detroit, Michigan (N=292)

Figure A. Age of GISP participants, in years, 2009



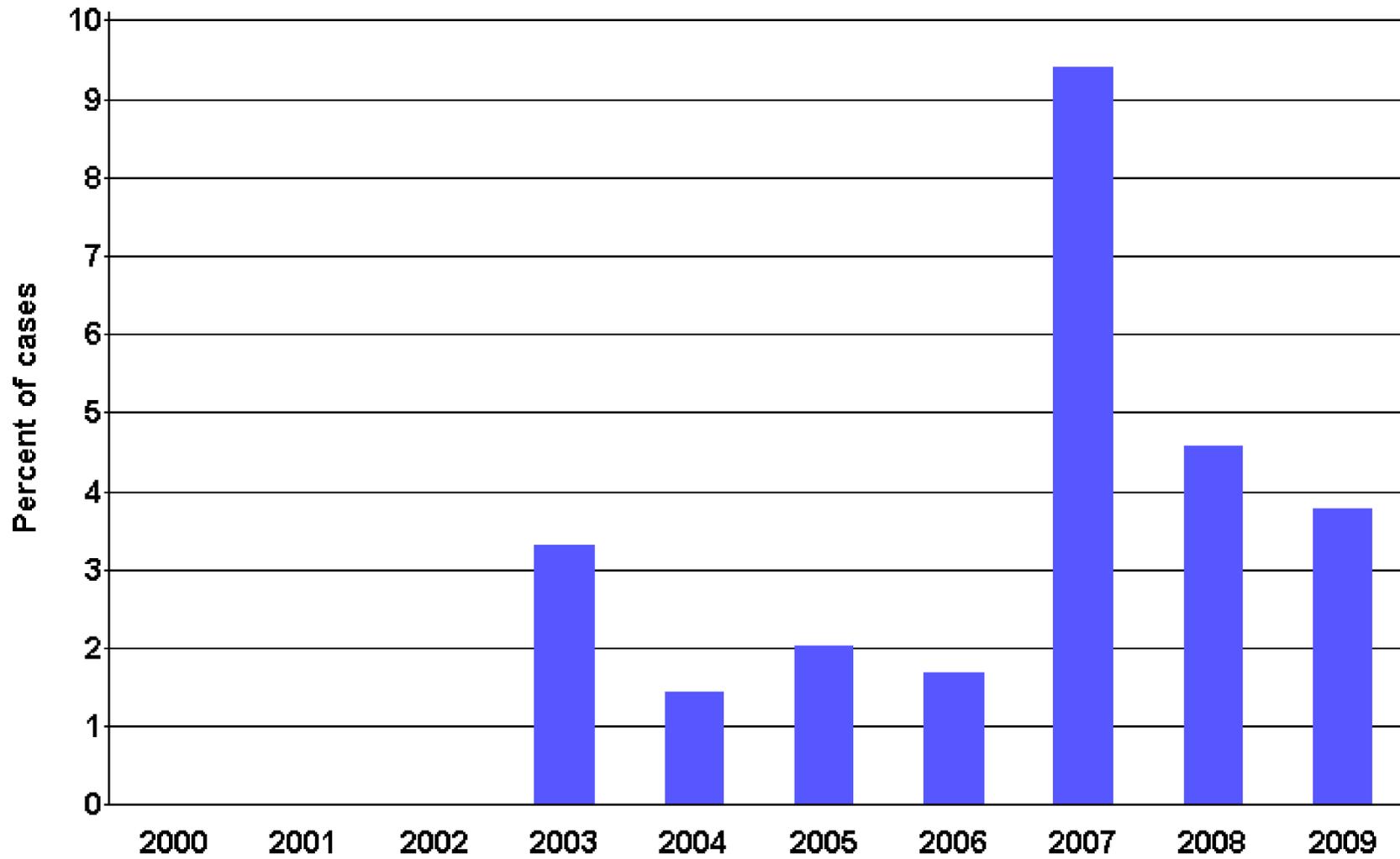
Detroit, Michigan (N=292)

Figure B. Race/ethnicity of GISP participants, 2009



Detroit, Michigan

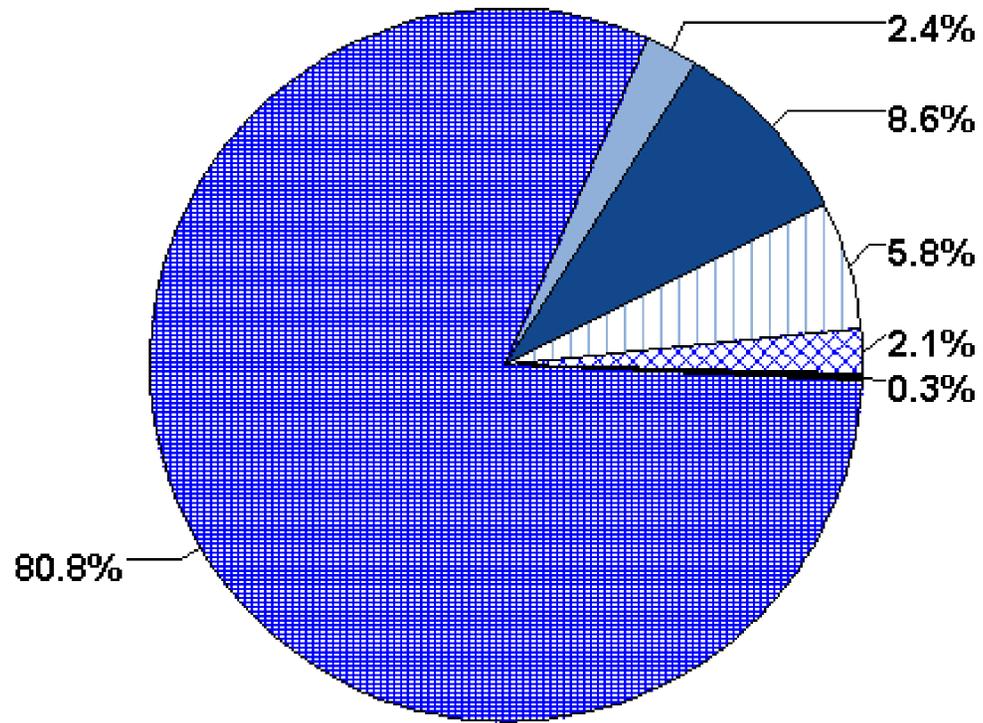
Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009*



*Note: Site participated in GISP from 2003-2009.

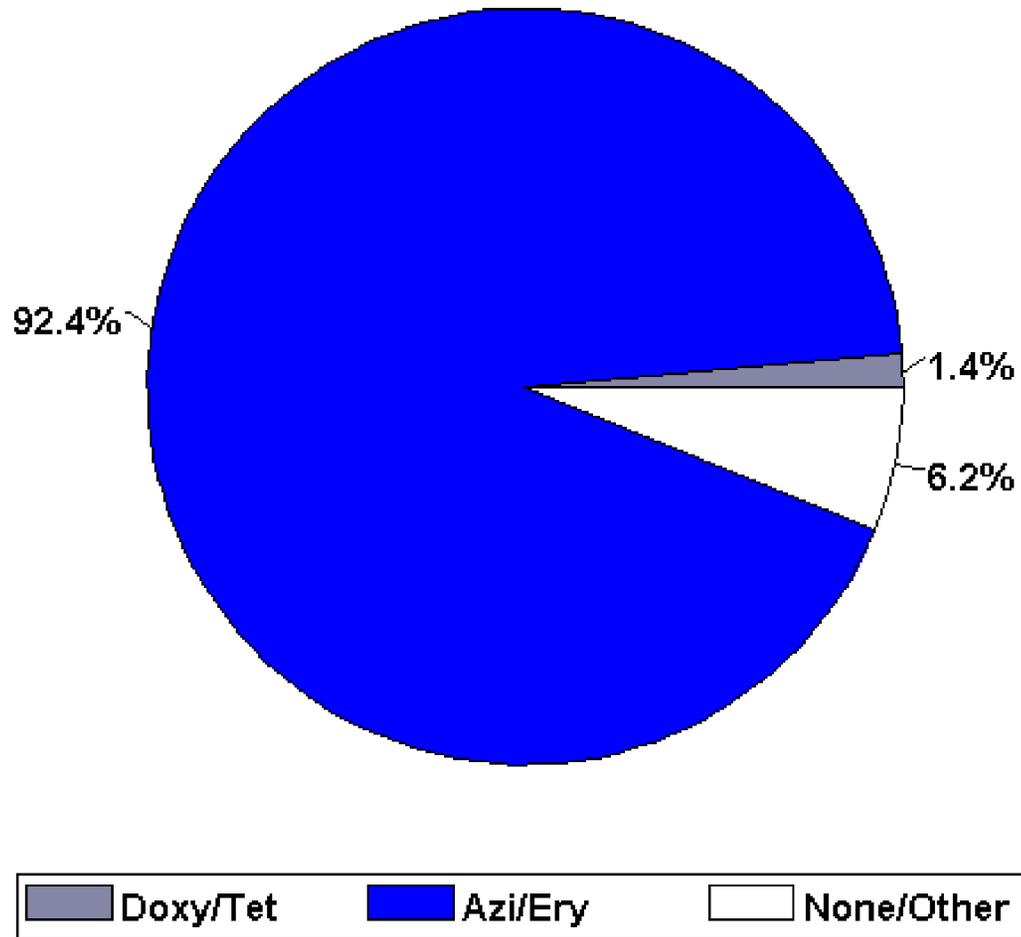
Detroit, Michigan (N=292)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



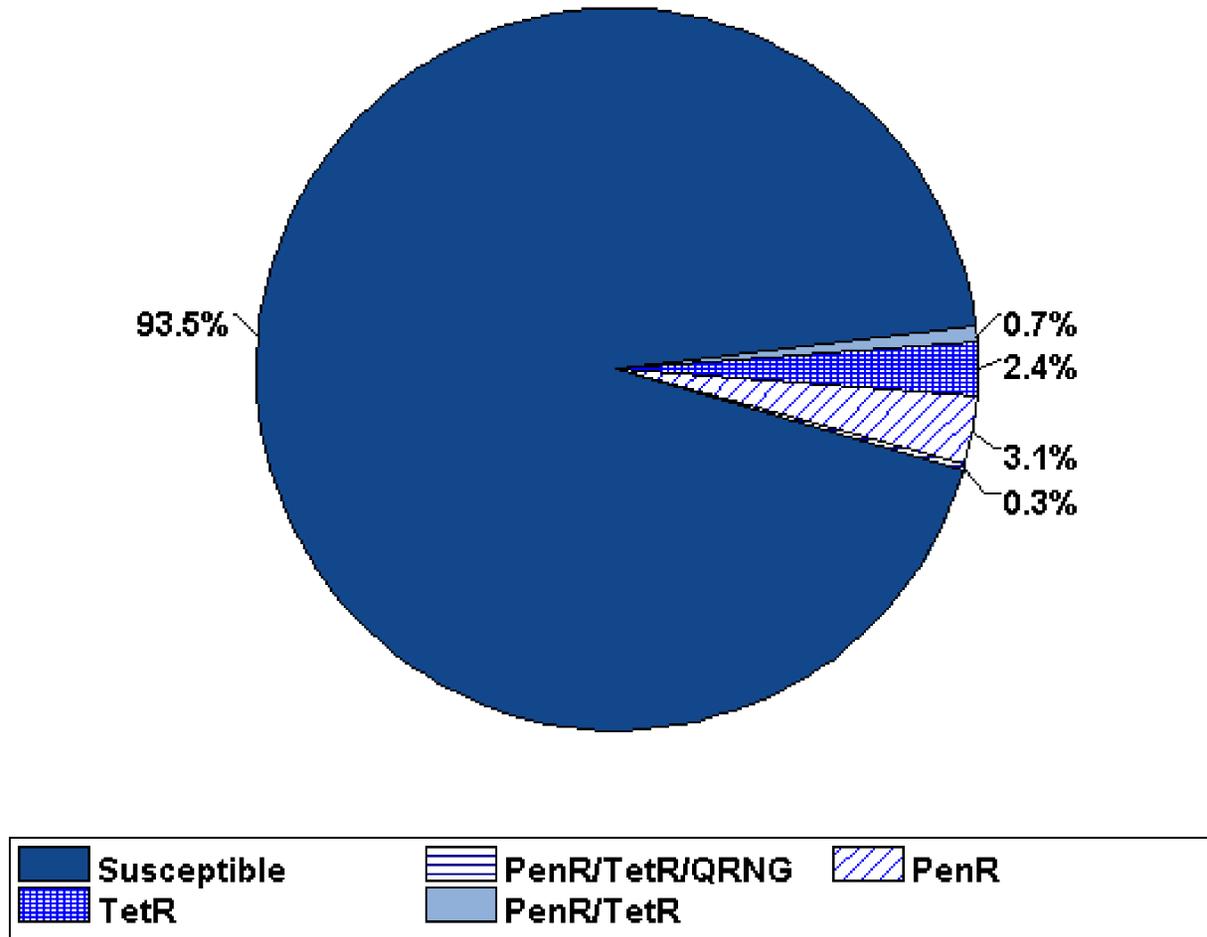
Detroit, Michigan (N=292)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



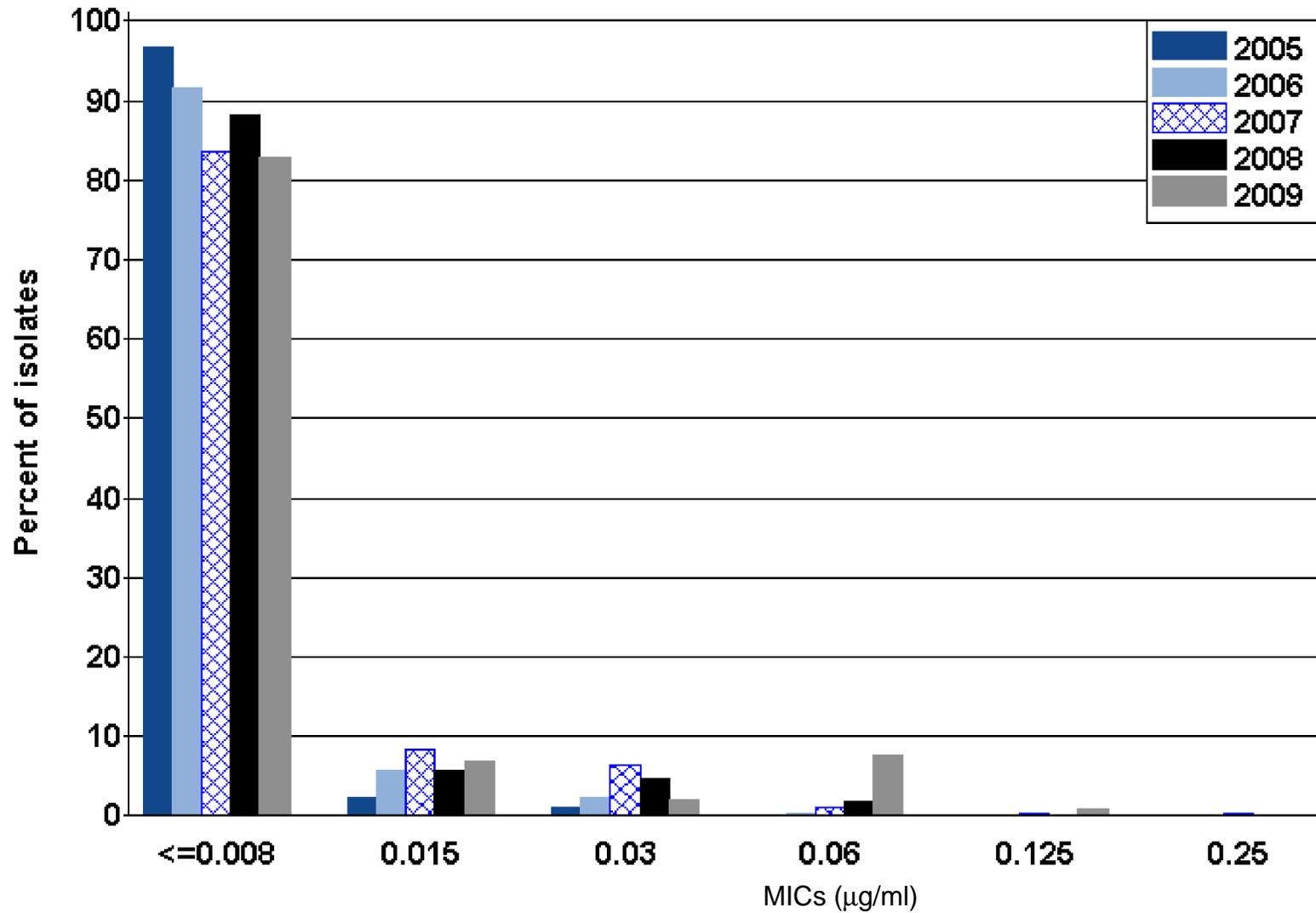
Detroit, Michigan (N=292)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



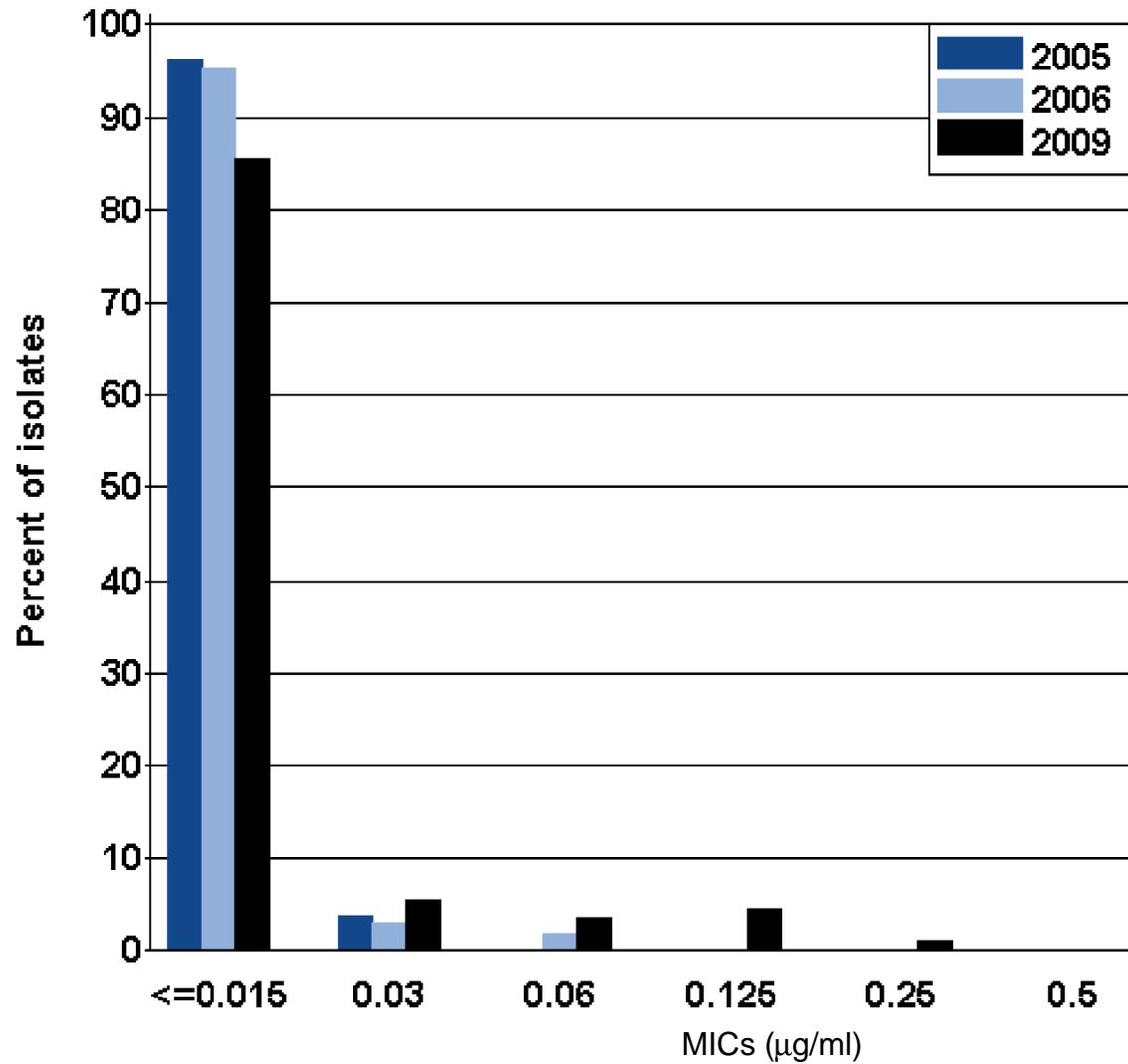
Detroit, Michigan

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Detroit, Michigan

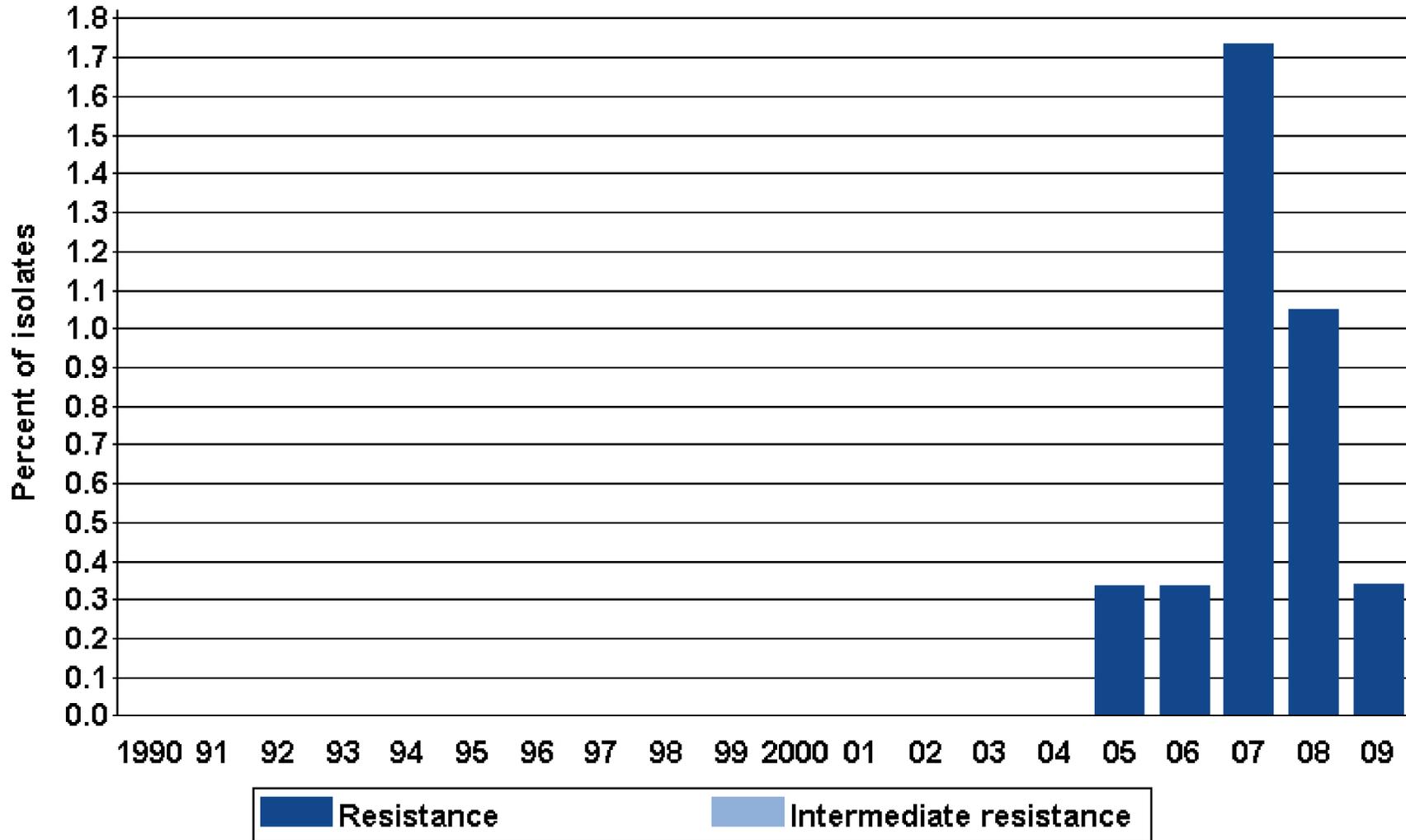
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Detroit, Michigan

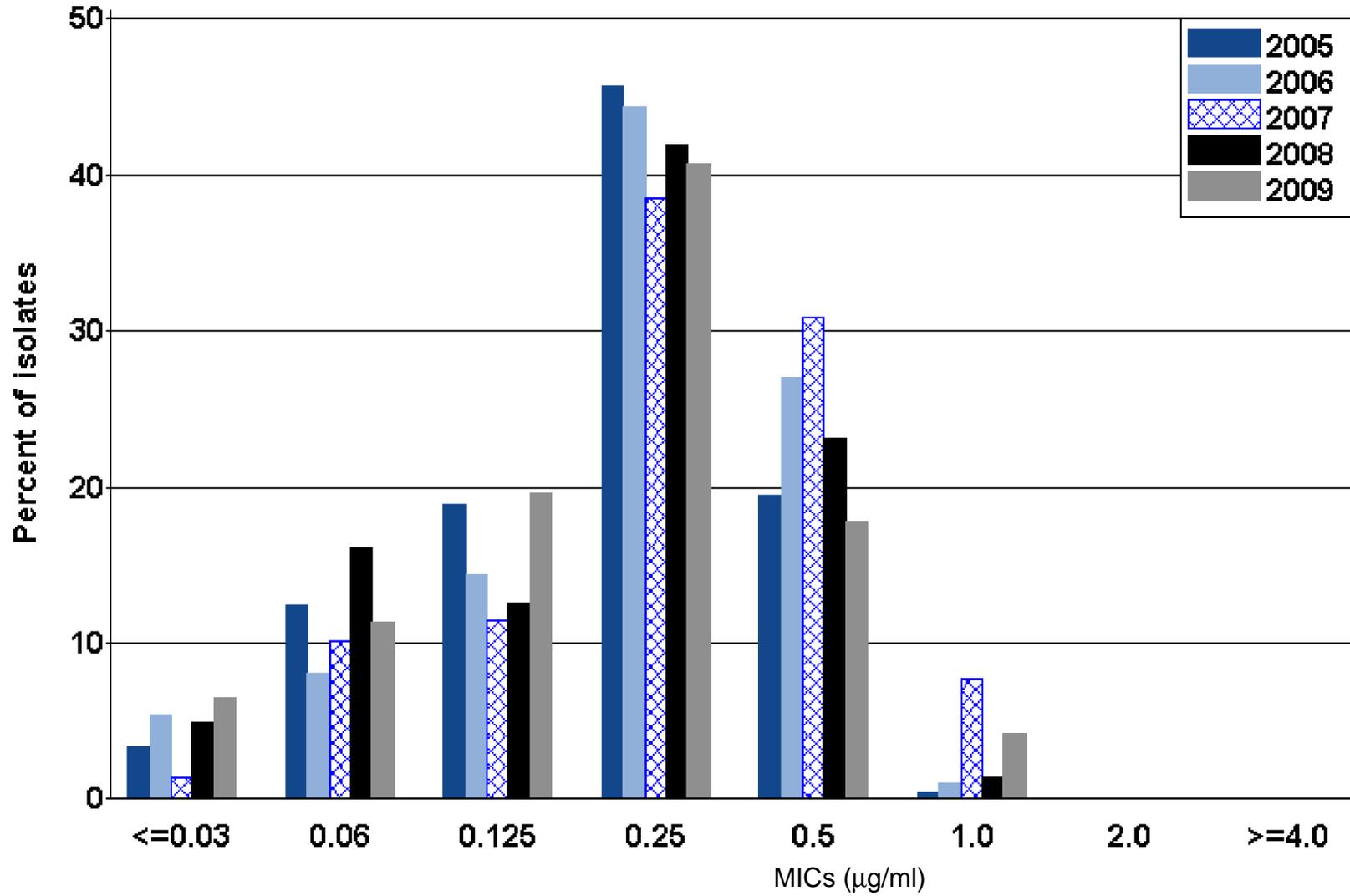
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

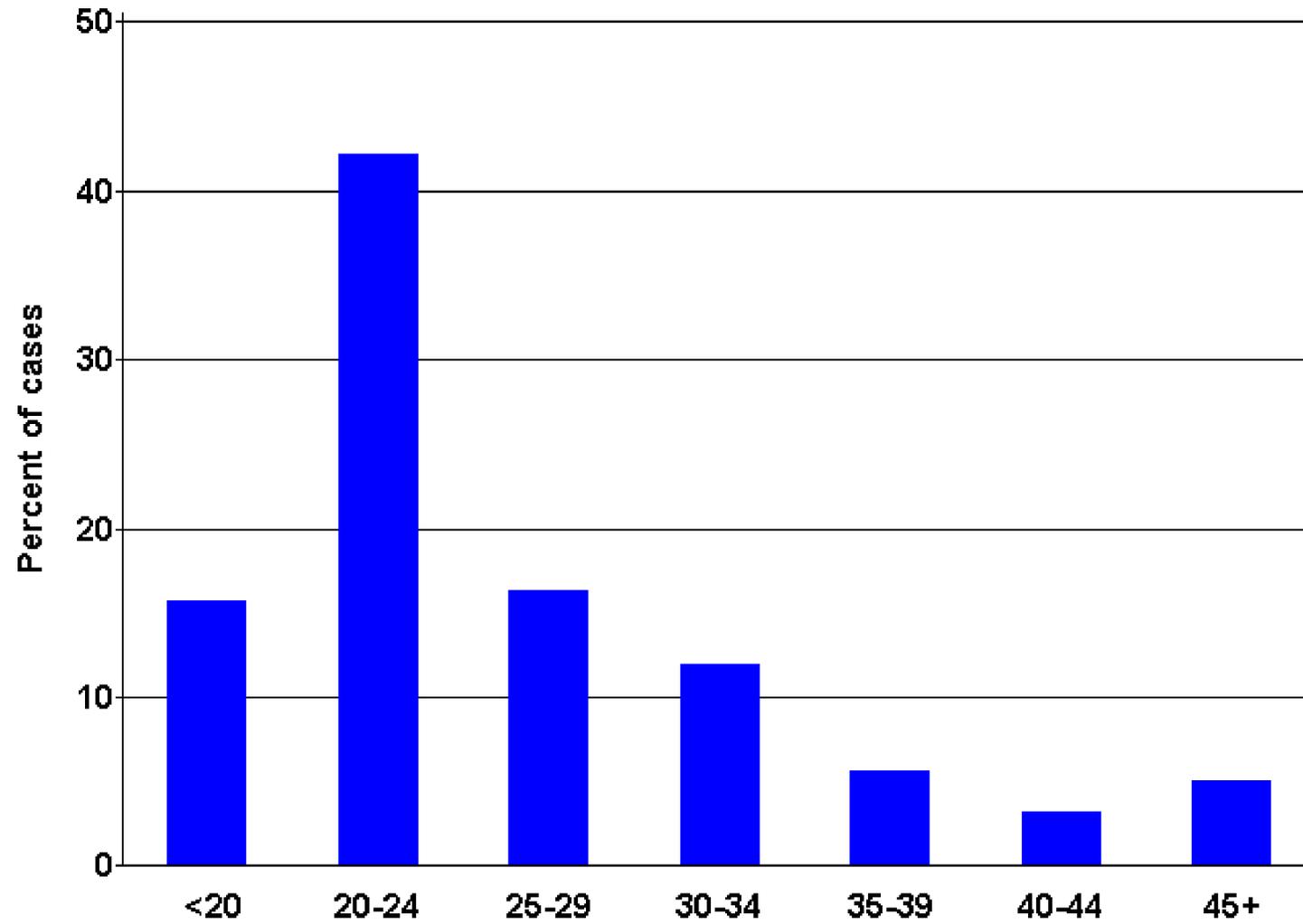
Detroit, Michigan

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



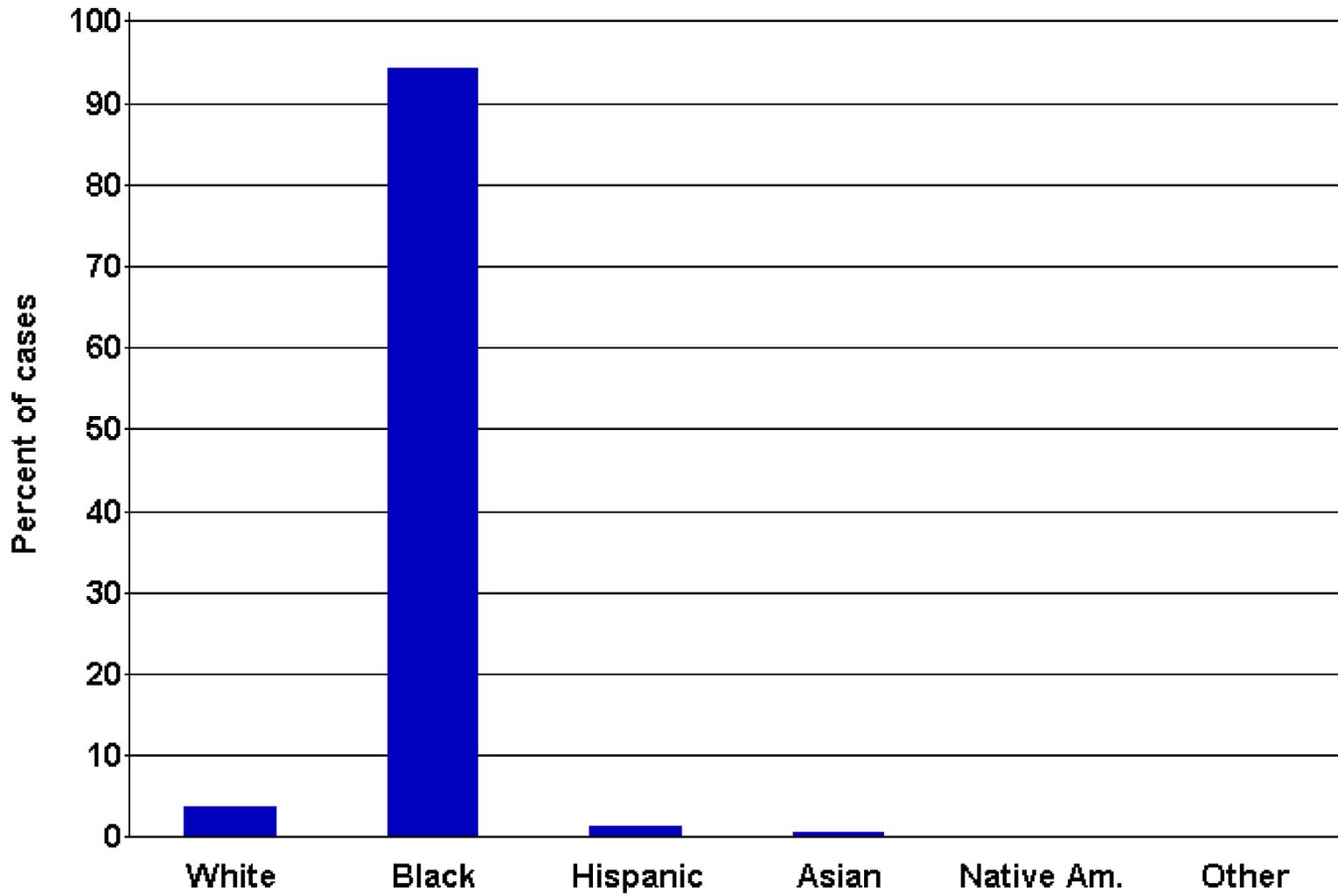
Greensboro, North Carolina (N=160)

Figure A. Age of GISP participants, in years, 2009



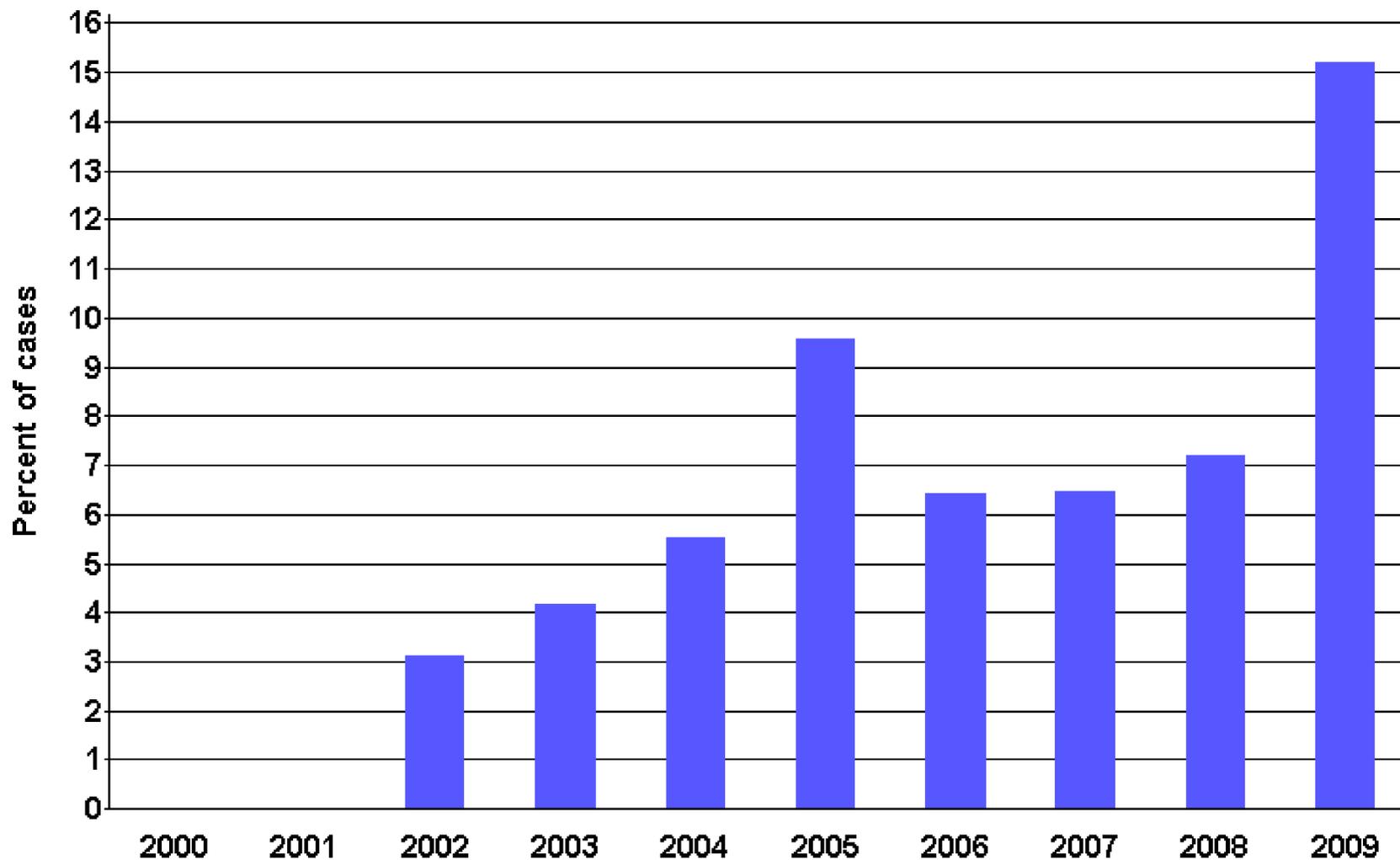
Greensboro, North Carolina (N=160)

Figure B. Race/ethnicity of GISP participants, 2009



Greensboro, North Carolina

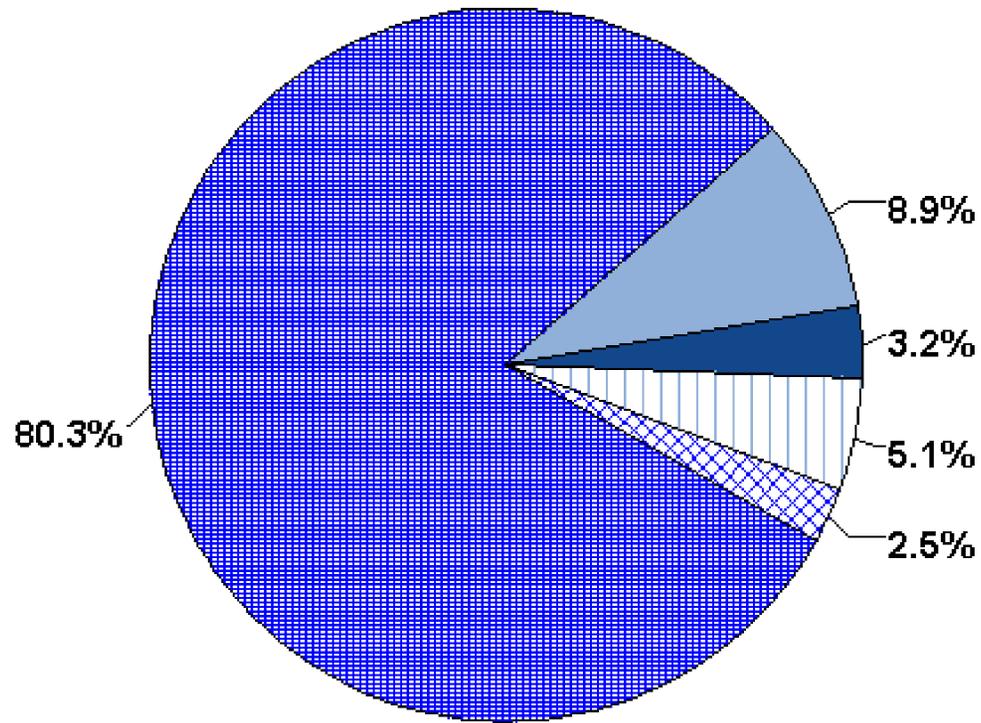
Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009*



*Note: Site participated in GISP from 2002-2009.

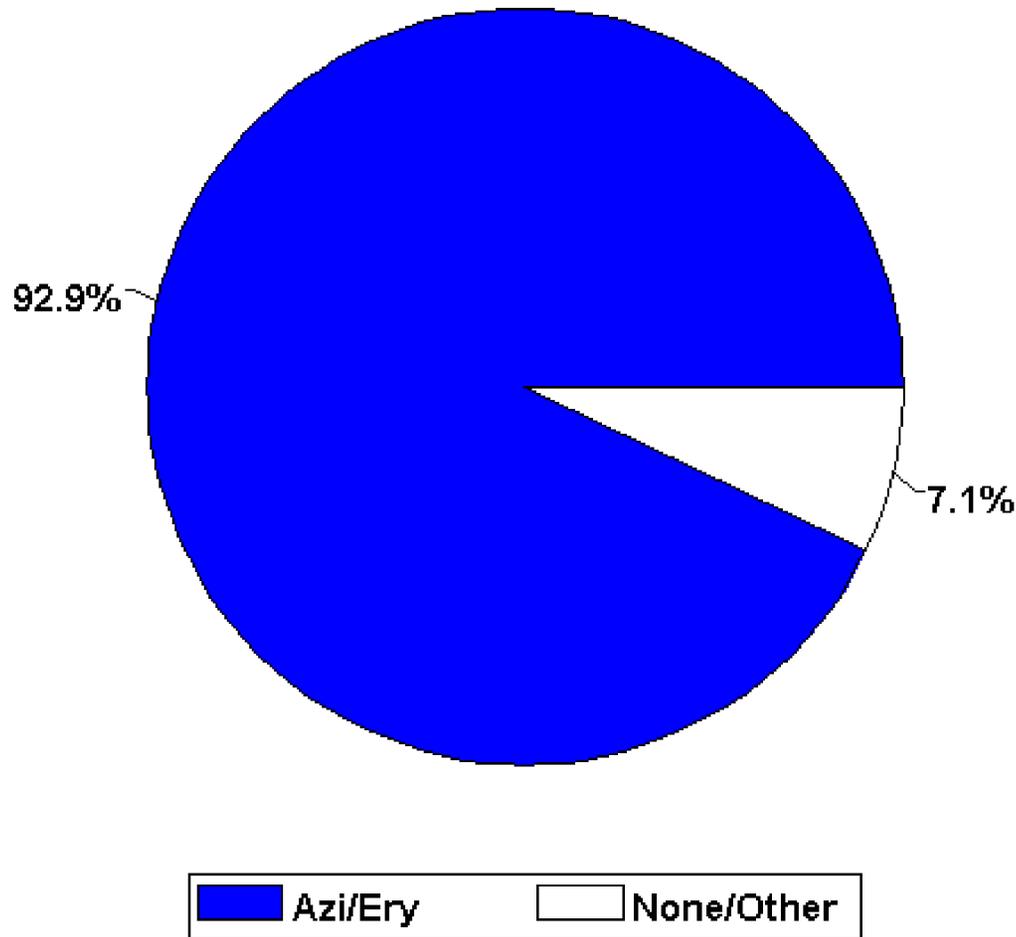
Greensboro, North Carolina (N=160)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



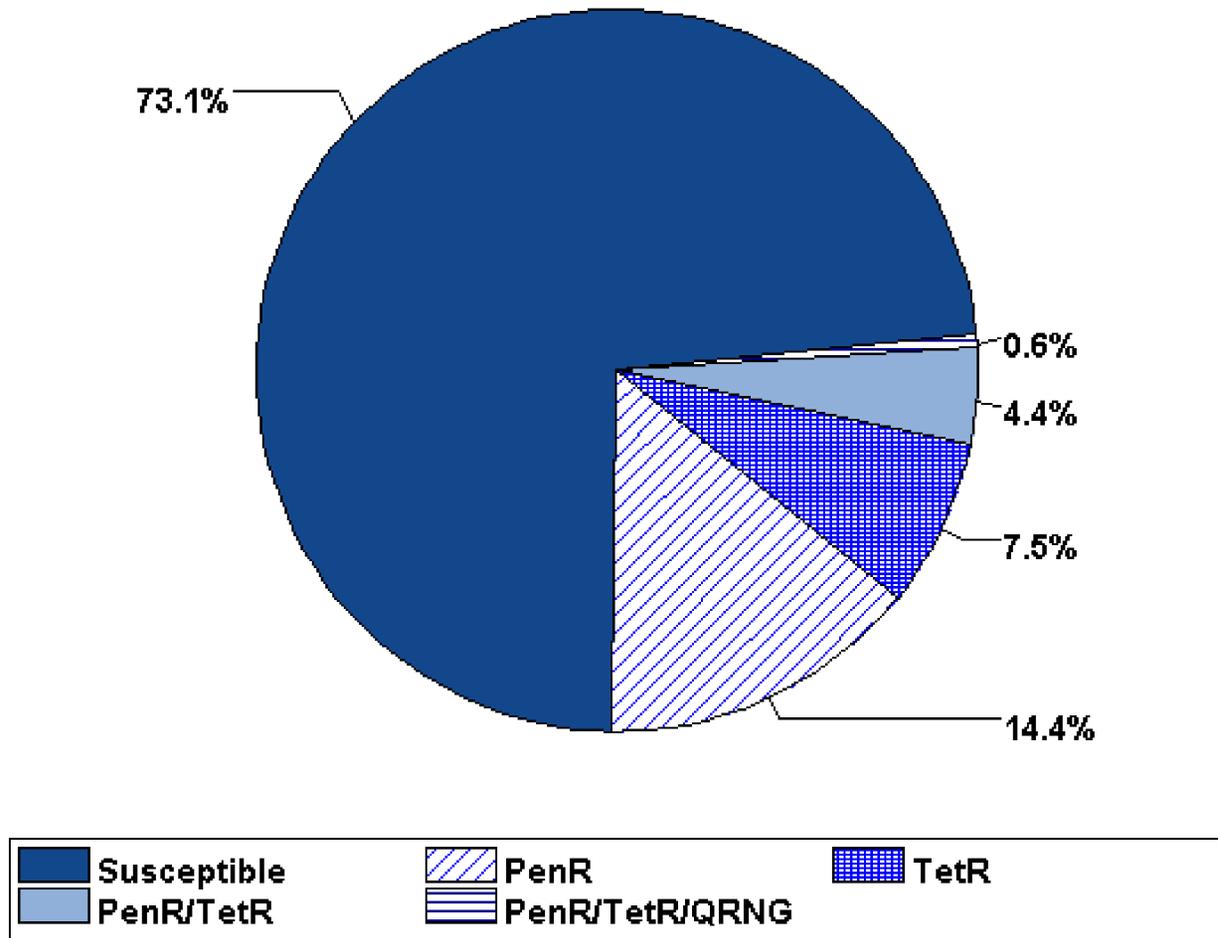
Greensboro, North Carolina (N=160)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



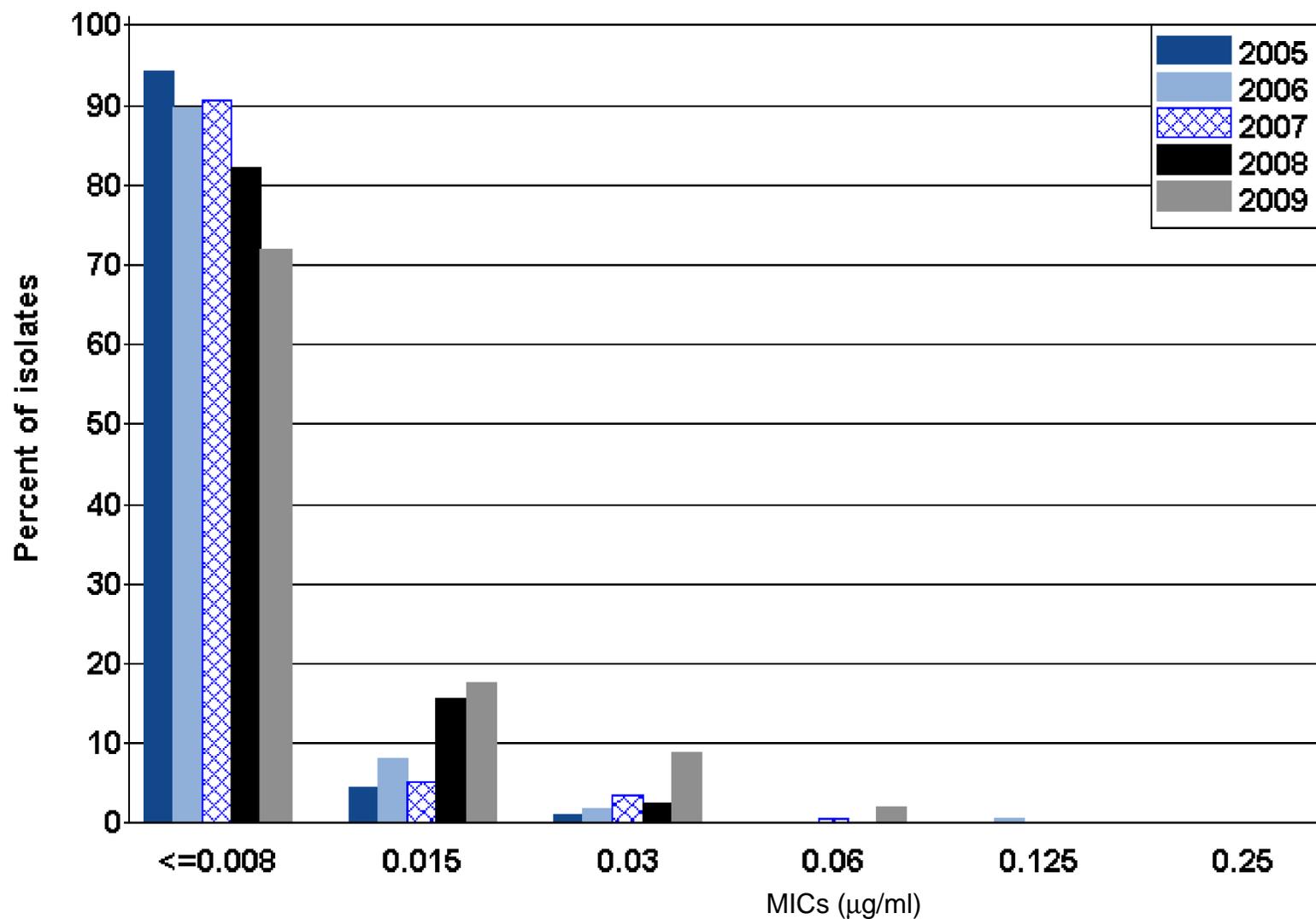
Greensboro, North Carolina (N=160)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



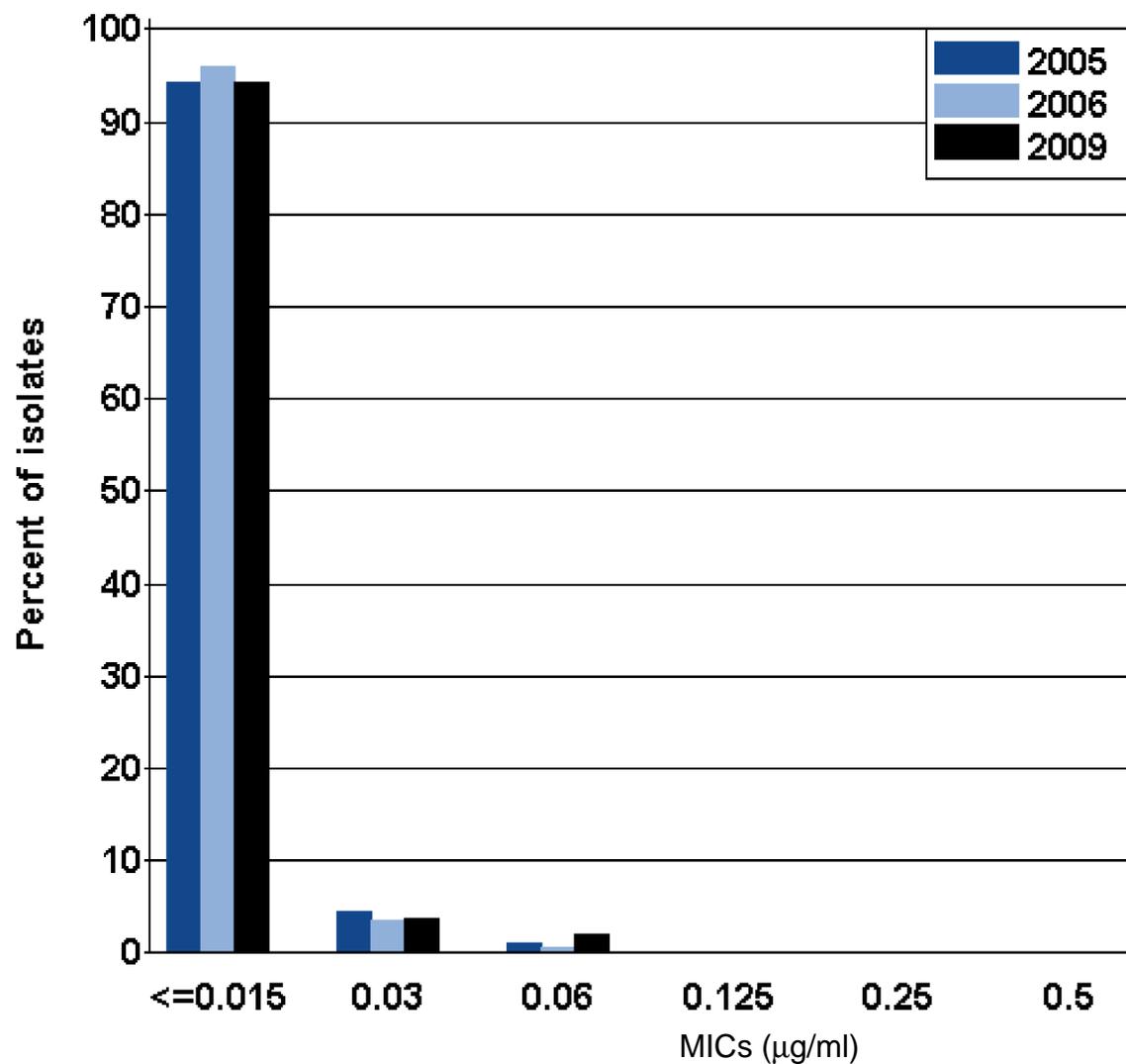
Greensboro, North Carolina

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Greensboro, North Carolina

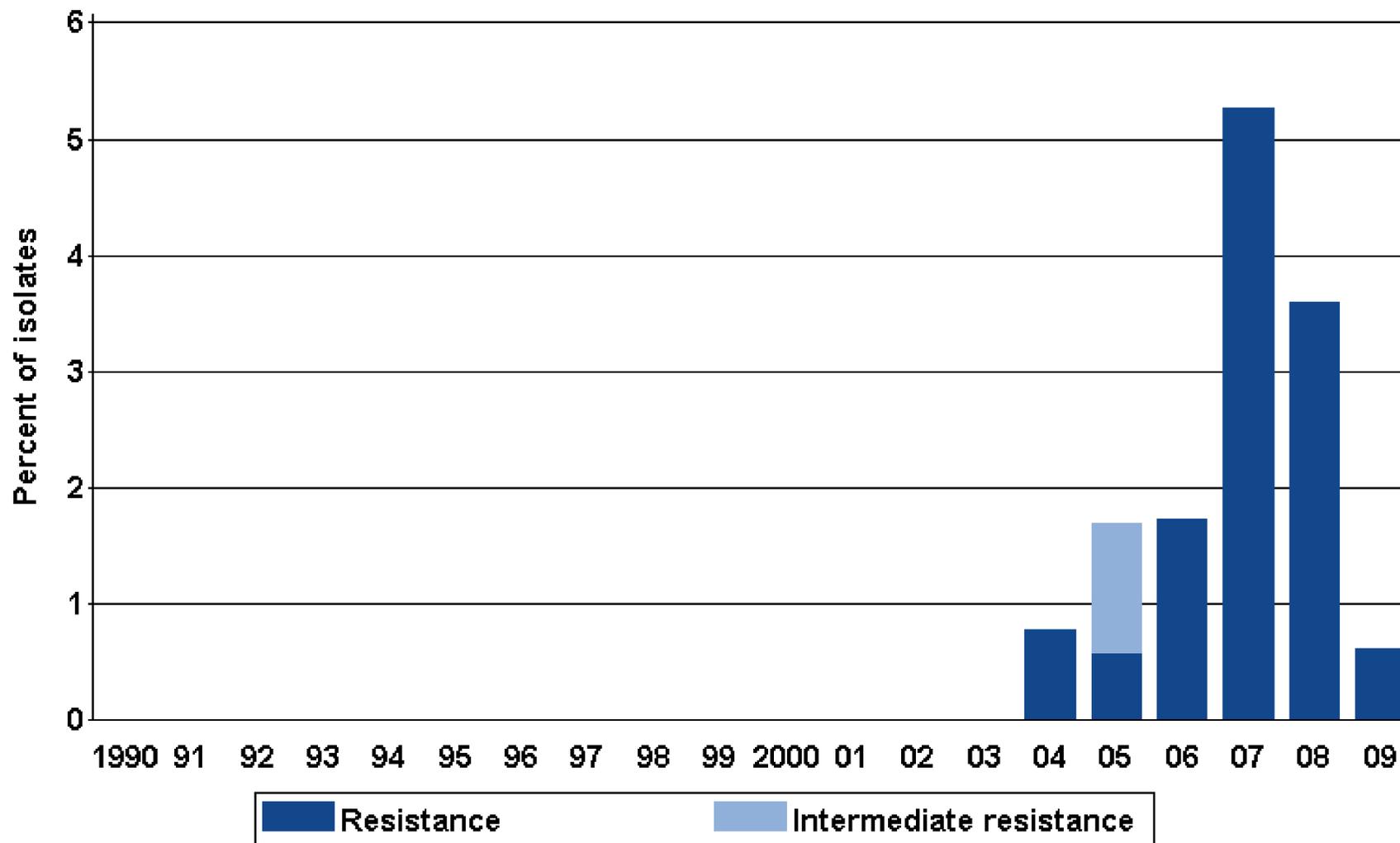
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Greensboro, North Carolina

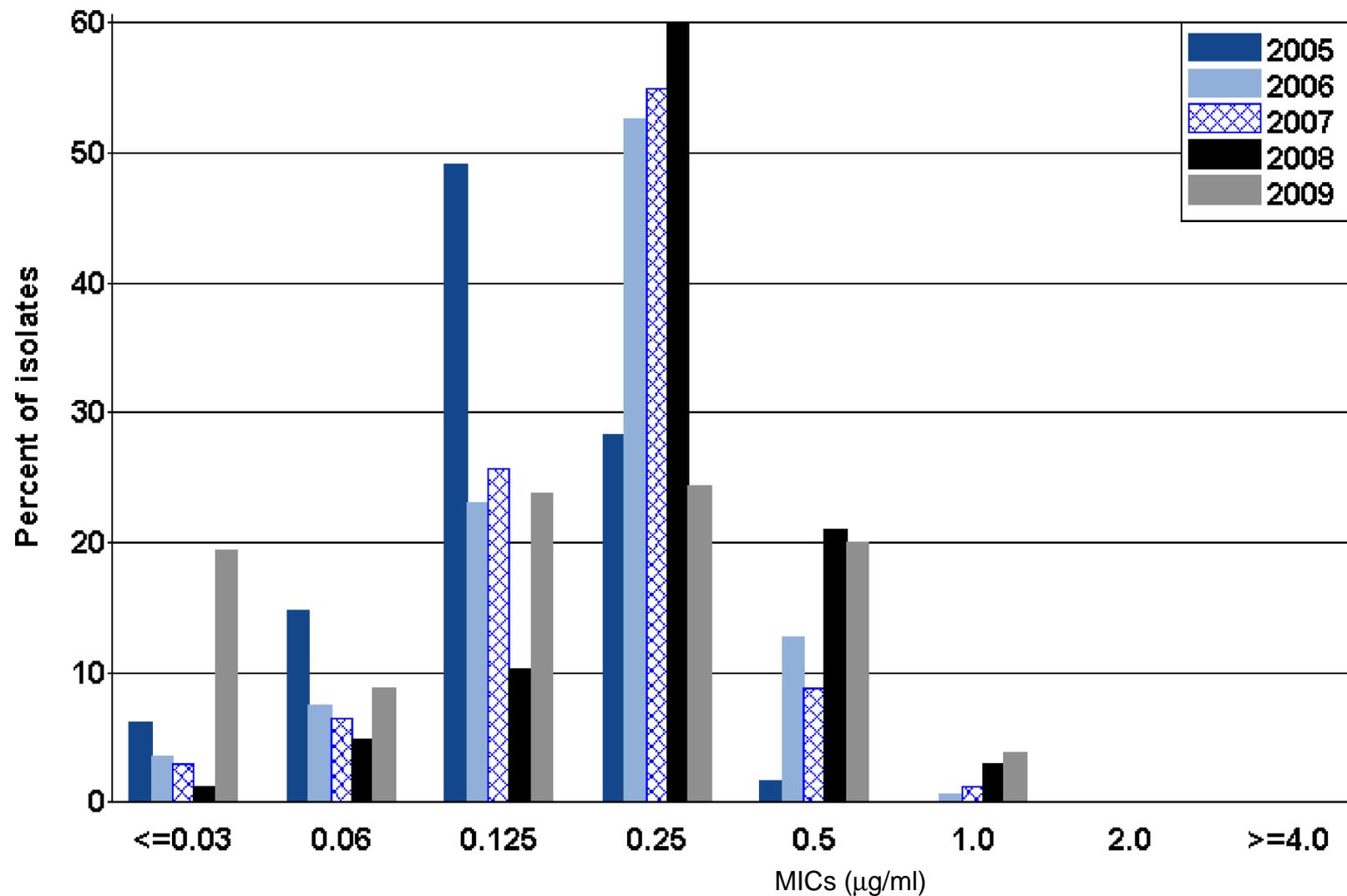
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

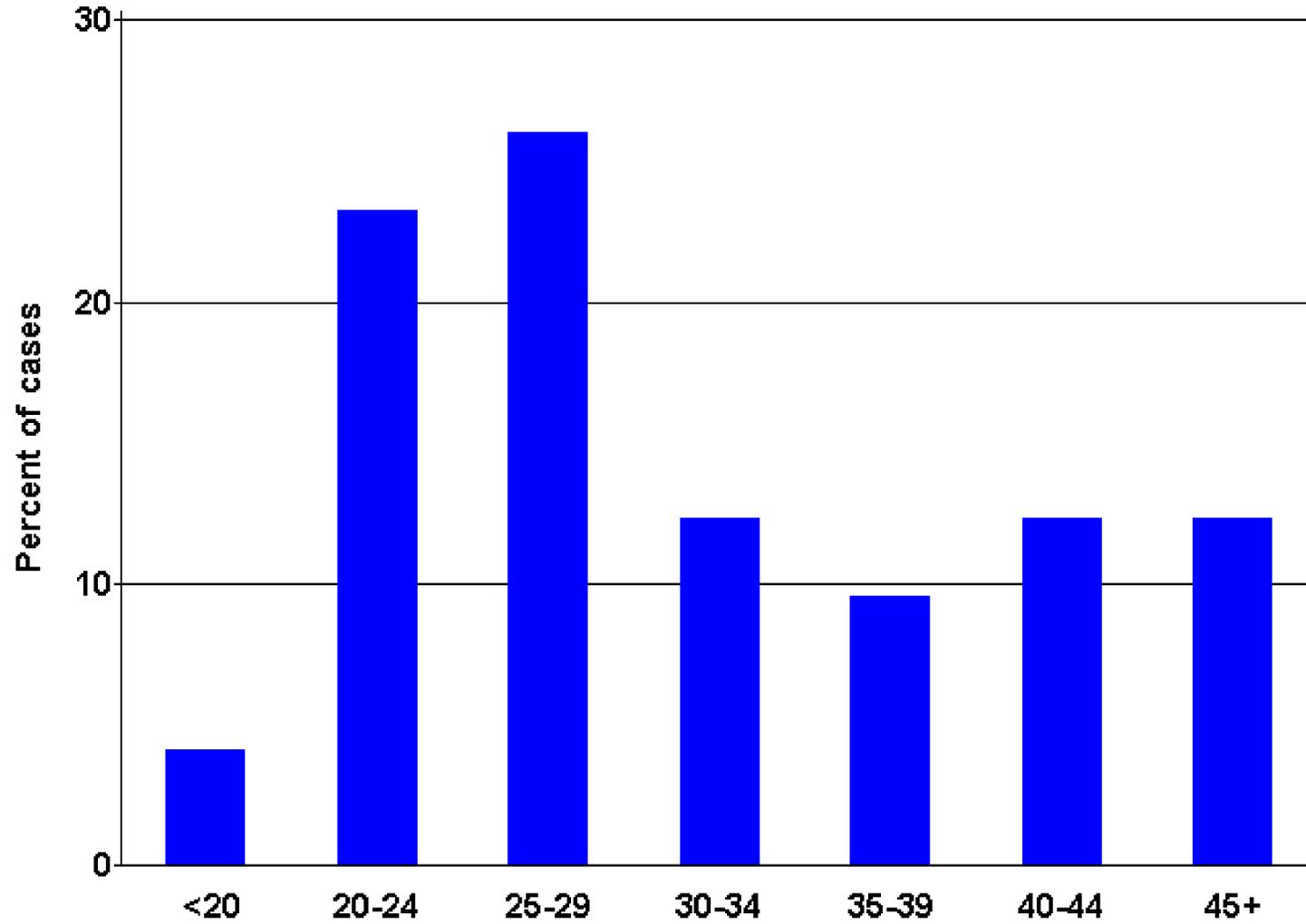
Greensboro, North Carolina

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



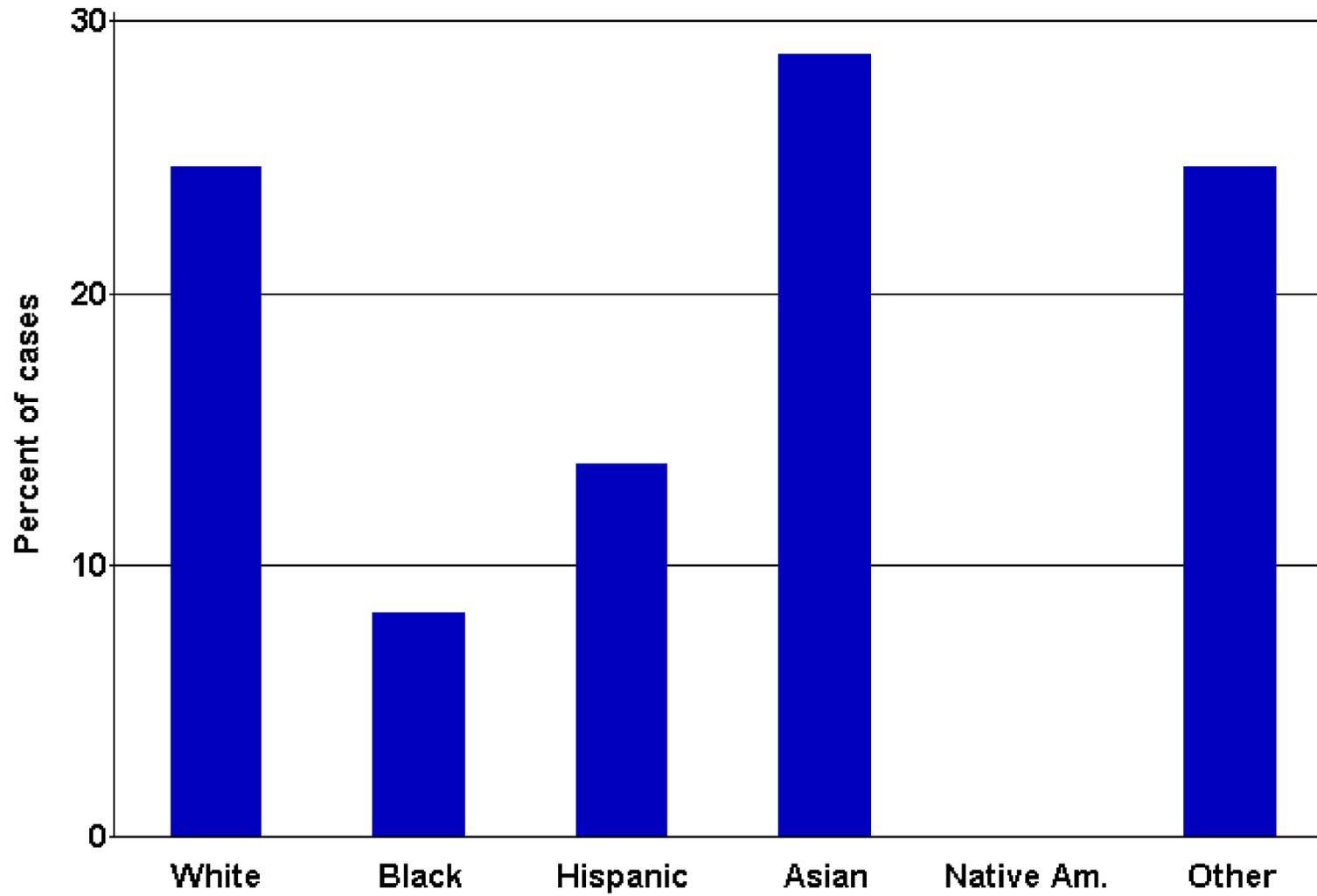
Honolulu, Hawaii (N=74)

Figure A. Age of GISP participants, in years, 2009



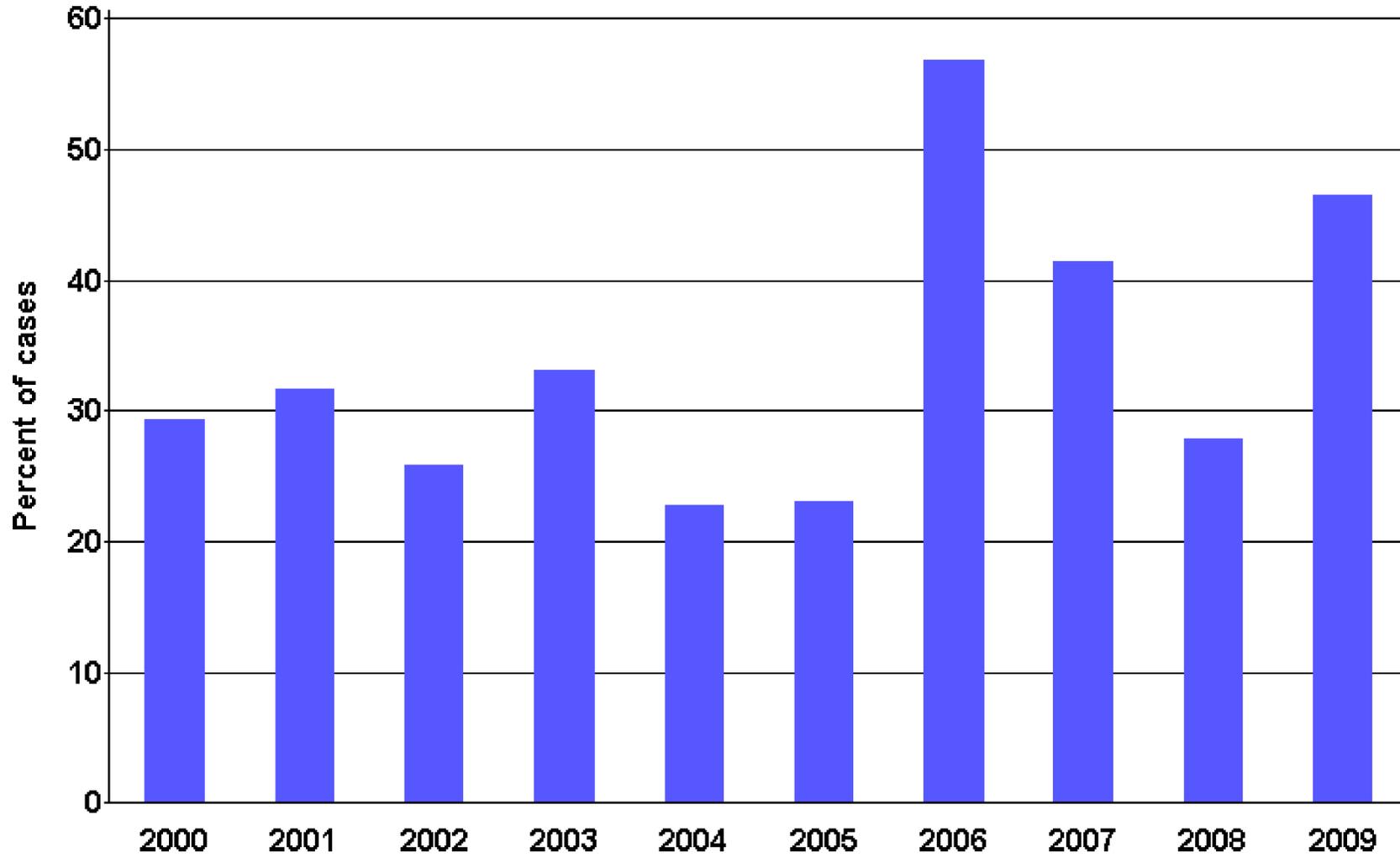
Honolulu, Hawaii (N=74)

Figure B. Race/ethnicity of GISP participants, 2009



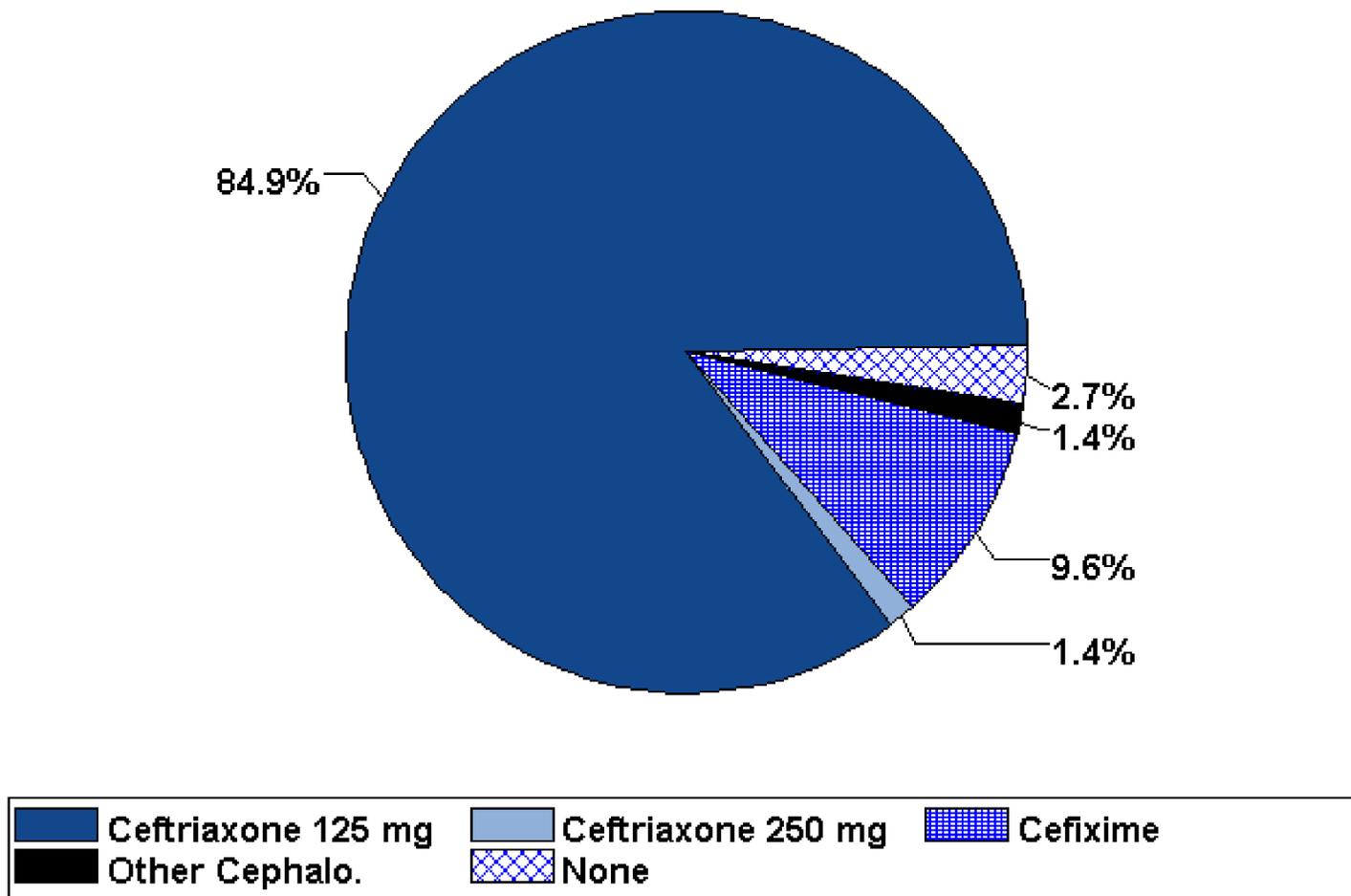
Honolulu, Hawaii

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



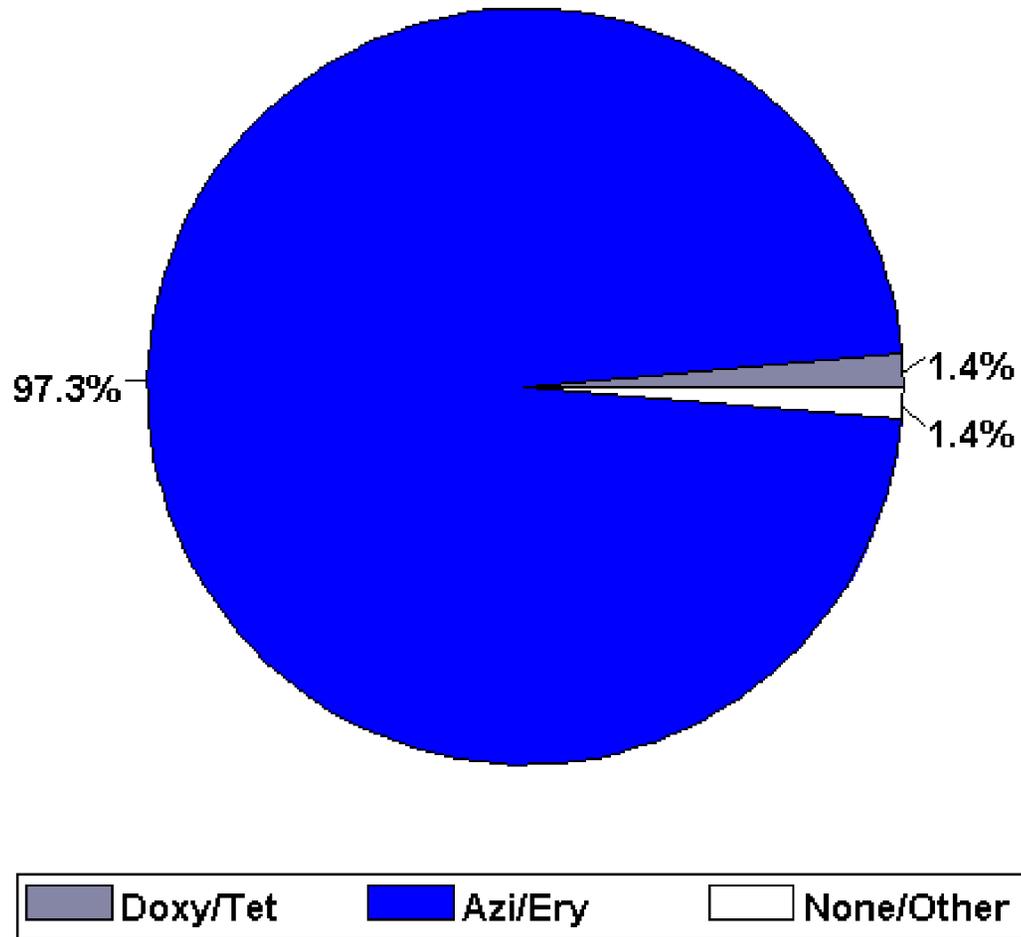
Honolulu, Hawaii (N=74)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



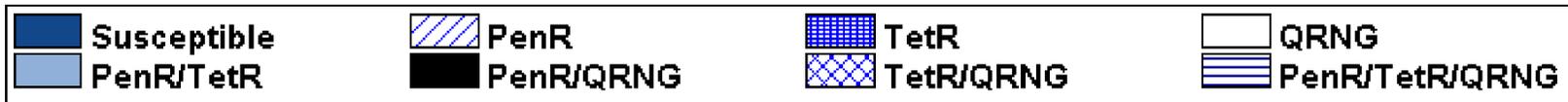
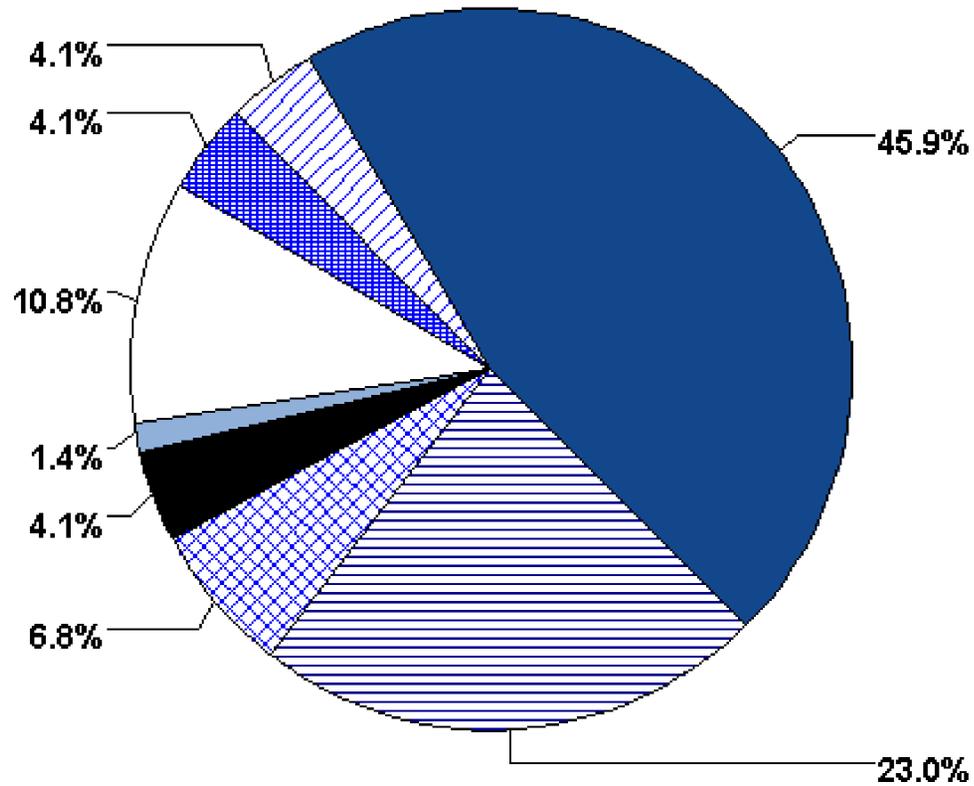
Honolulu, Hawaii (N=74)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



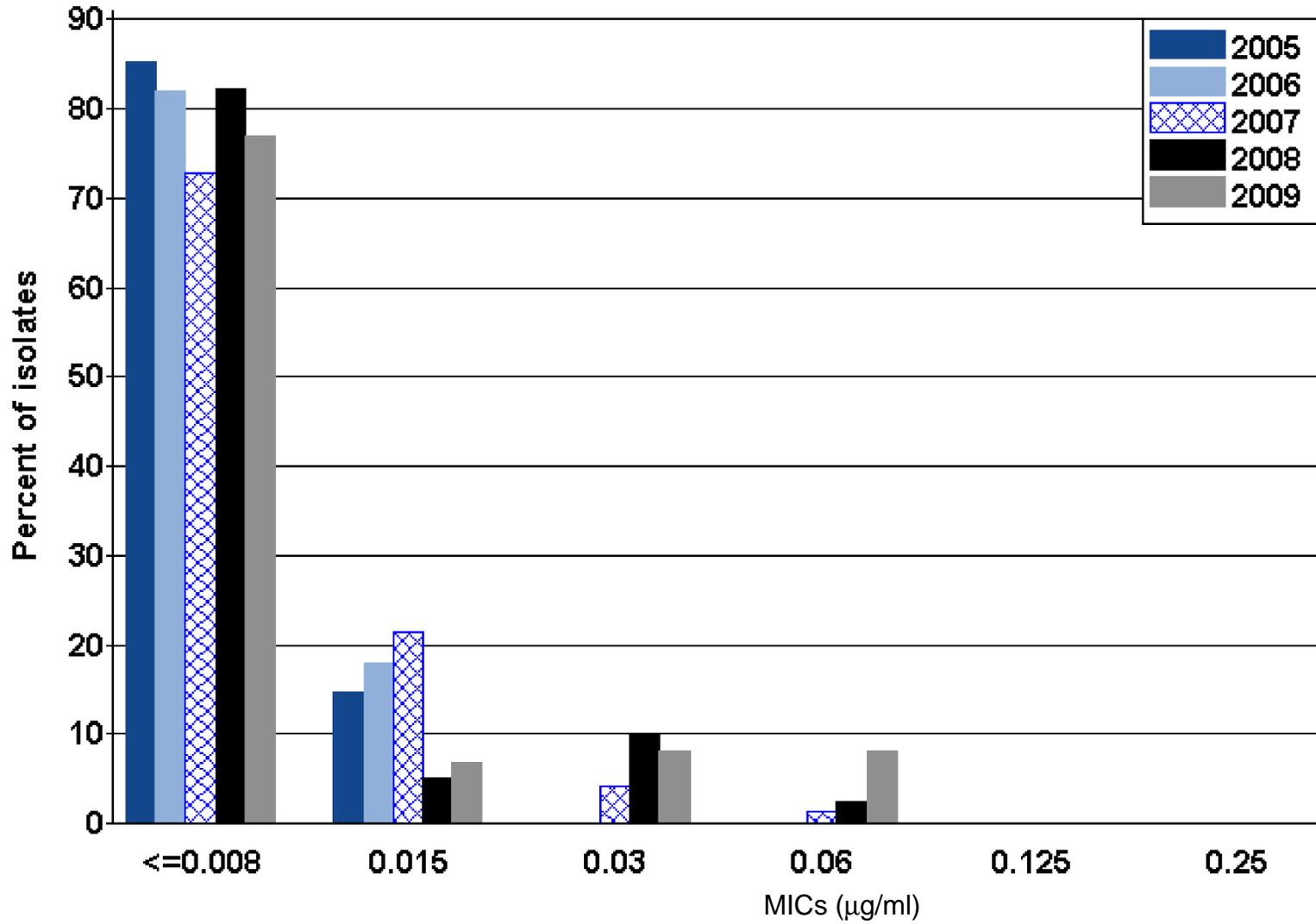
Honolulu, Hawaii (N=74)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



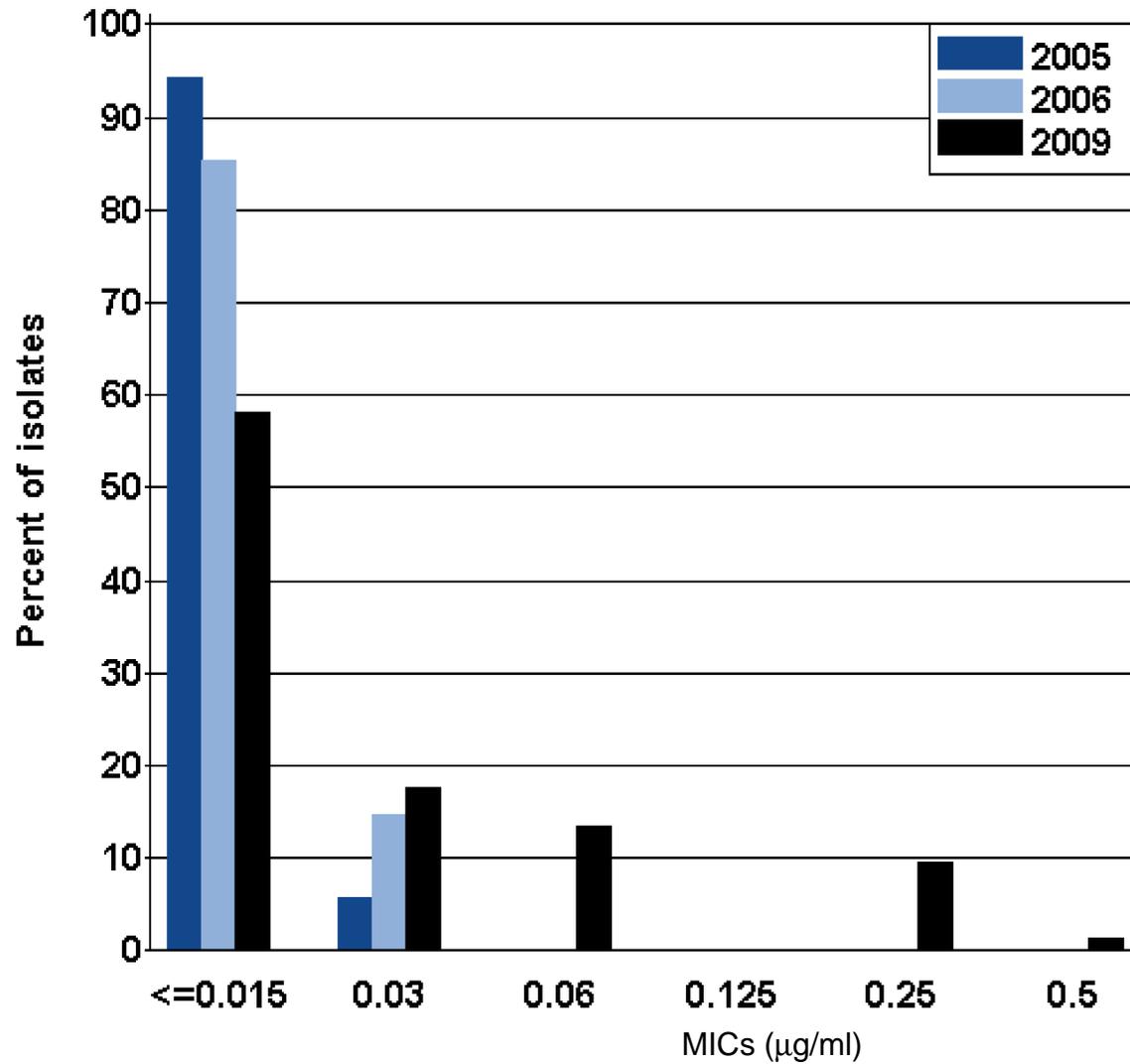
Honolulu, Hawaii

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Honolulu, Hawaii

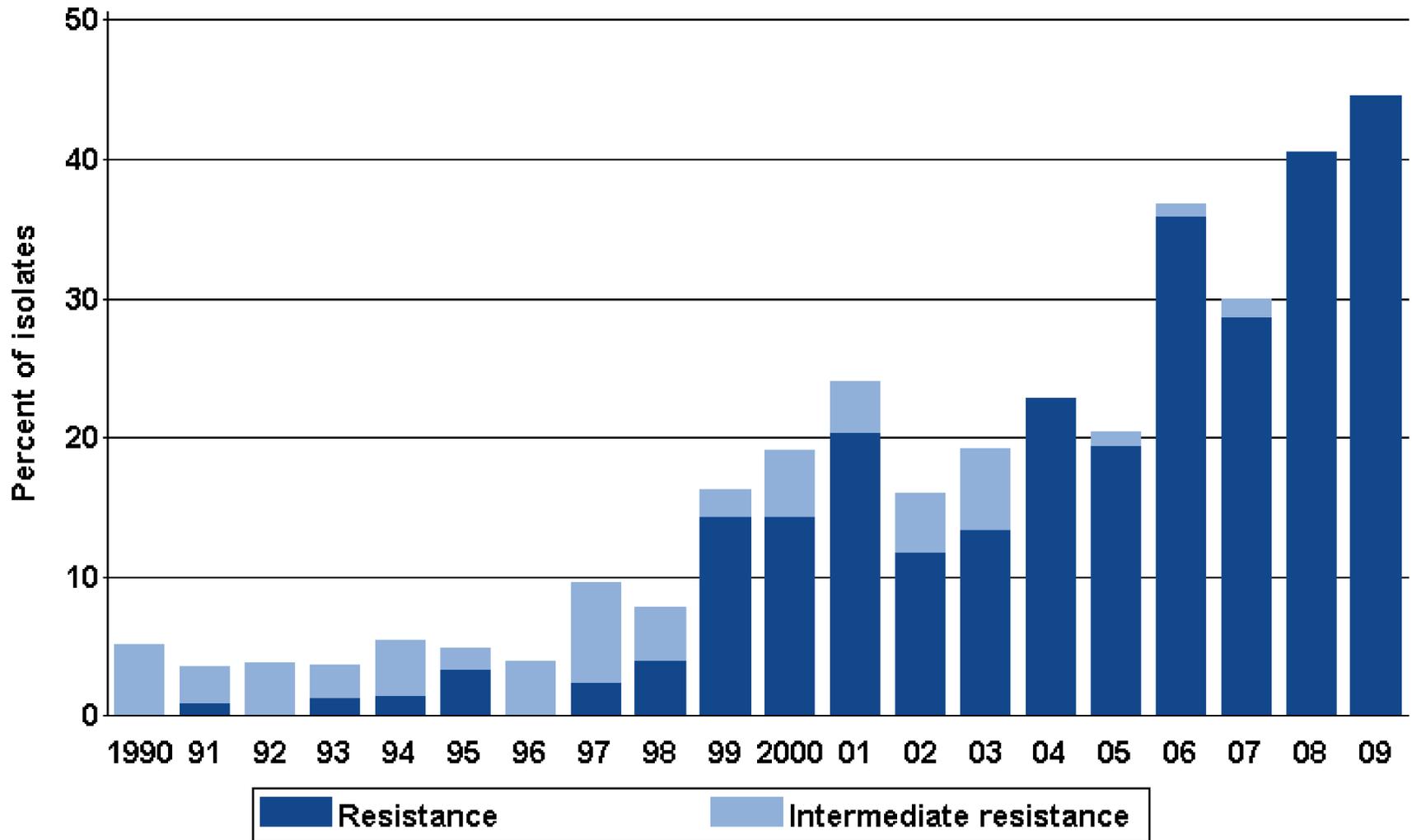
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Honolulu, Hawaii

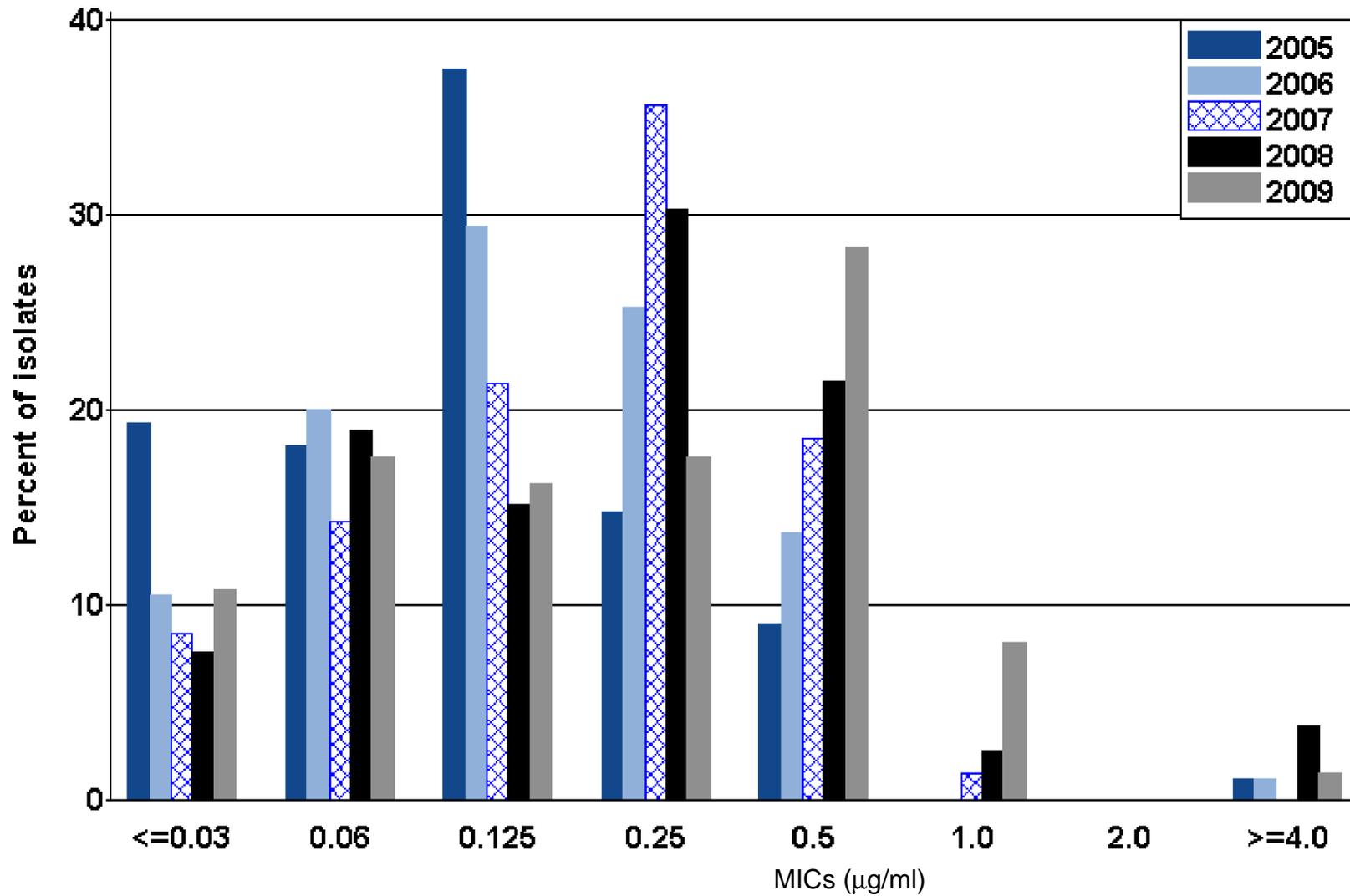
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

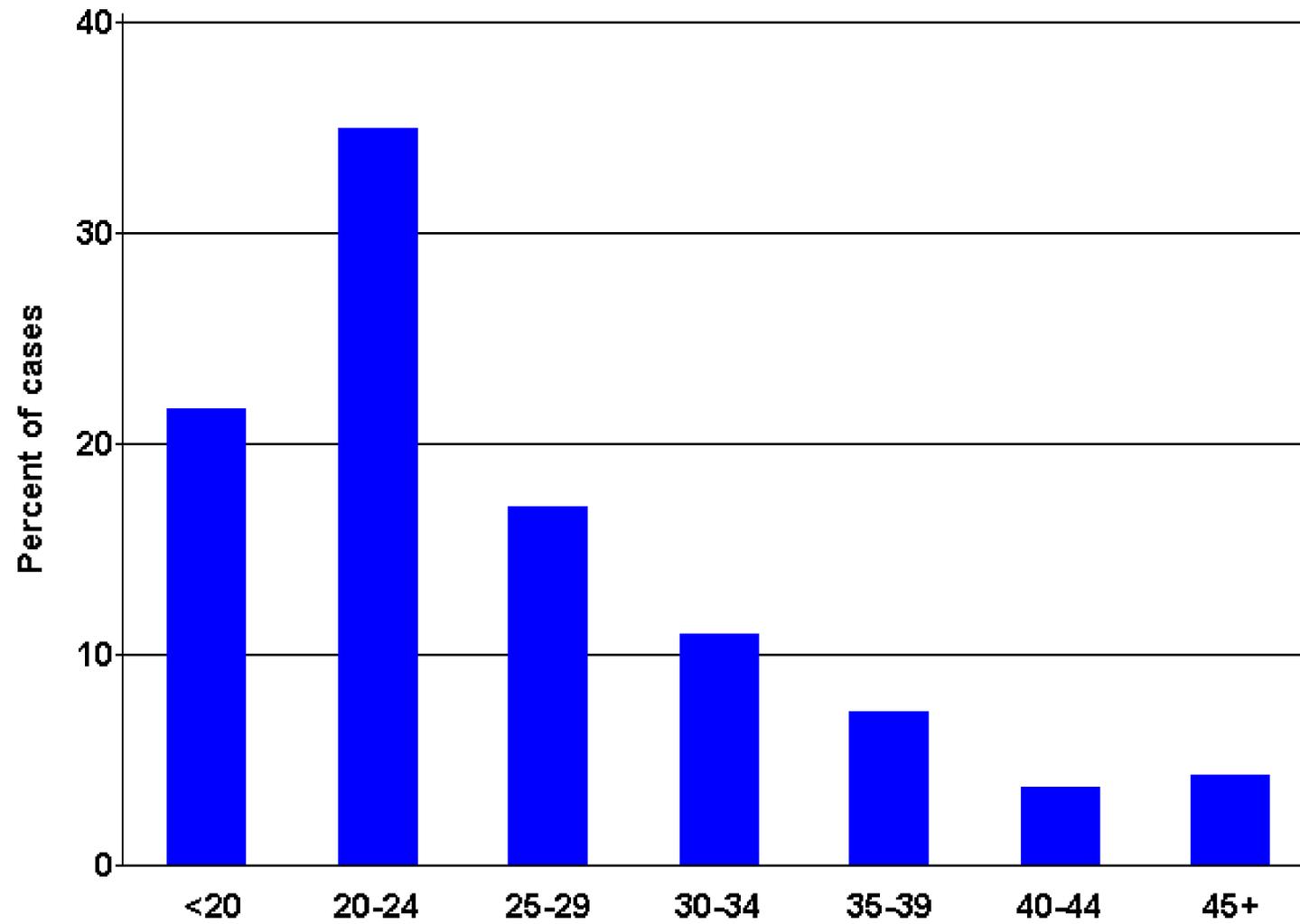
Honolulu, Hawaii

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



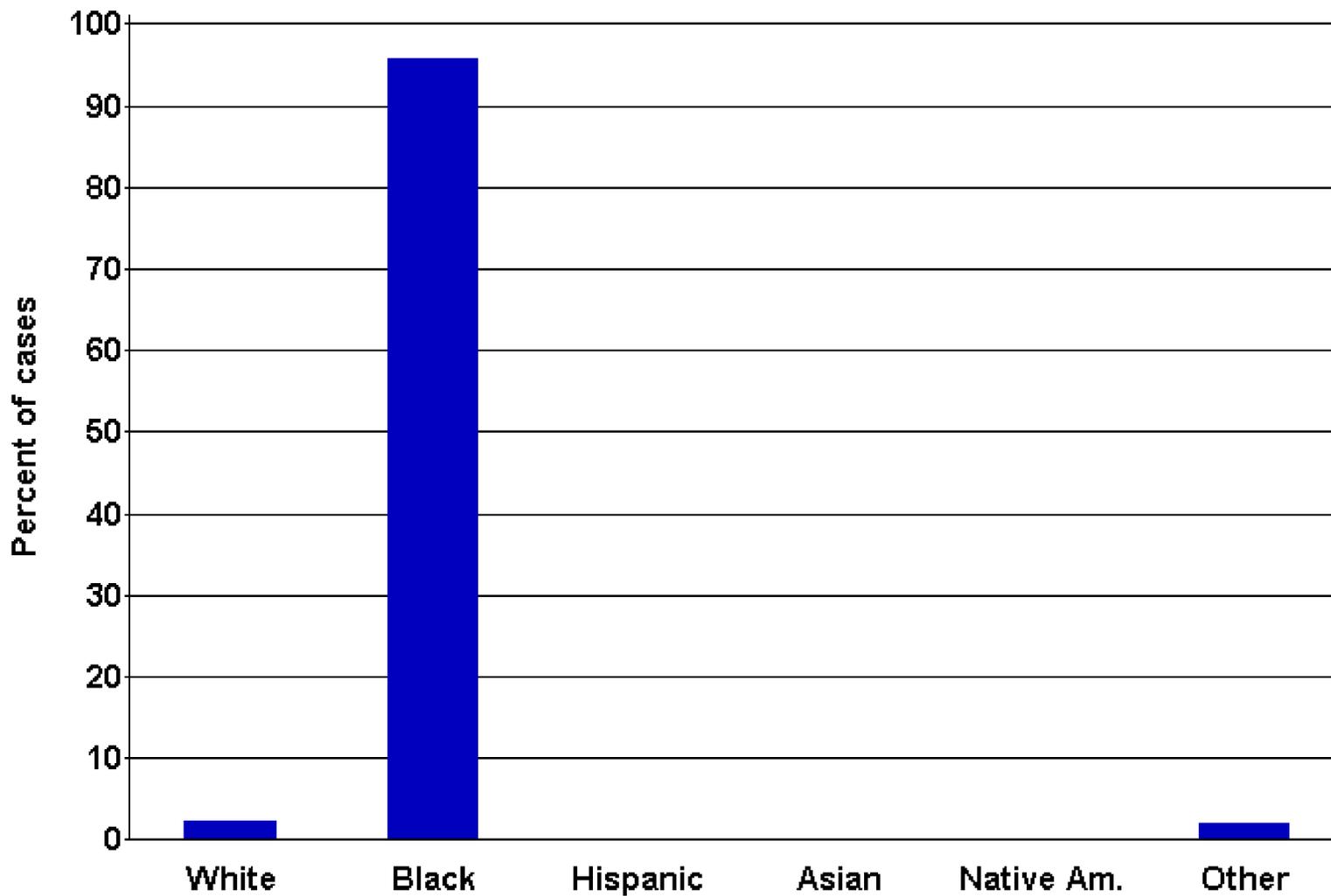
Kansas City, Missouri (N=300)

Figure A. Age of GISP participants, in years, 2009



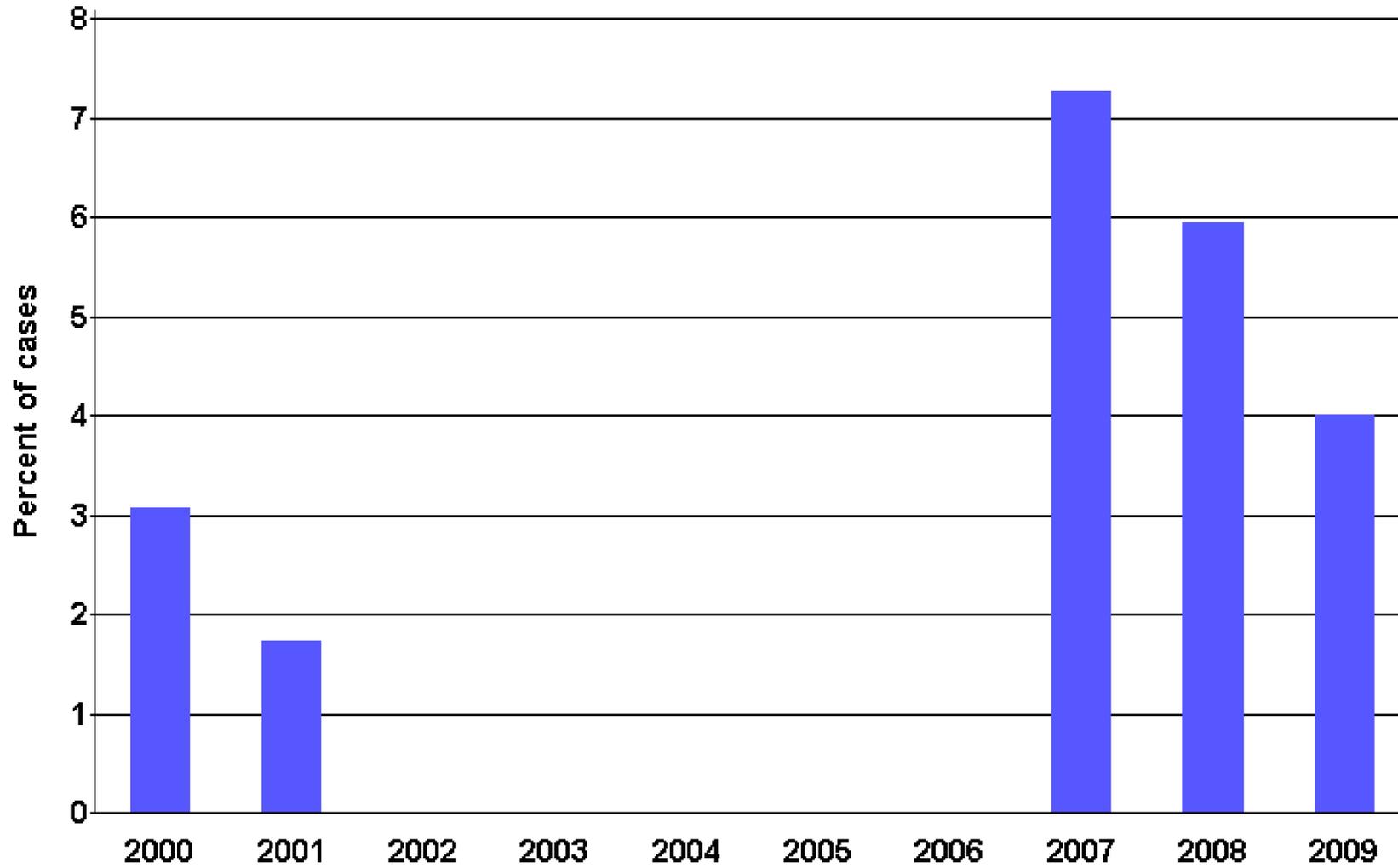
Kansas City, Missouri (N=300)

Figure B. Race/ethnicity of GISP participants, 2009



Kansas City, Missouri

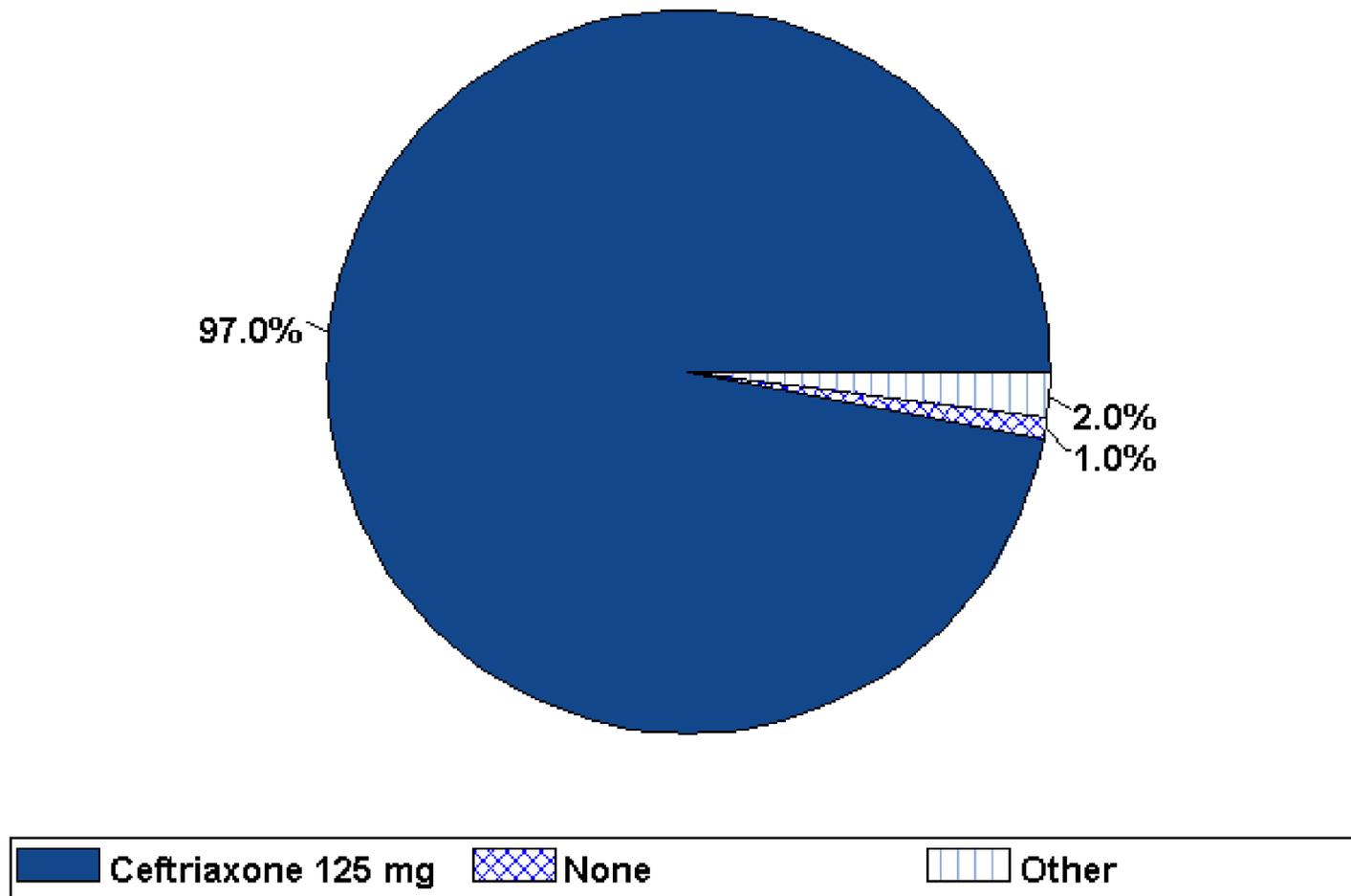
Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009*



*Note: Site participated in GISP from 2000-2001 and 2007-2009.

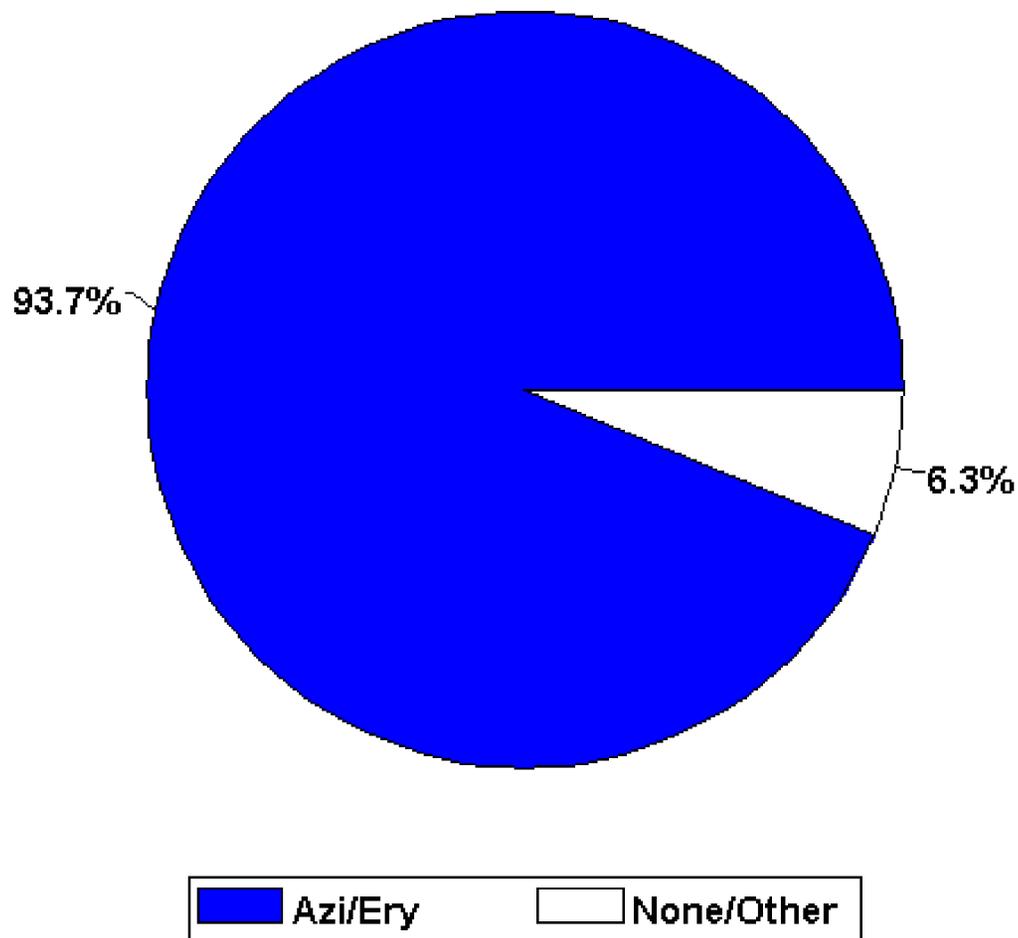
Kansas City, Missouri (N=300)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



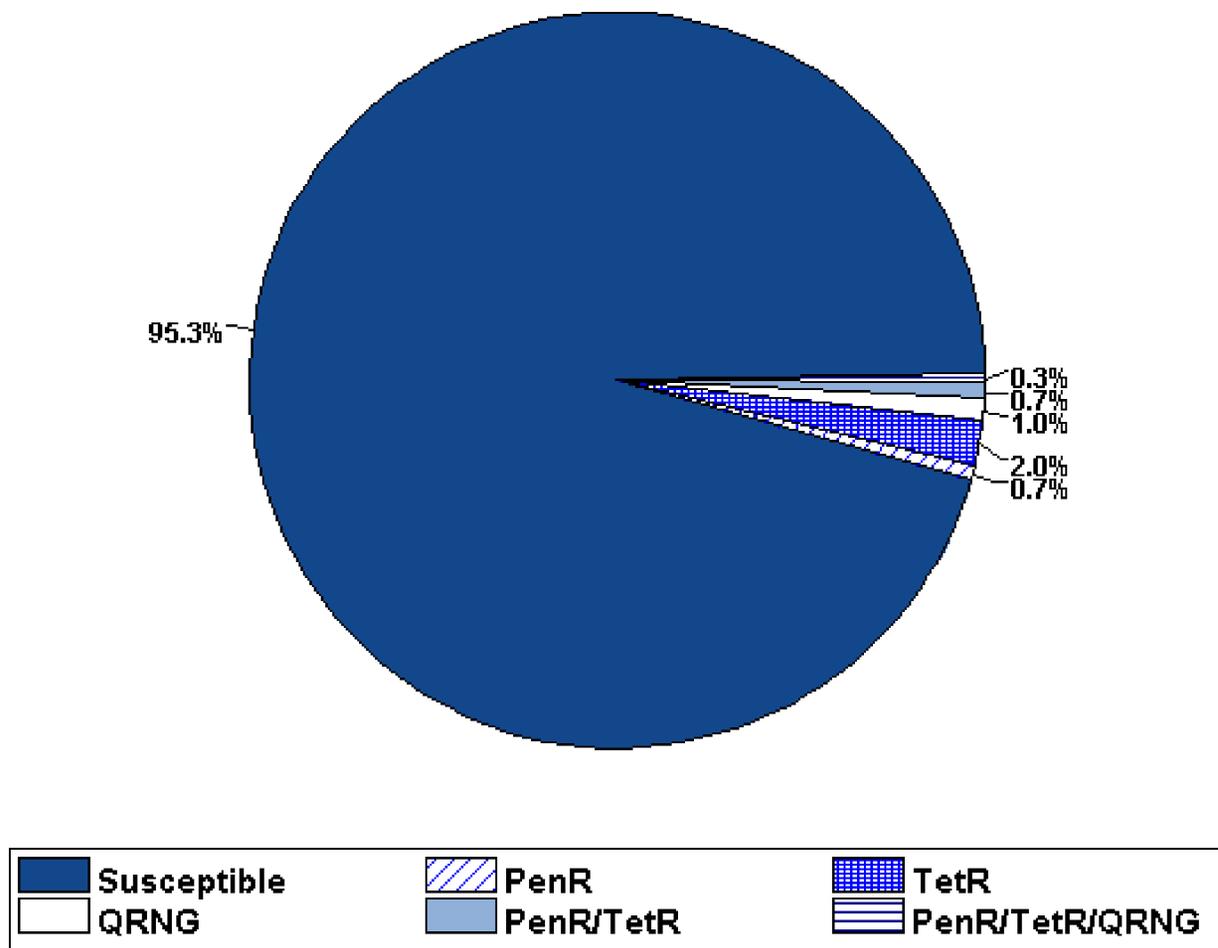
Kansas City, Missouri (N=300)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



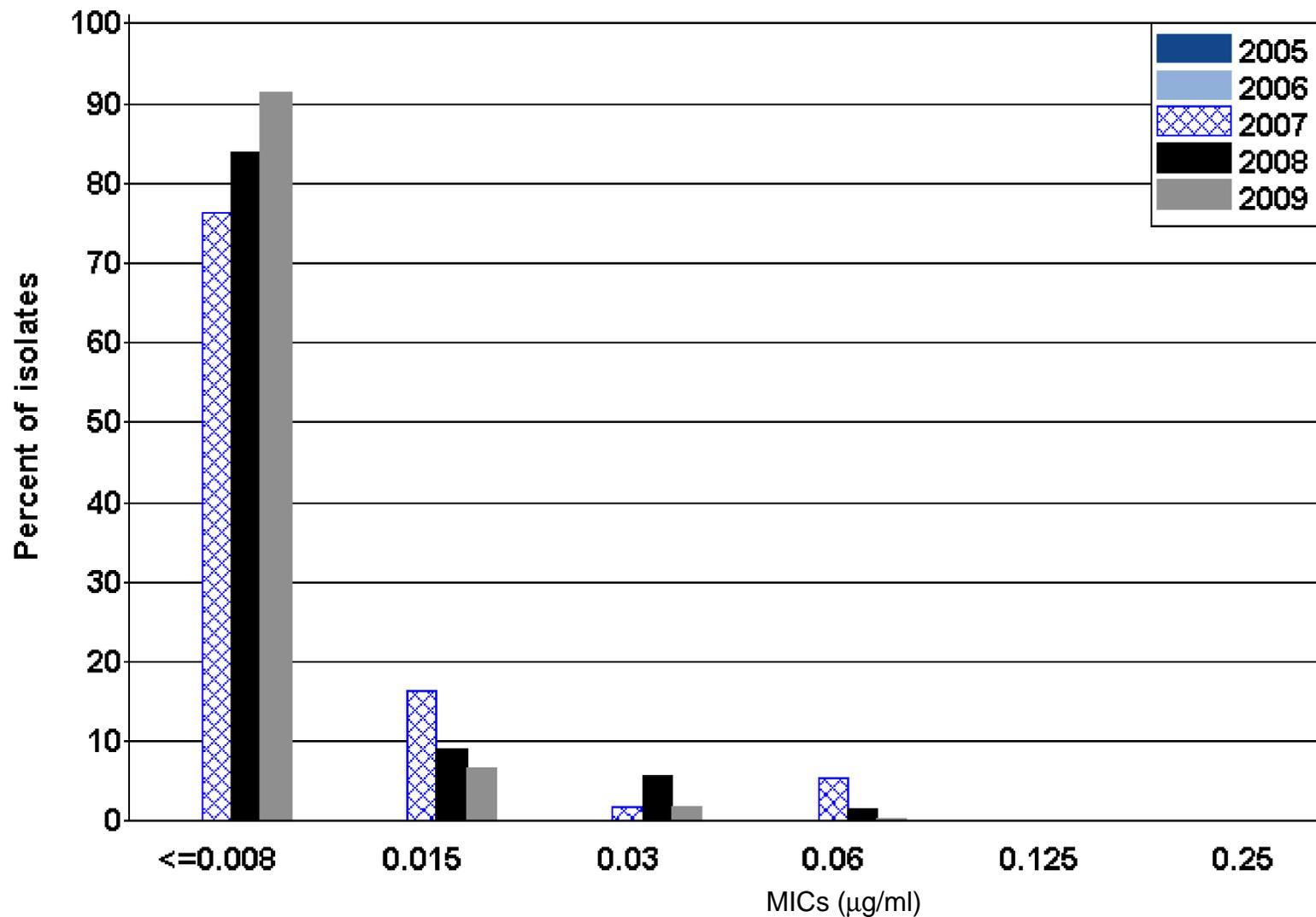
Kansas City, Missouri (N=300)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



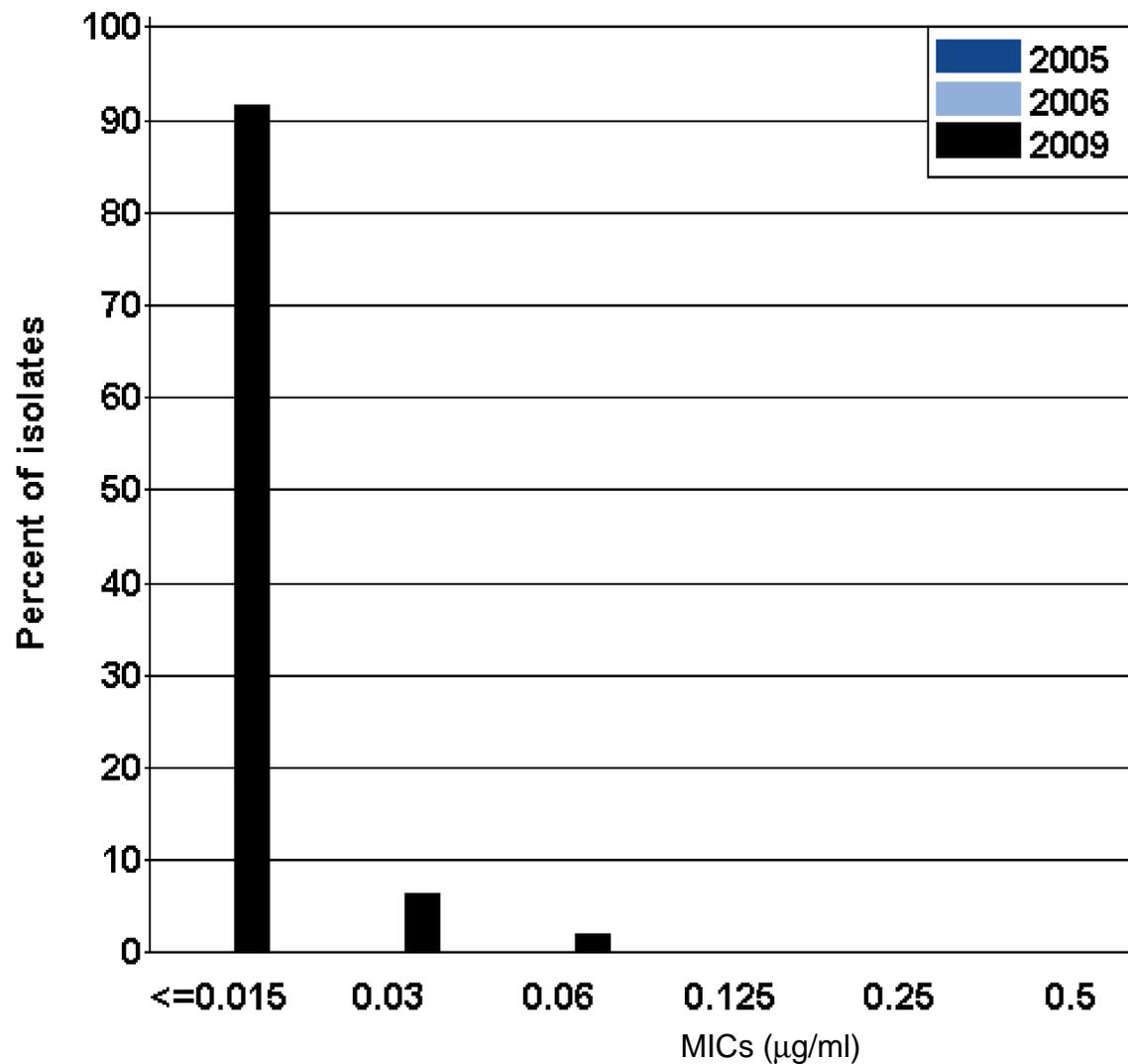
Kansas City, Missouri

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Kansas City, Missouri

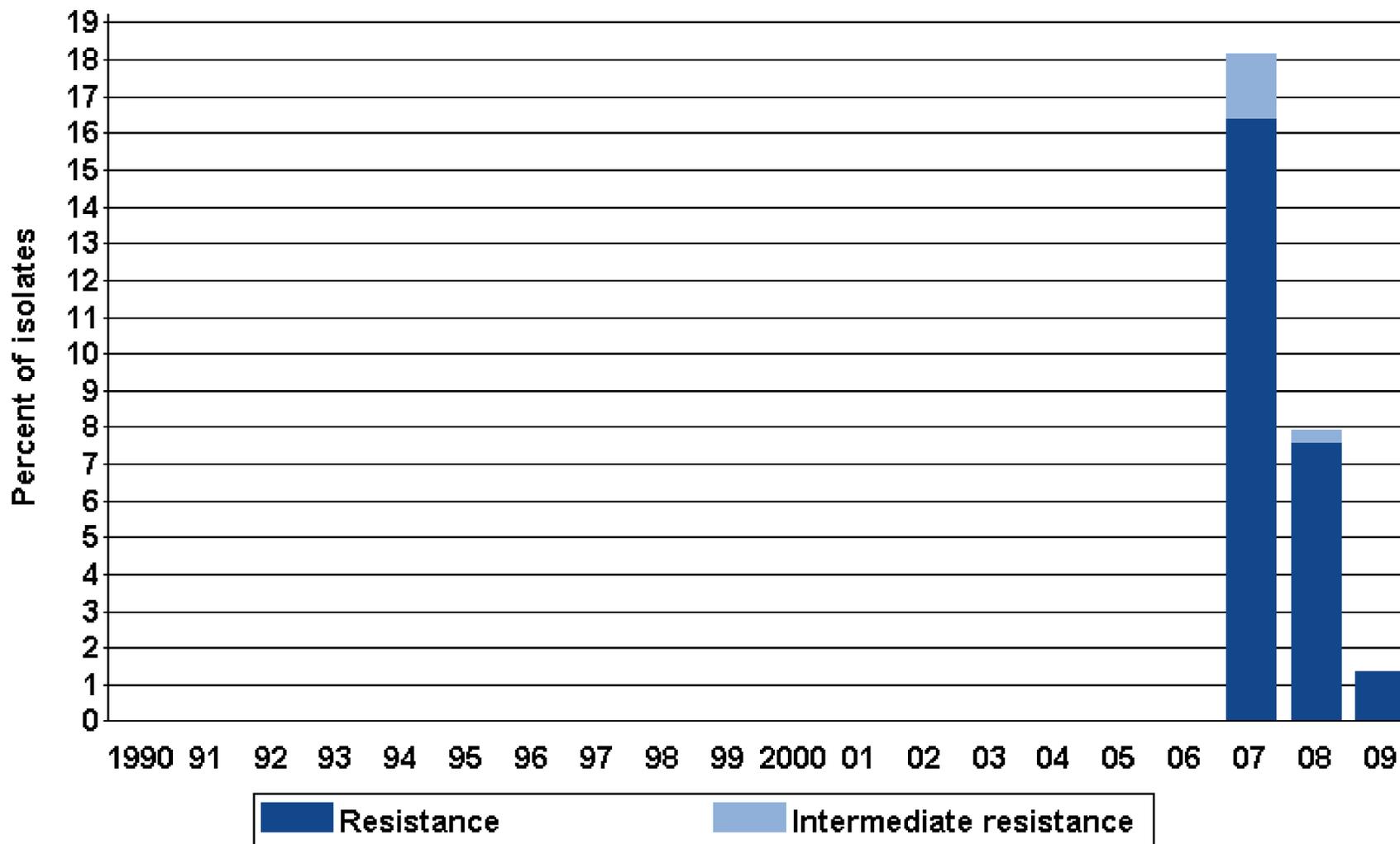
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Kansas City, Missouri

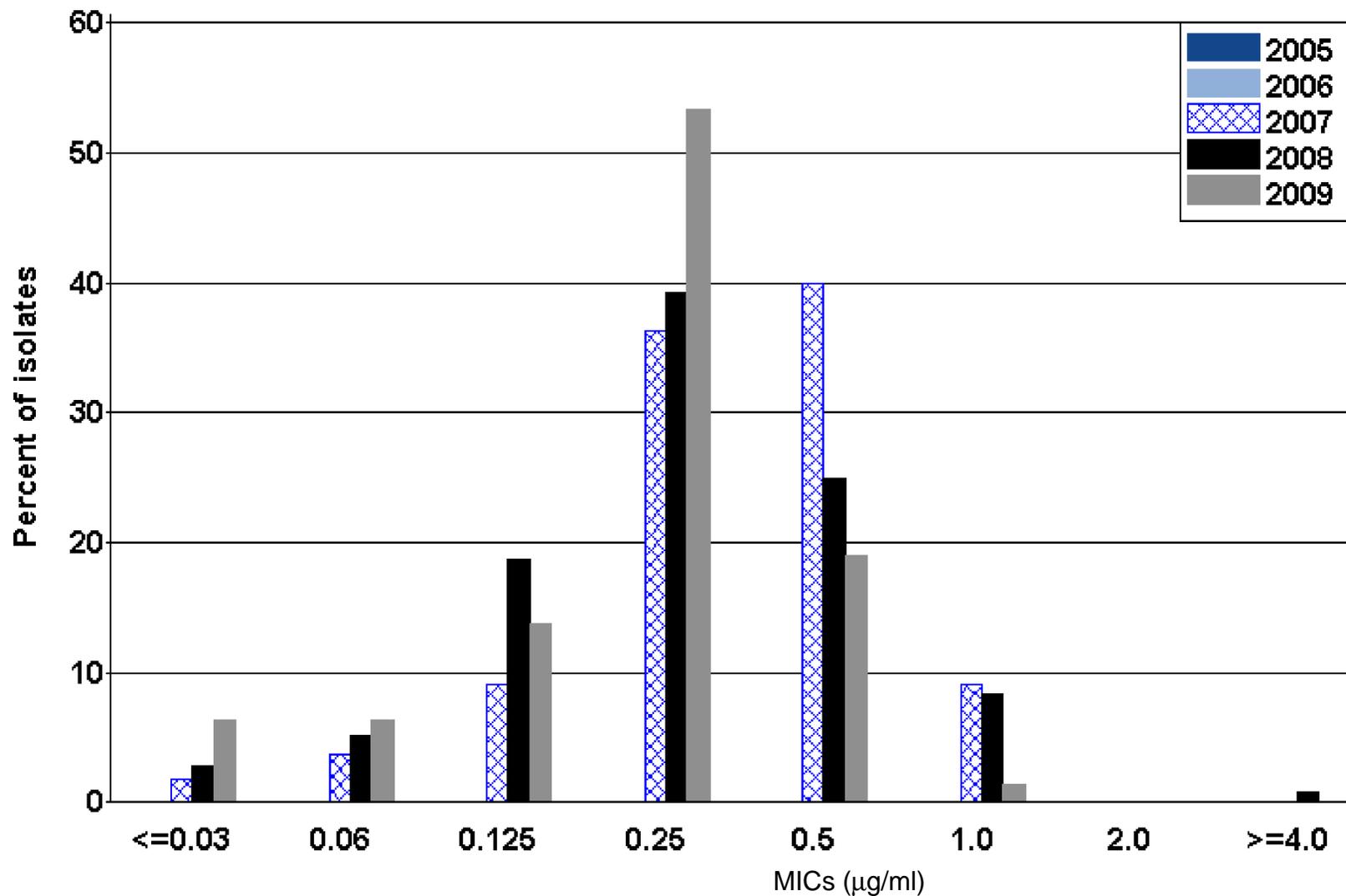
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

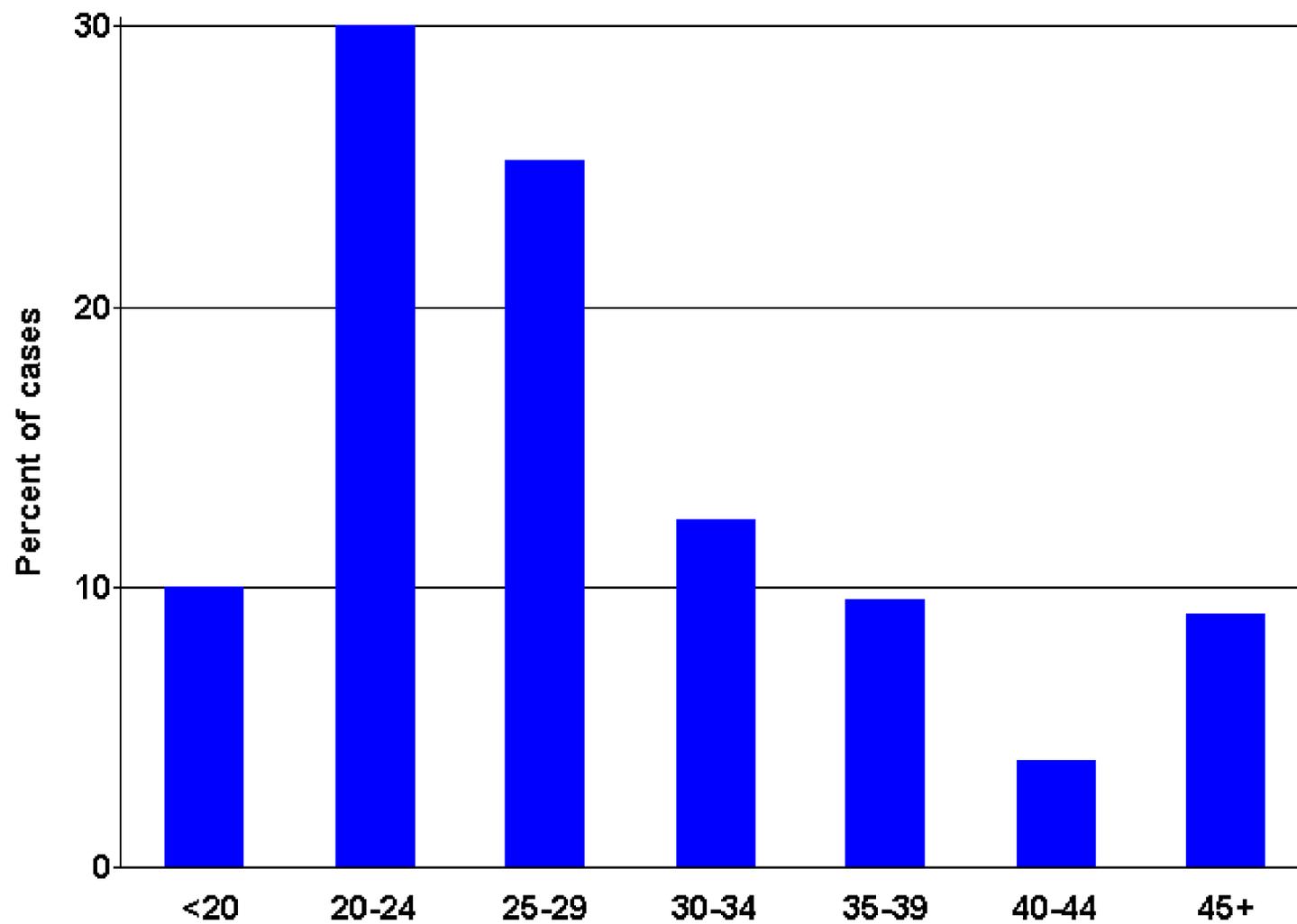
Kansas City, Missouri

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



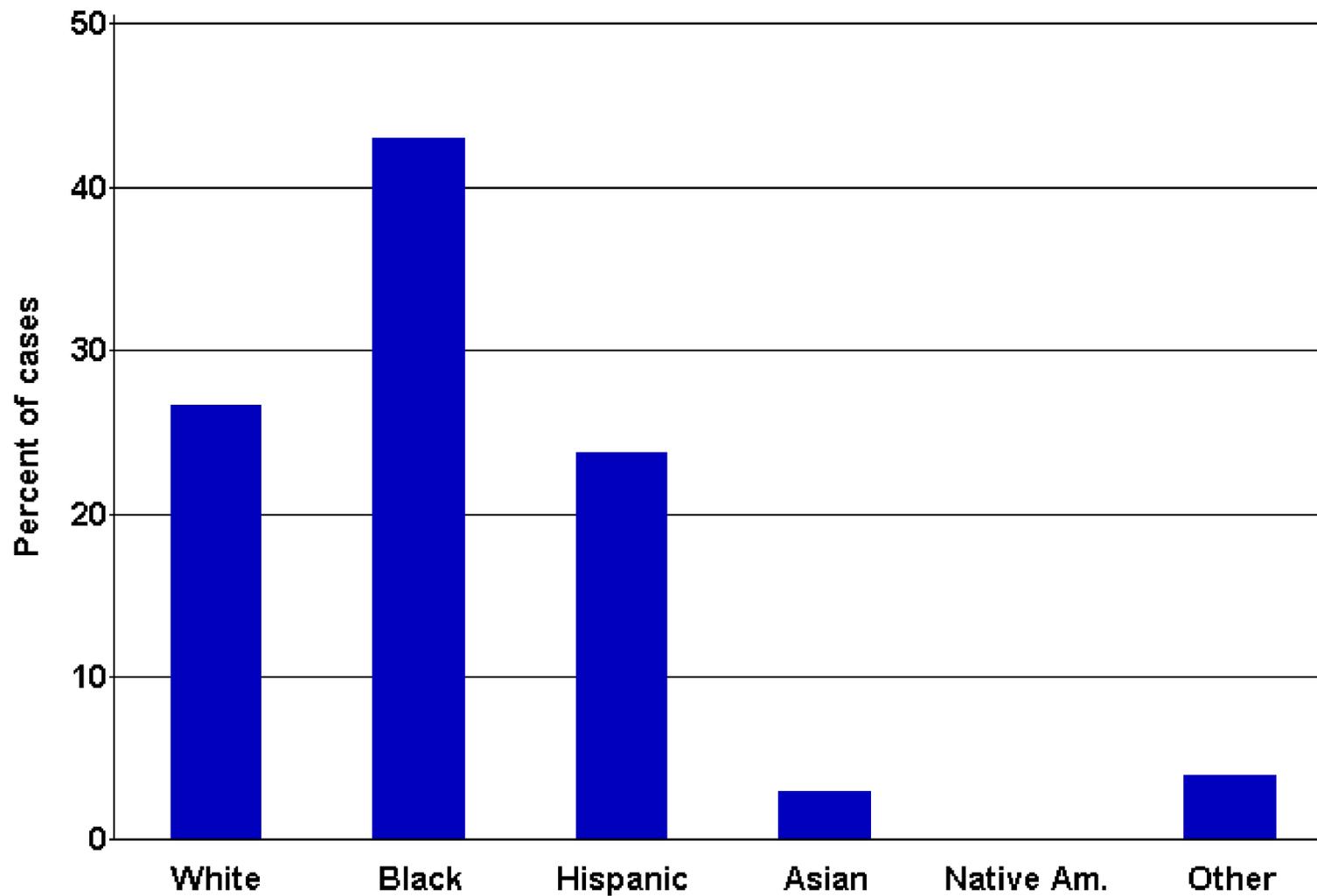
Los Angeles, California (N=210)

Figure A. Age of GISP participants, in years, 2009



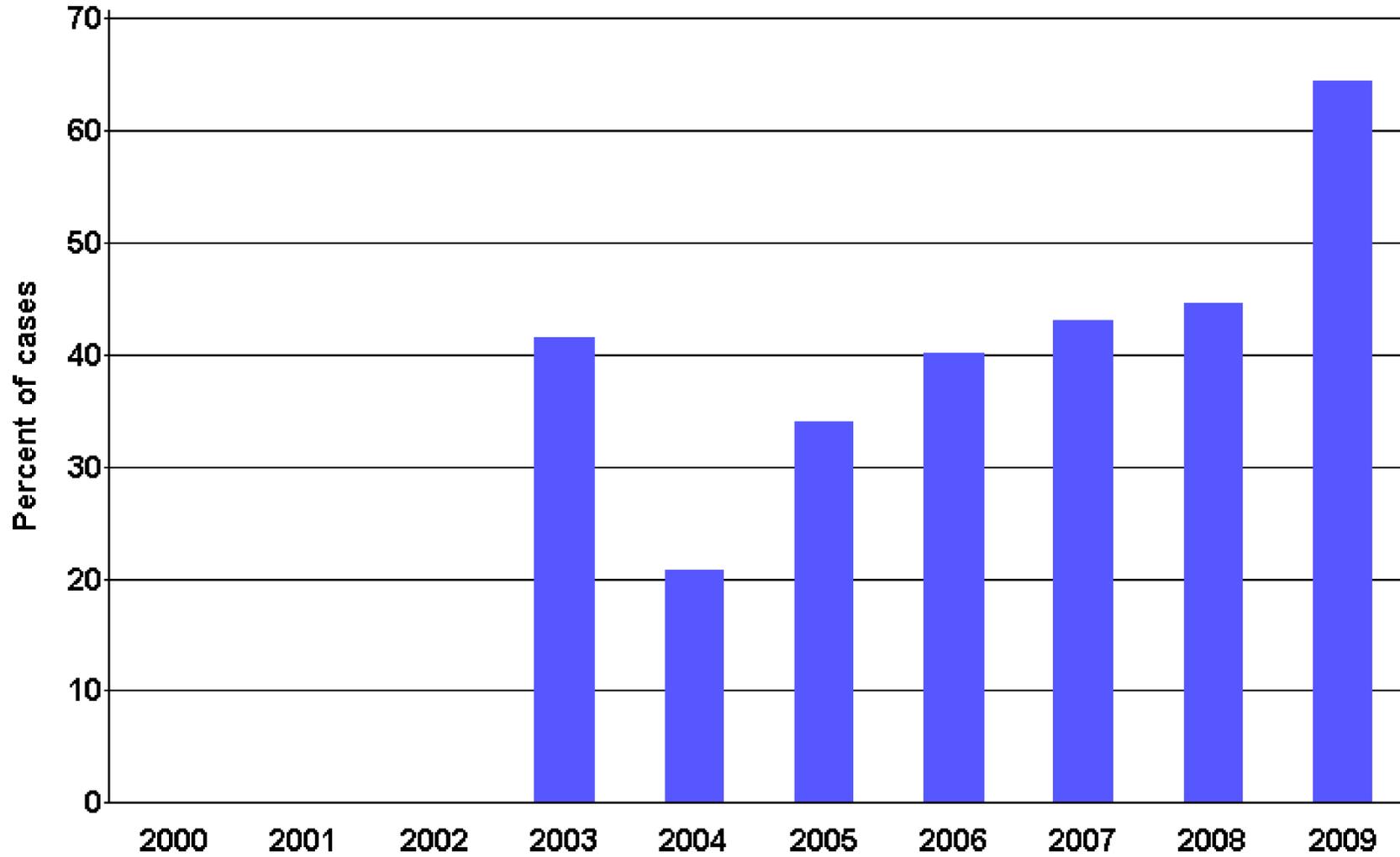
Los Angeles, California (N=210)

Figure B. Race/ethnicity of GISP participants, 2009



Los Angeles, California

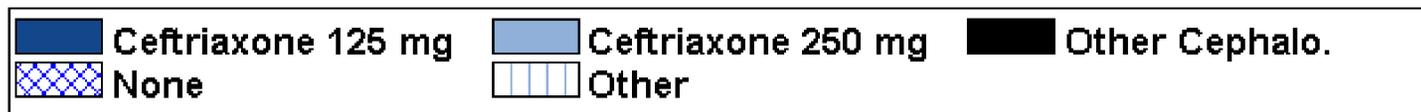
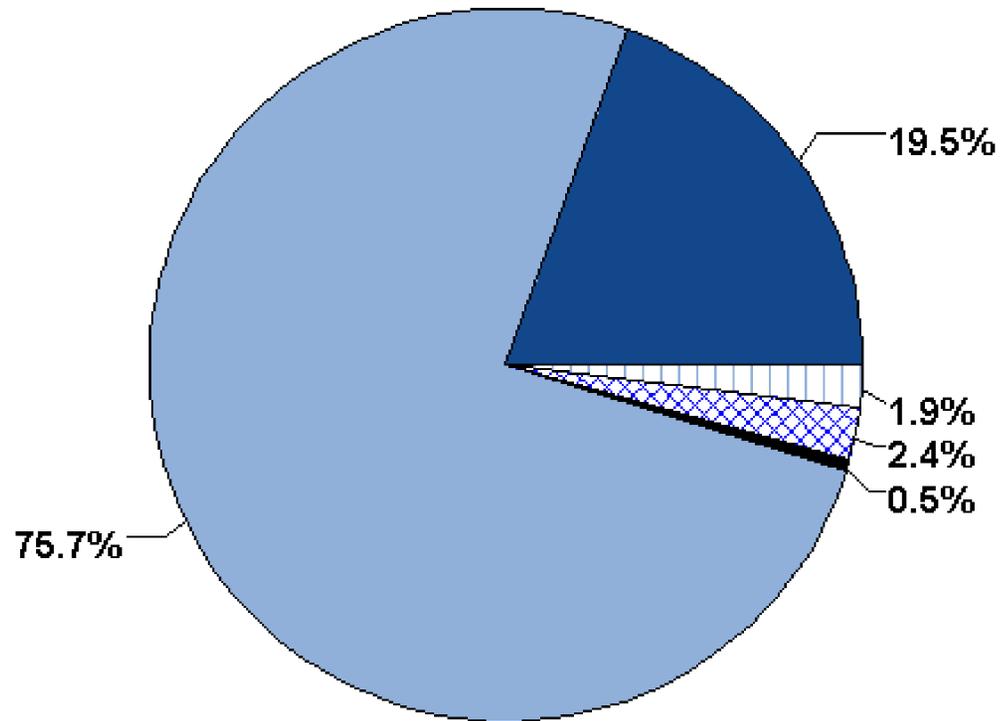
Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009*



*Note: Site participated in GISP from 2003-2009.

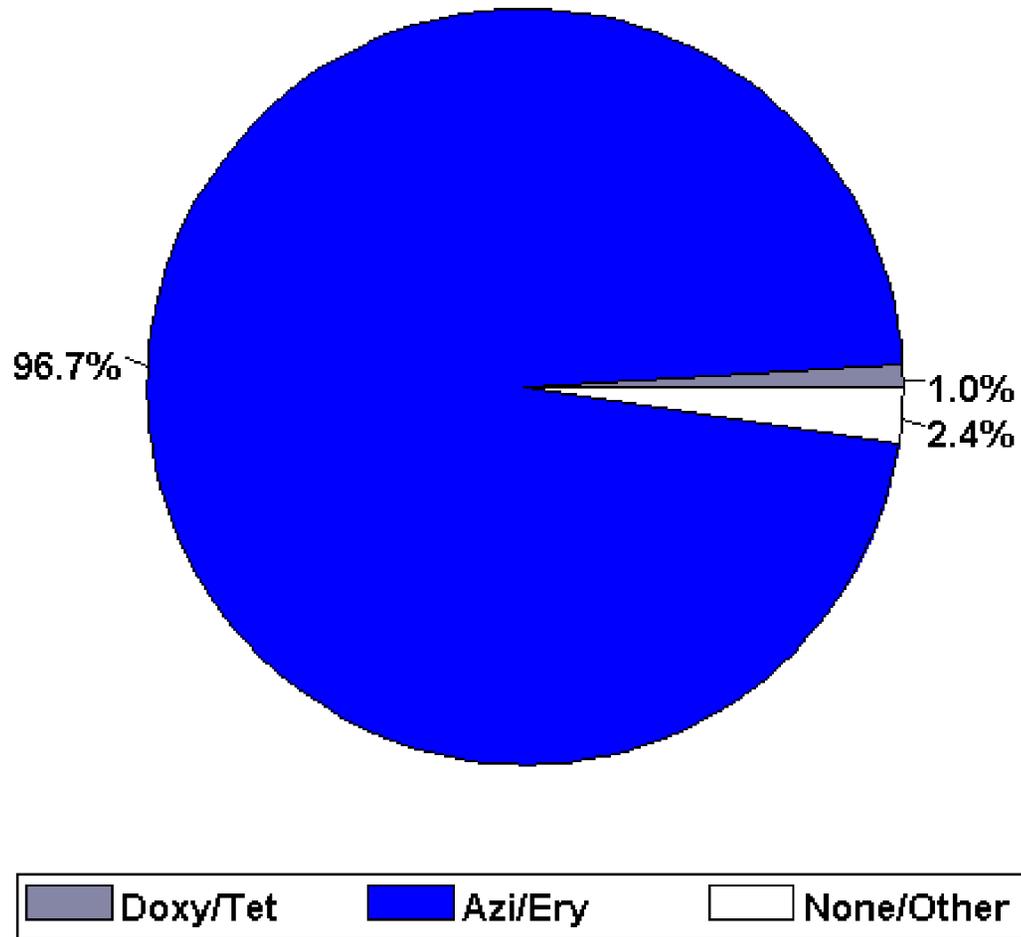
Los Angeles, California (N=210)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



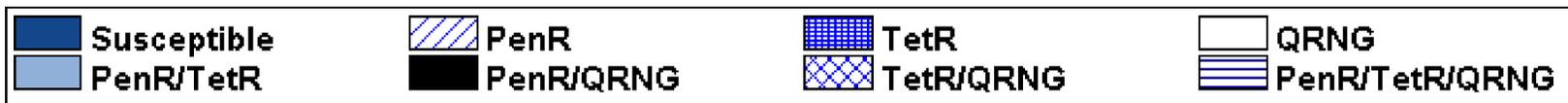
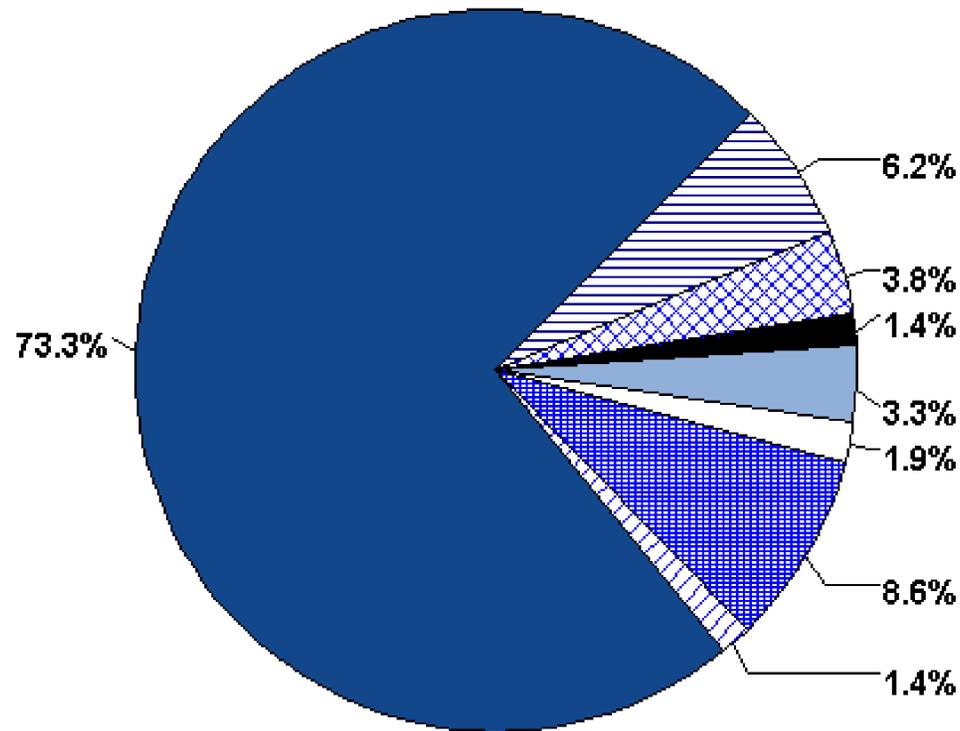
Los Angeles, California (N=210)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



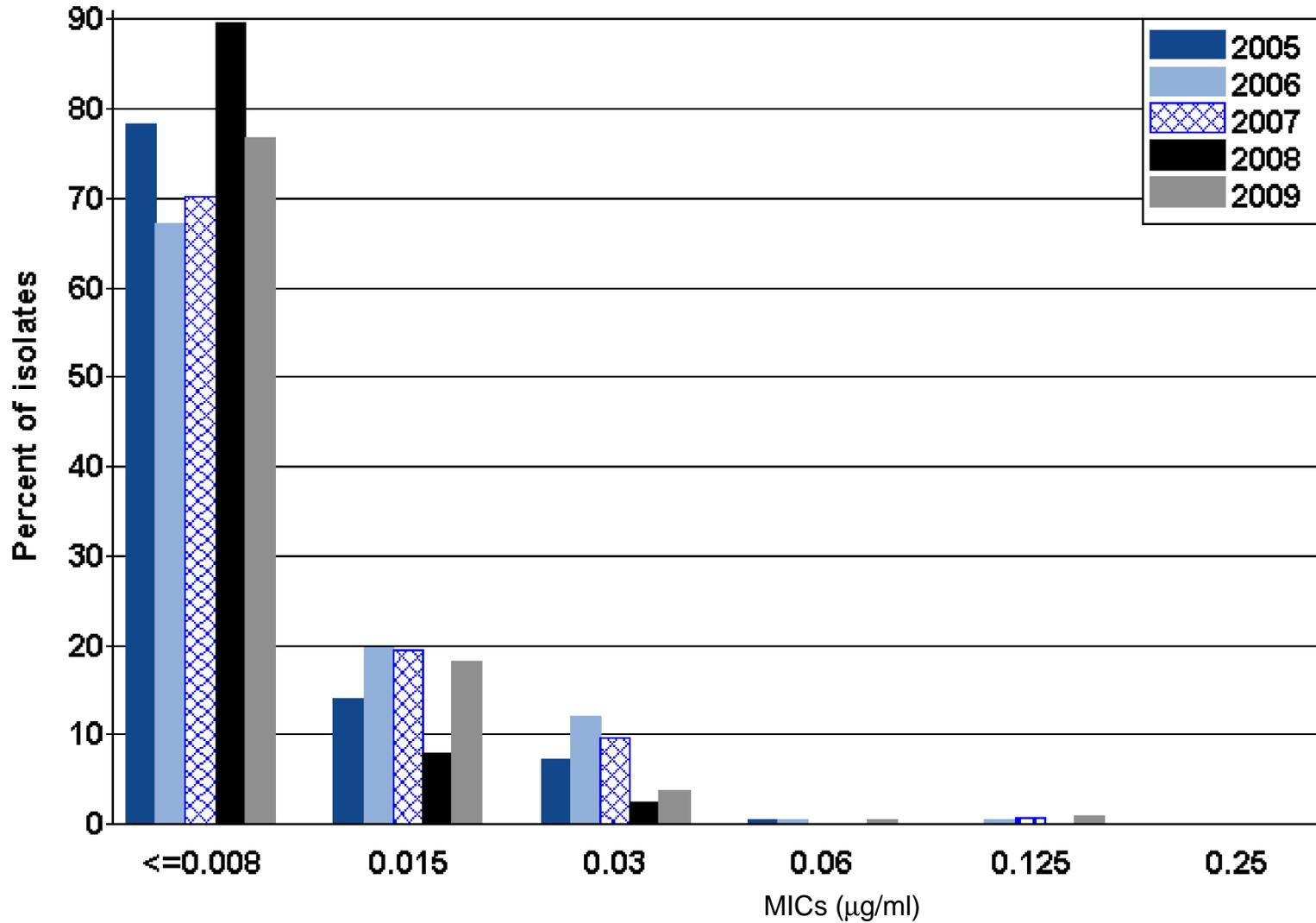
Los Angeles, California (N=210)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



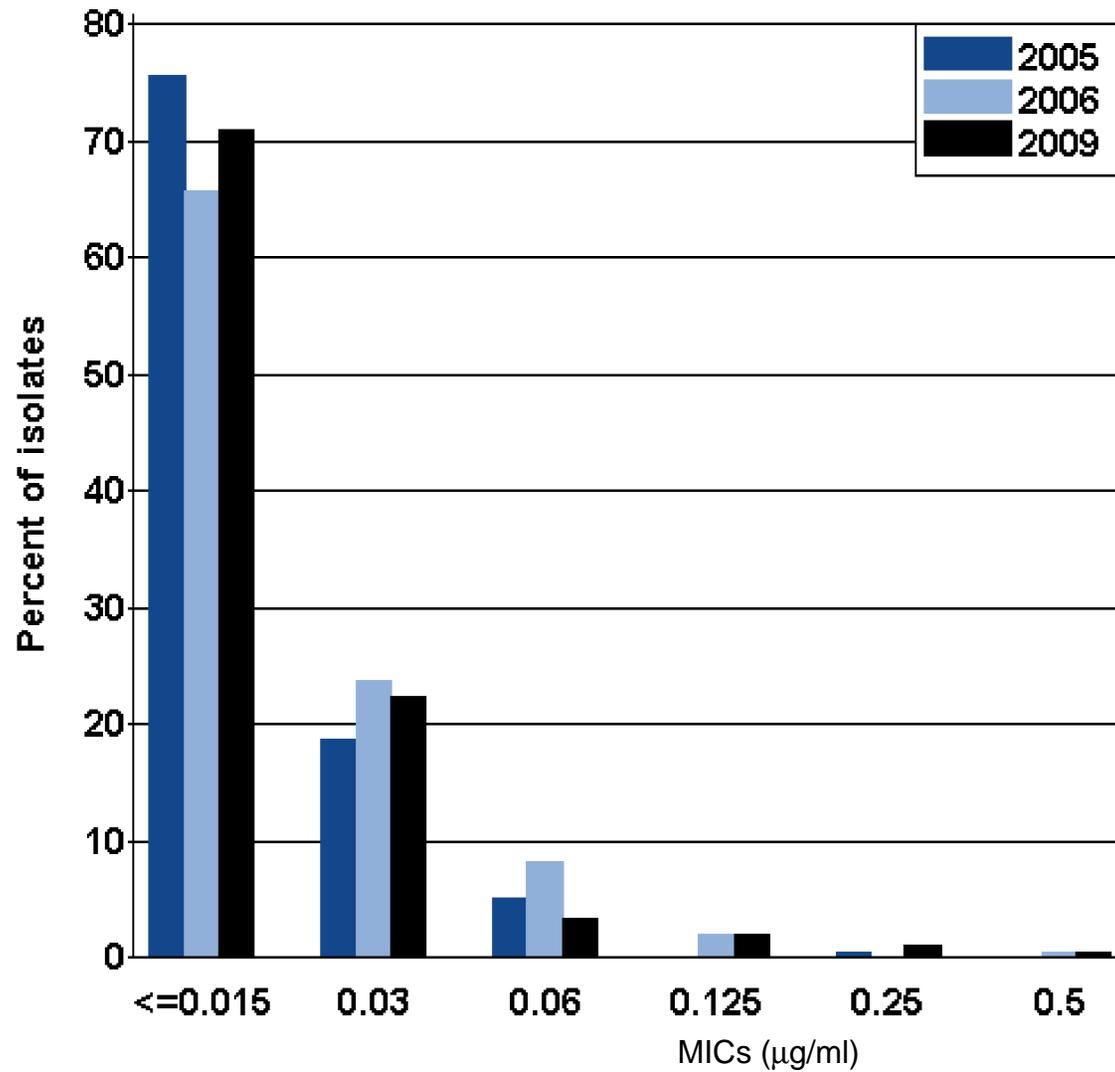
Los Angeles, California

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Los Angeles, California

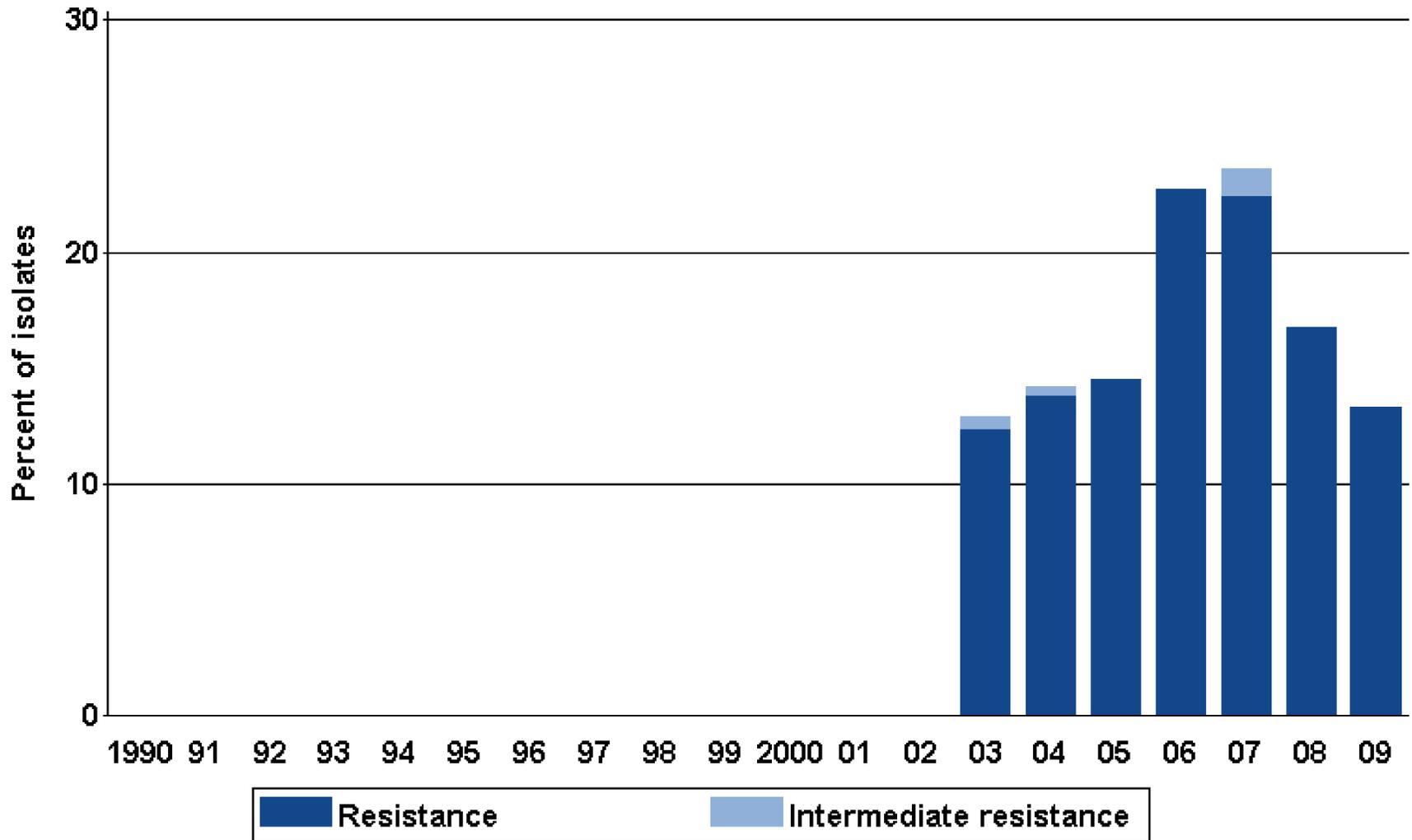
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Los Angeles, California

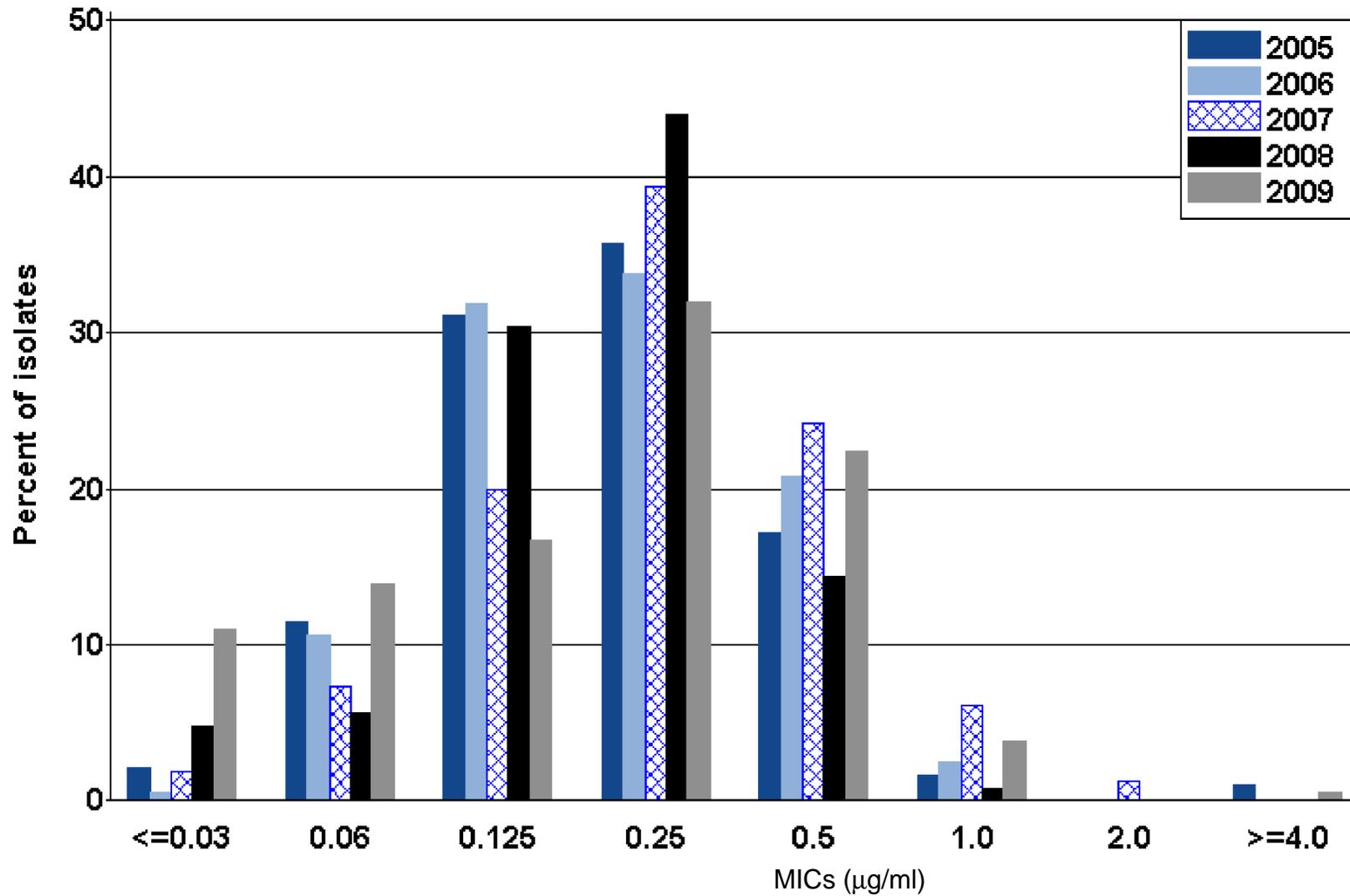
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

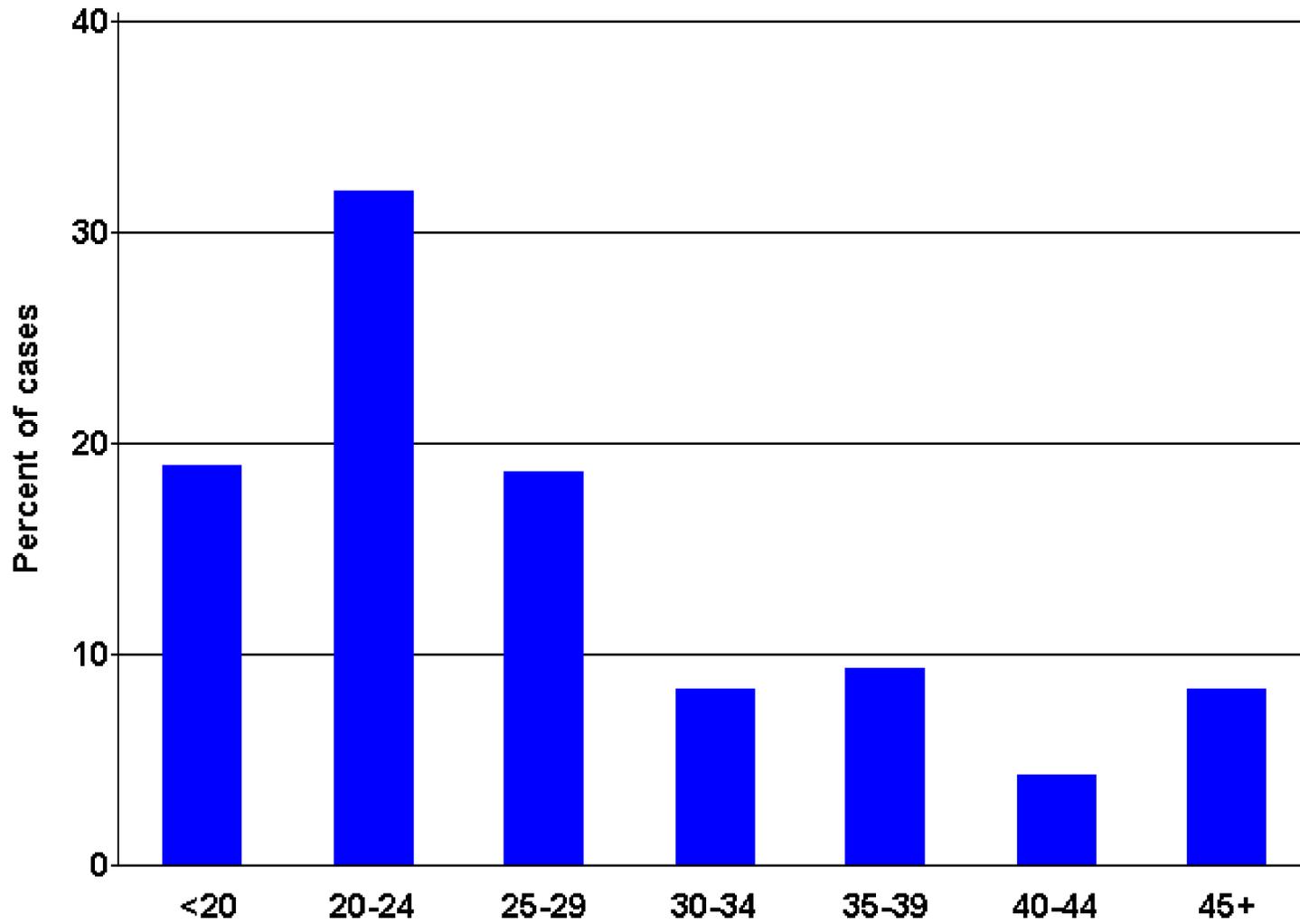
Los Angeles, California

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



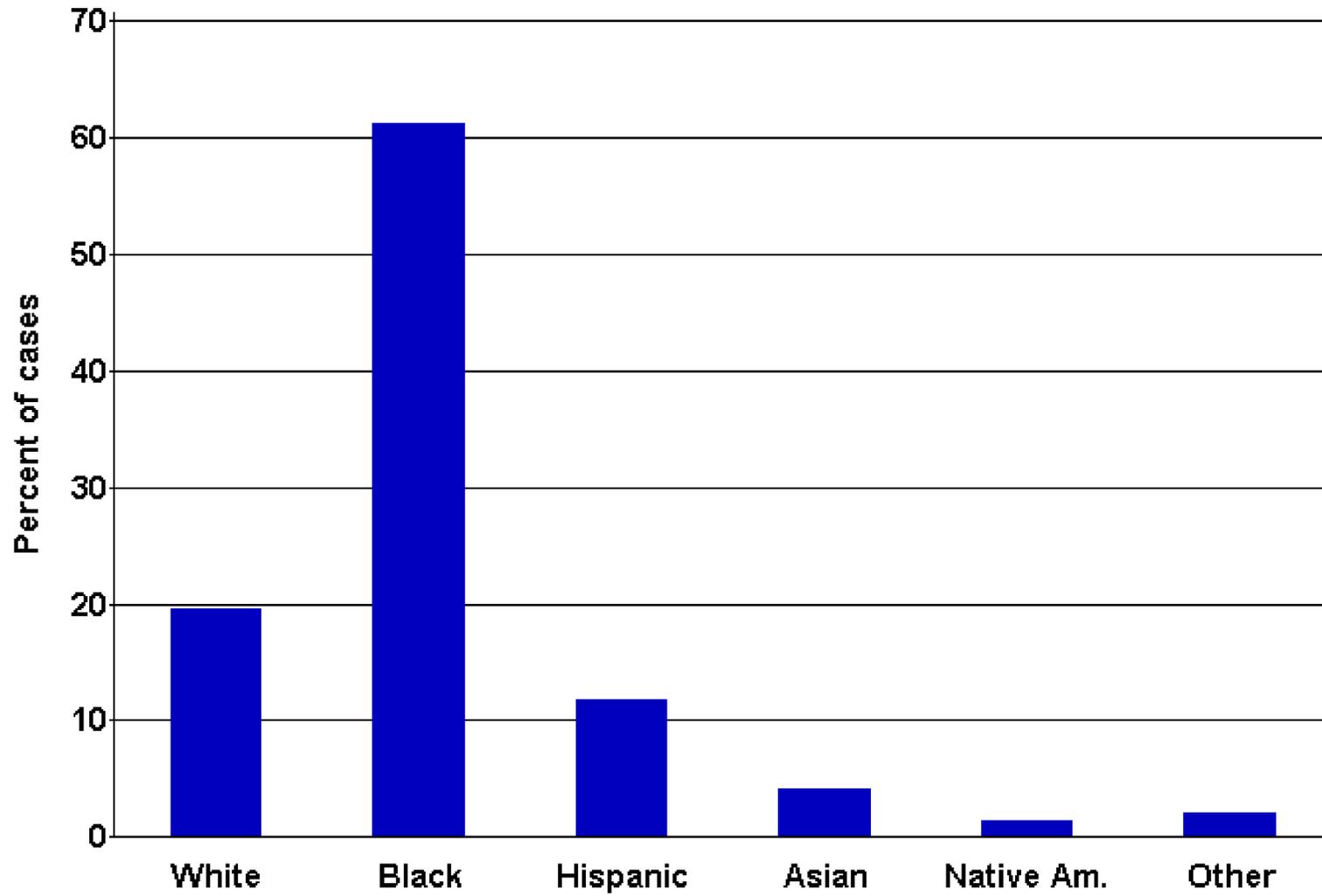
Las Vegas, Nevada (N=300)

Figure A. Age of GISP participants, in years, 2009



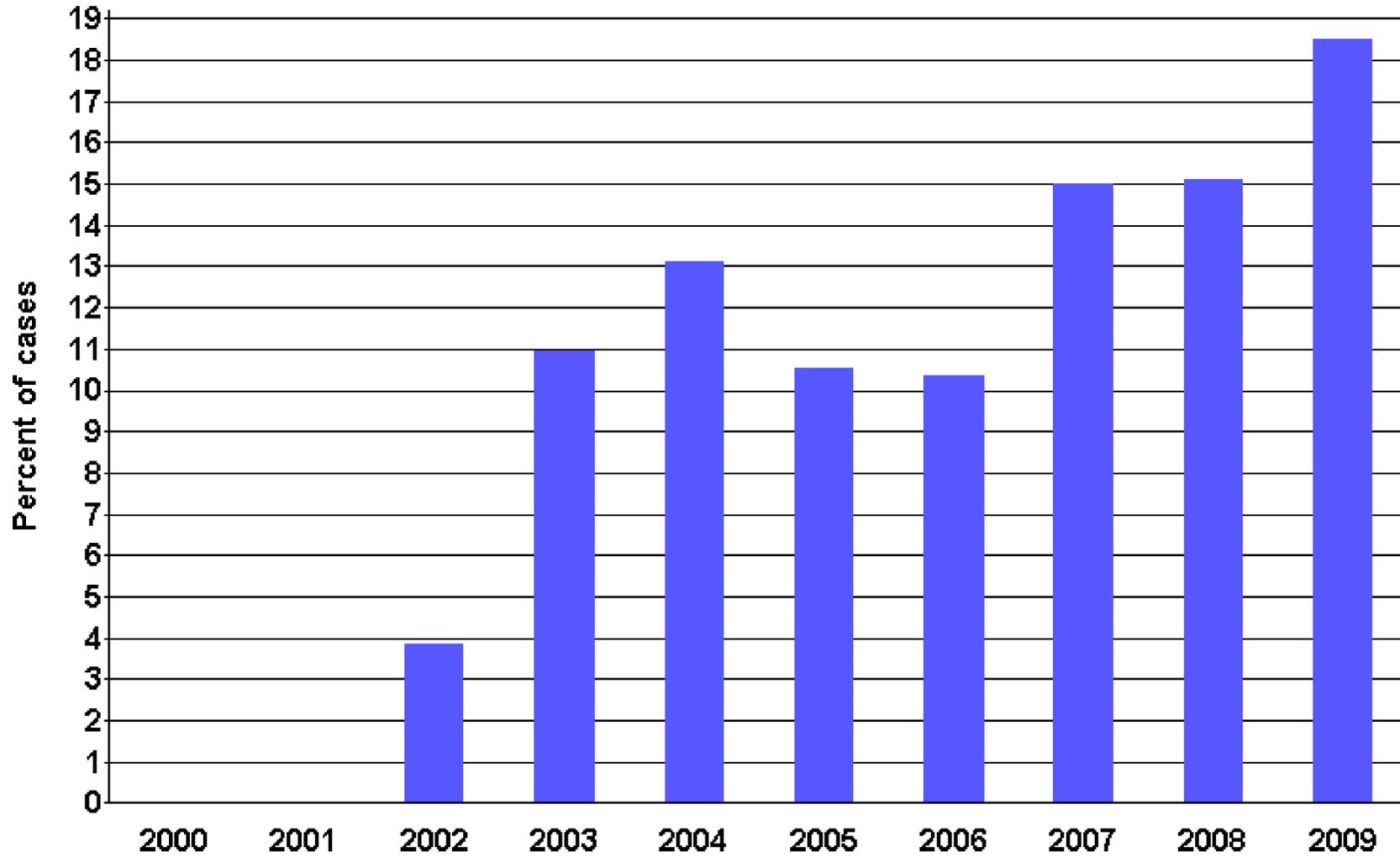
Las Vegas, Nevada (N=300)

Figure B. Race/ethnicity of GISP participants, 2009



Las Vegas, Nevada

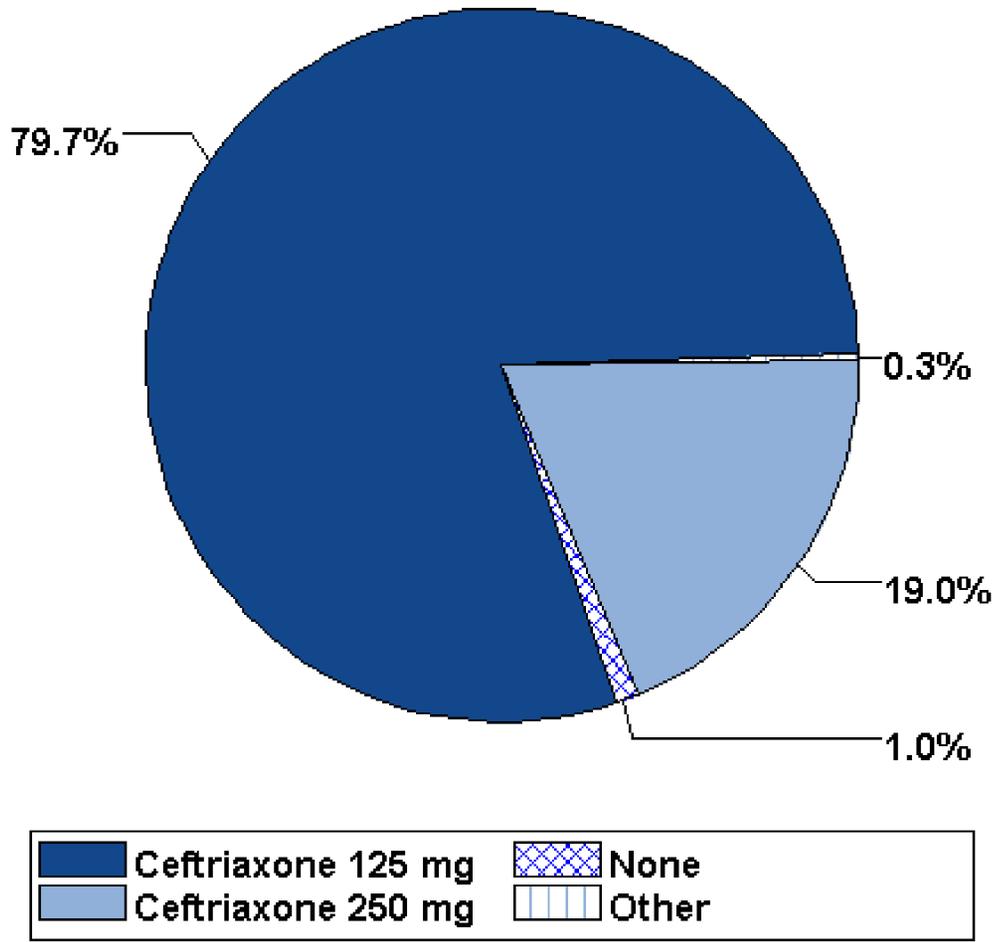
Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009*



*Note: Site participated in GISP from 2002-2009.

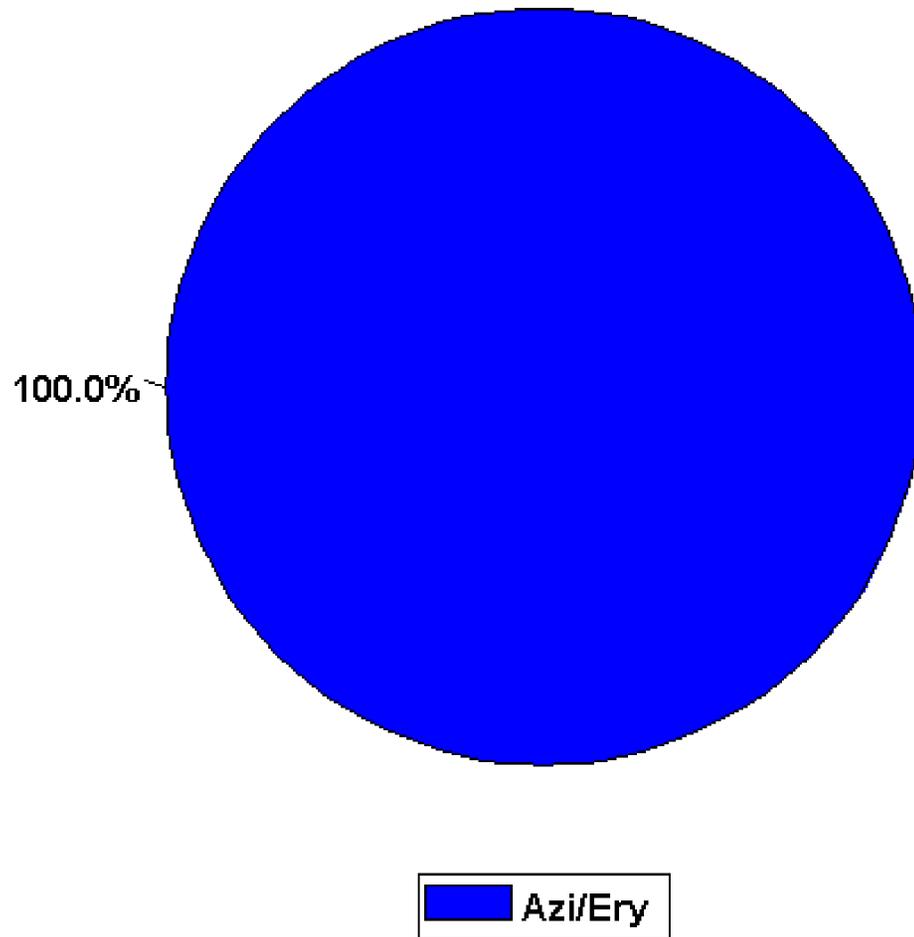
Las Vegas, Nevada (N=300)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



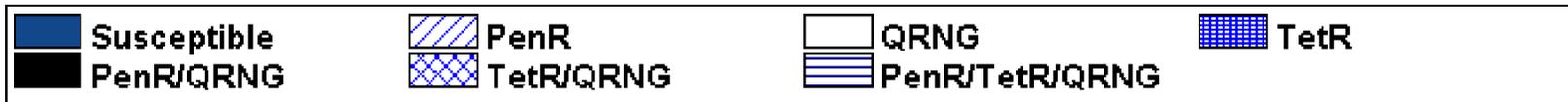
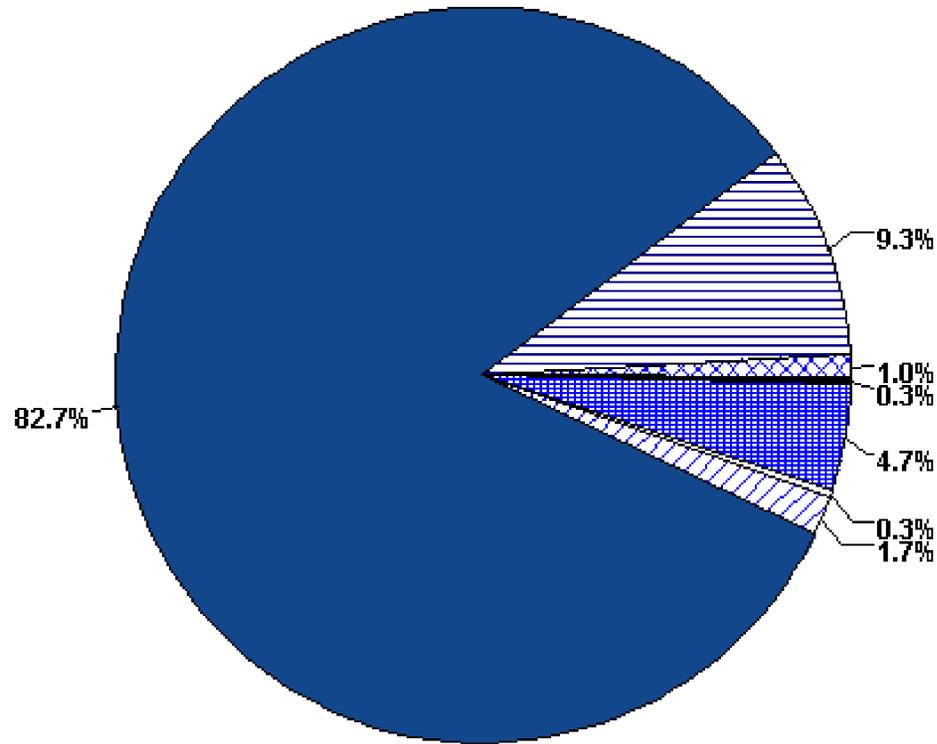
Las Vegas, Nevada (N=300)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



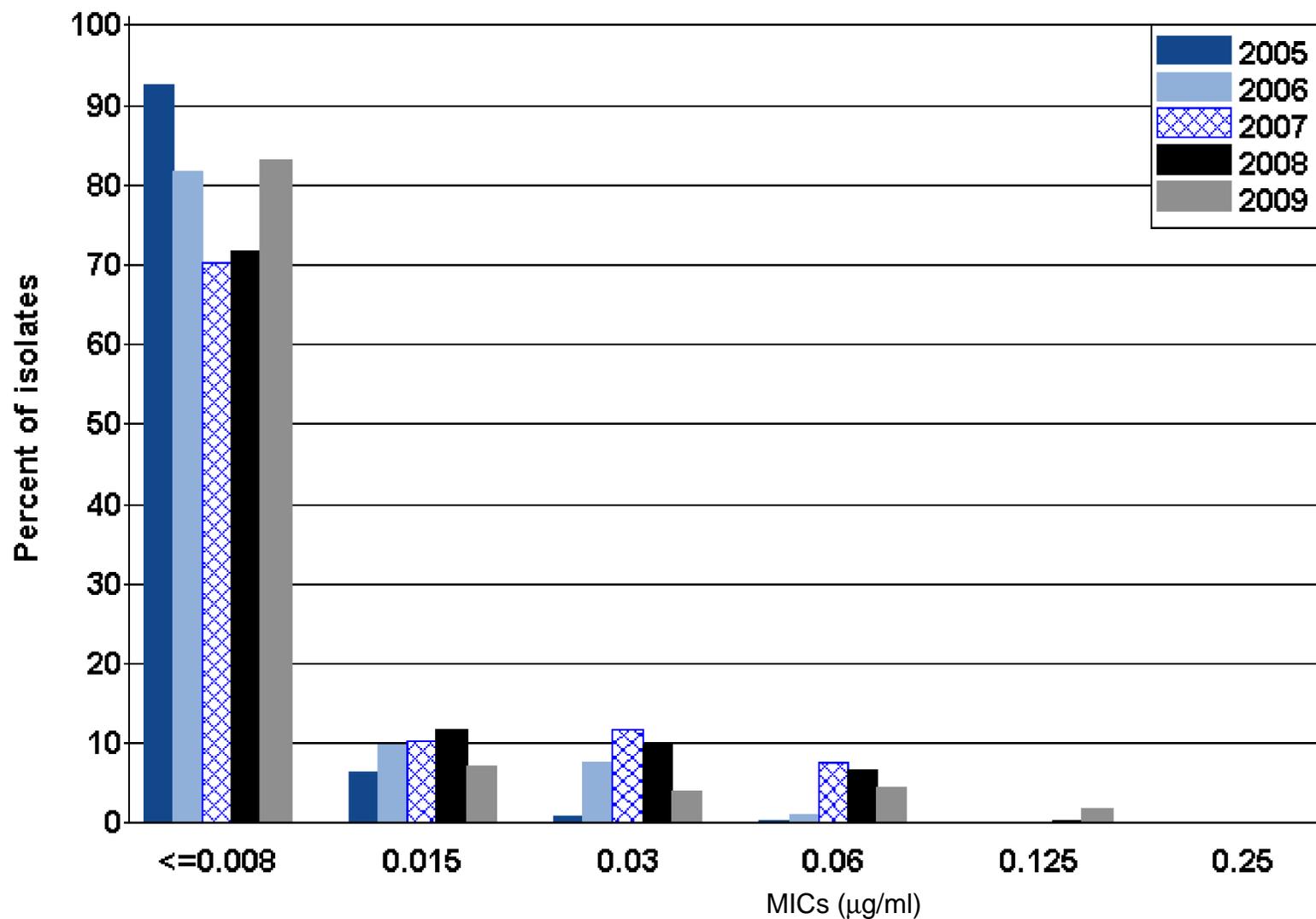
Las Vegas, Nevada (N=300)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



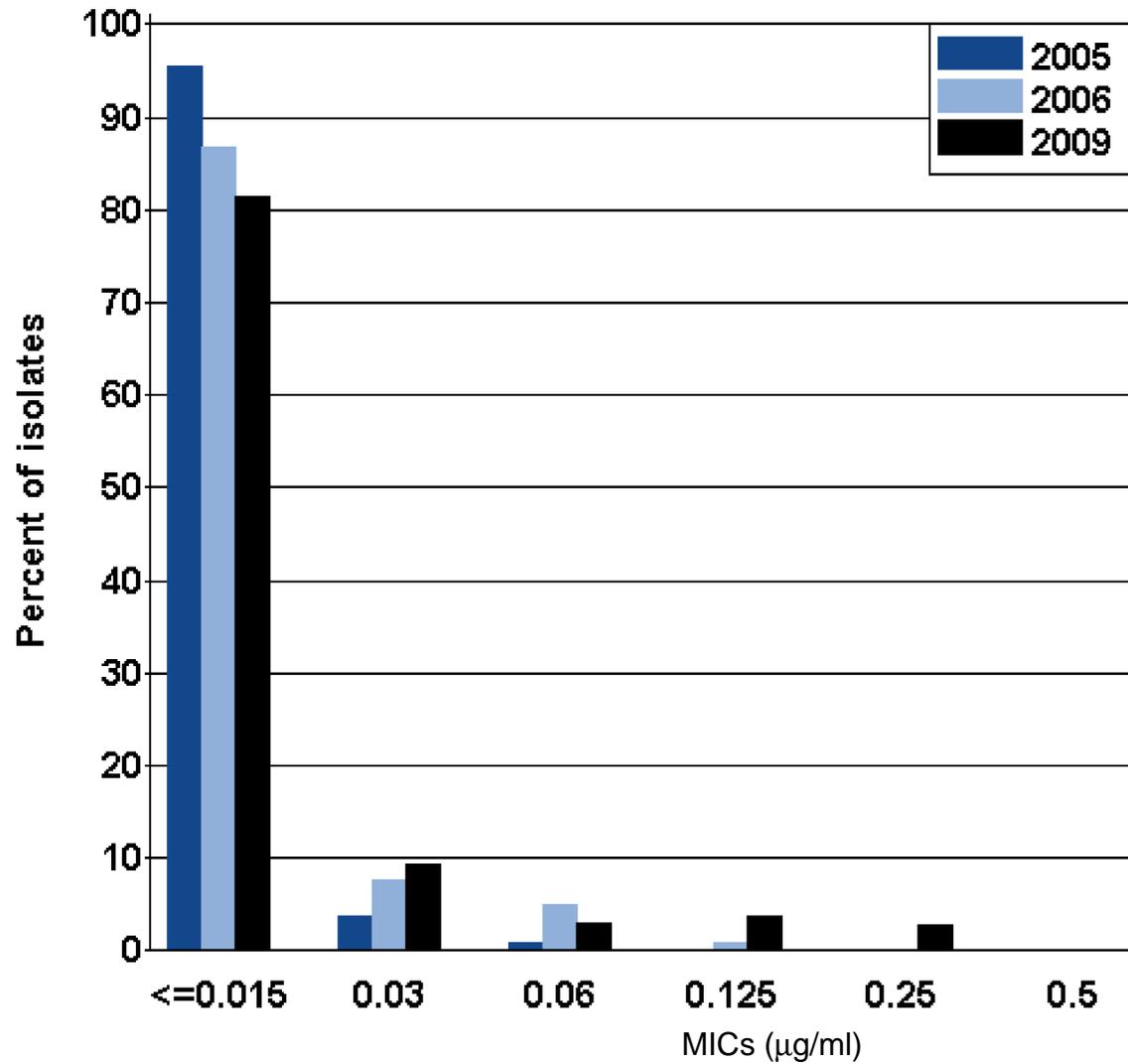
Las Vegas, Nevada

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Las Vegas, Nevada

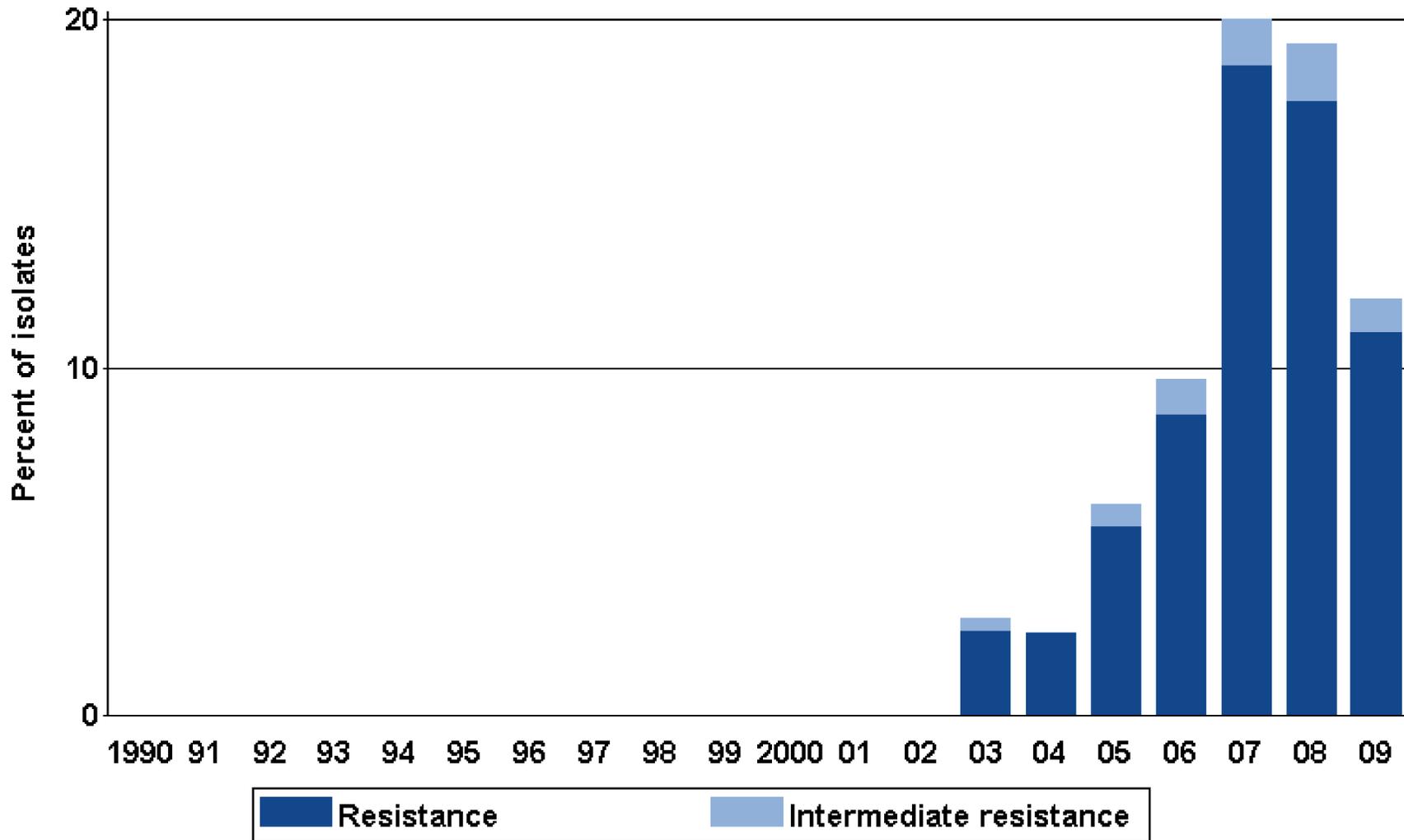
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Las Vegas, Nevada

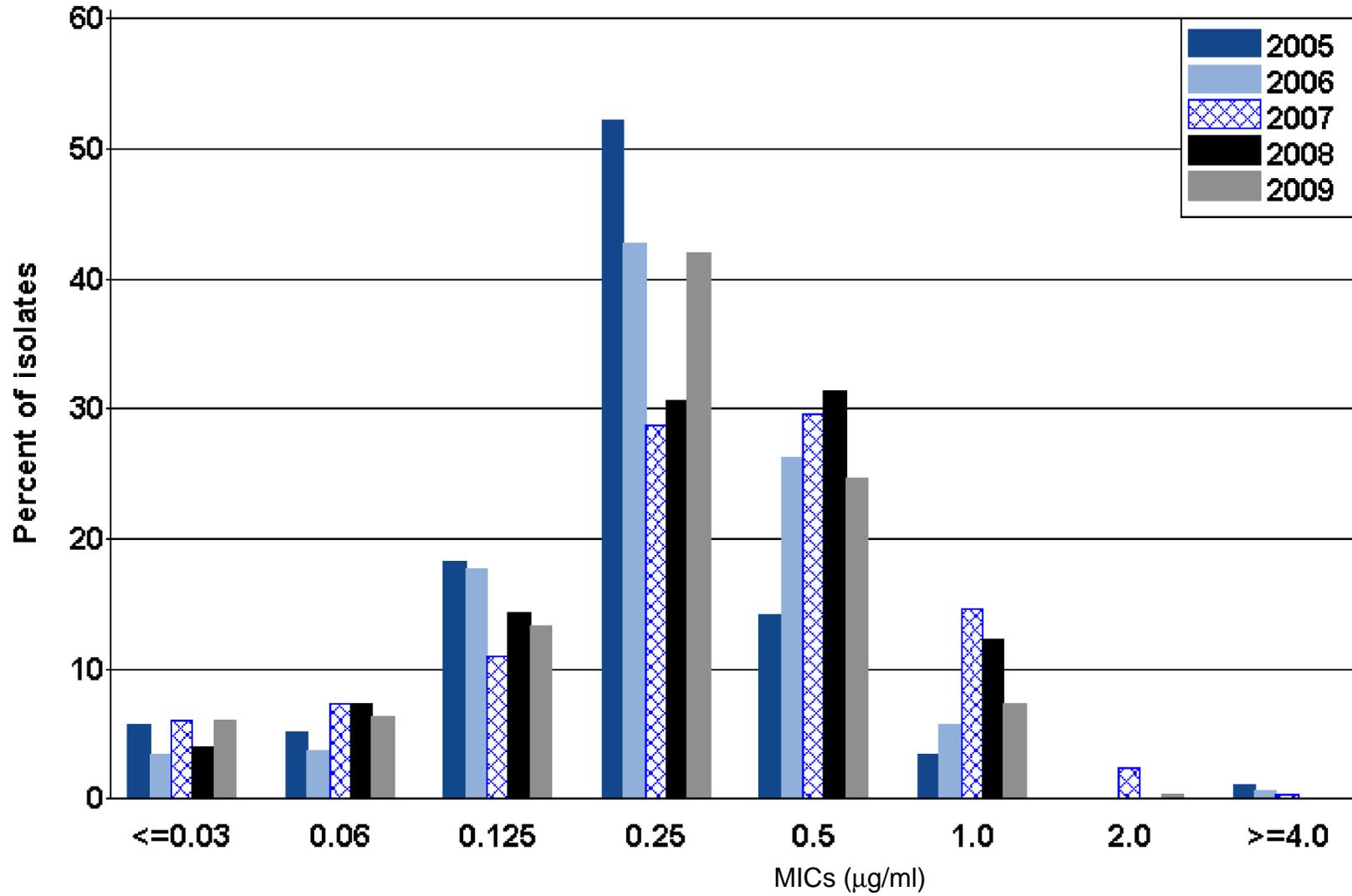
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

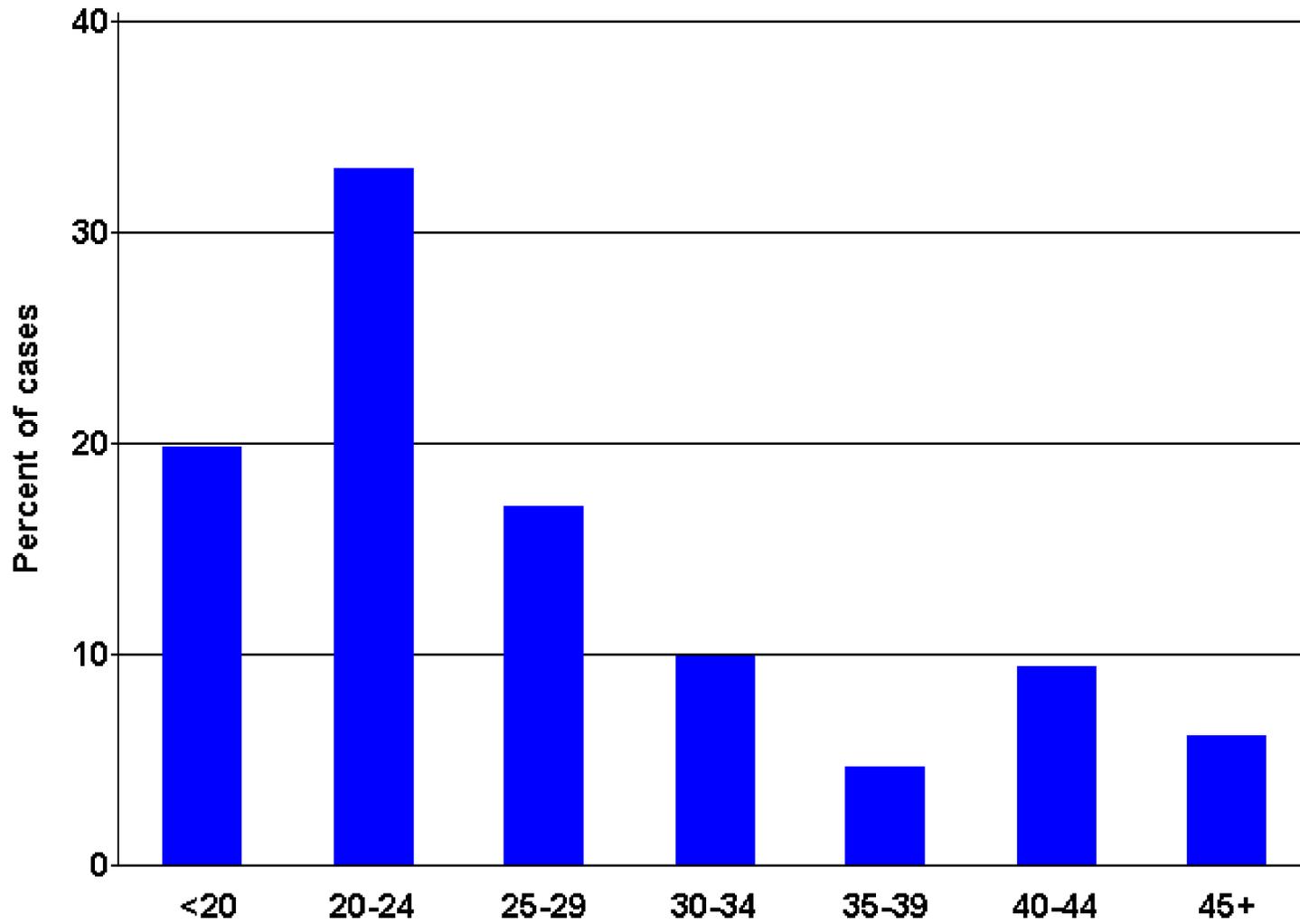
Las Vegas, Nevada

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



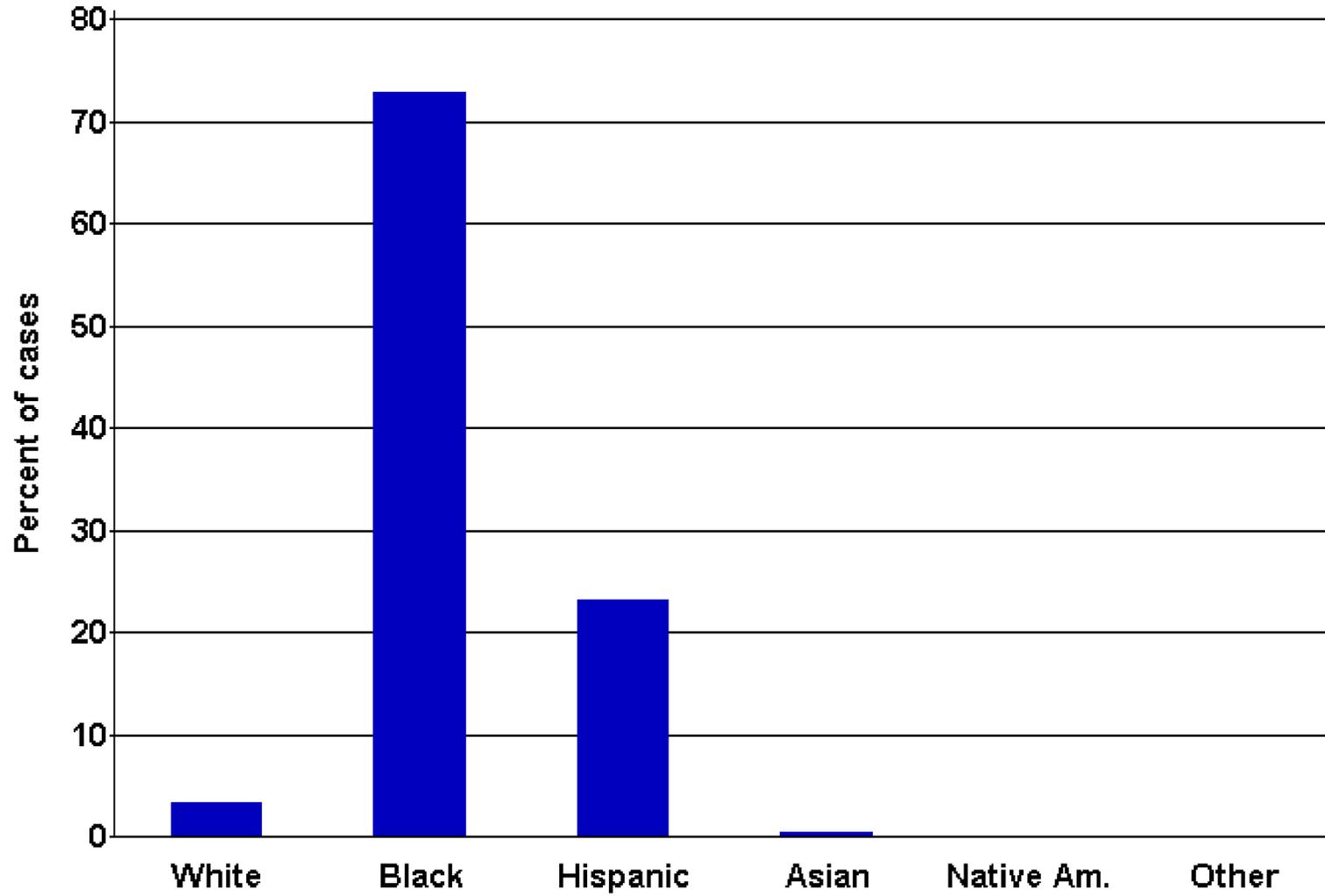
Miami, Florida (N=219)

Figure A. Age of GISP participants, in years, 2009



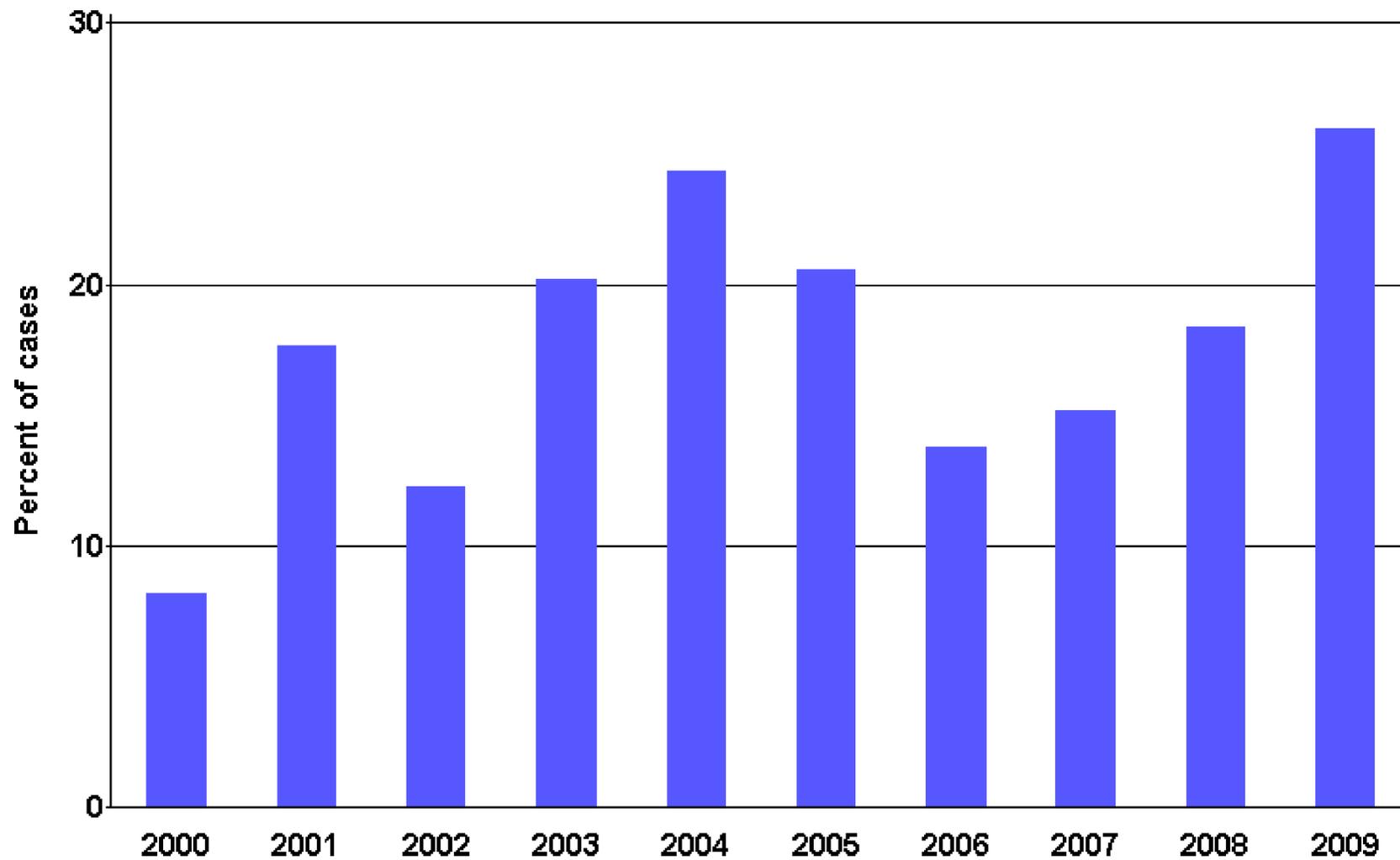
Miami, Florida (N=219)

Figure B. Race/ethnicity of GISP participants, 2009



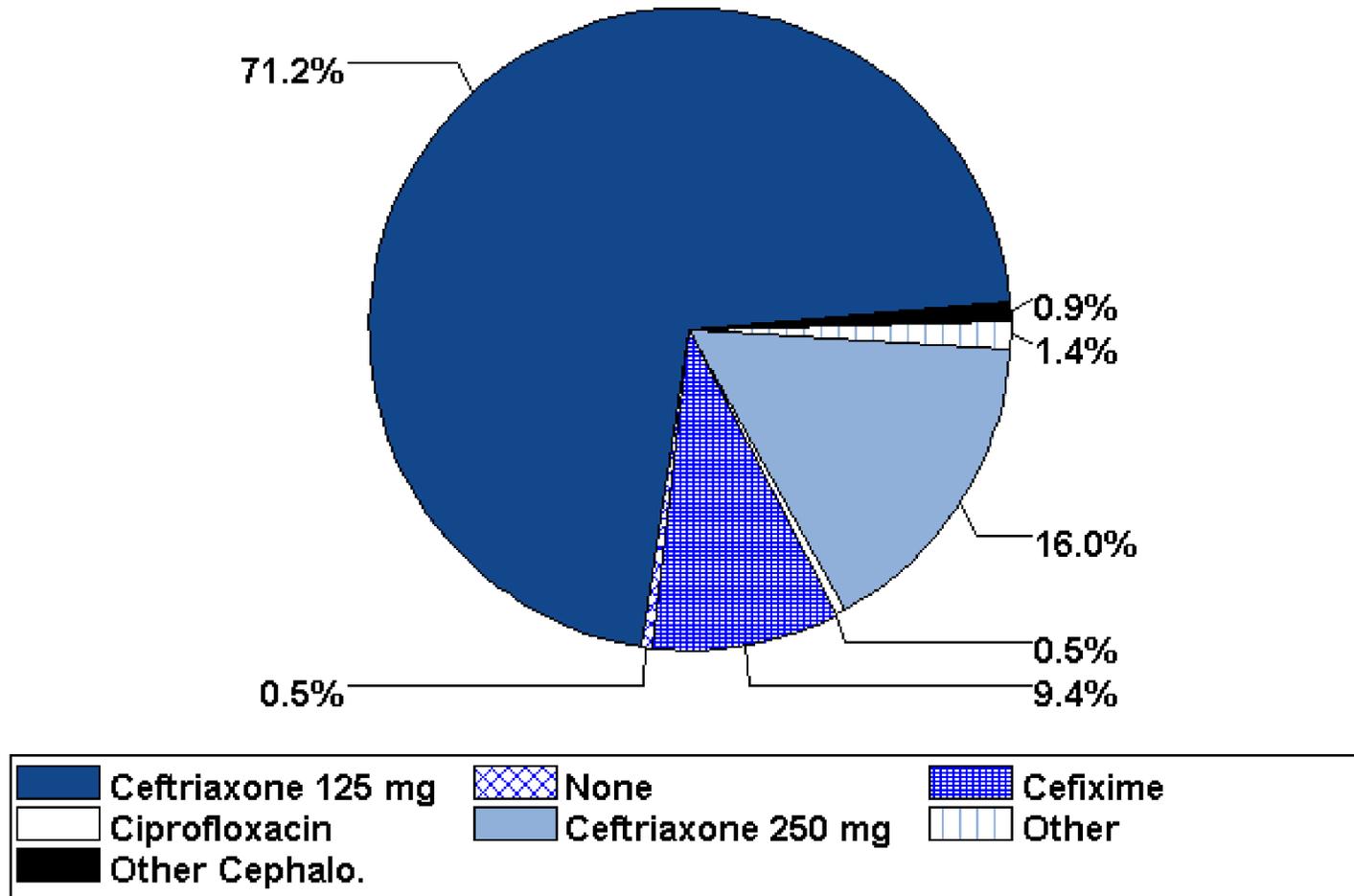
Miami, Florida

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



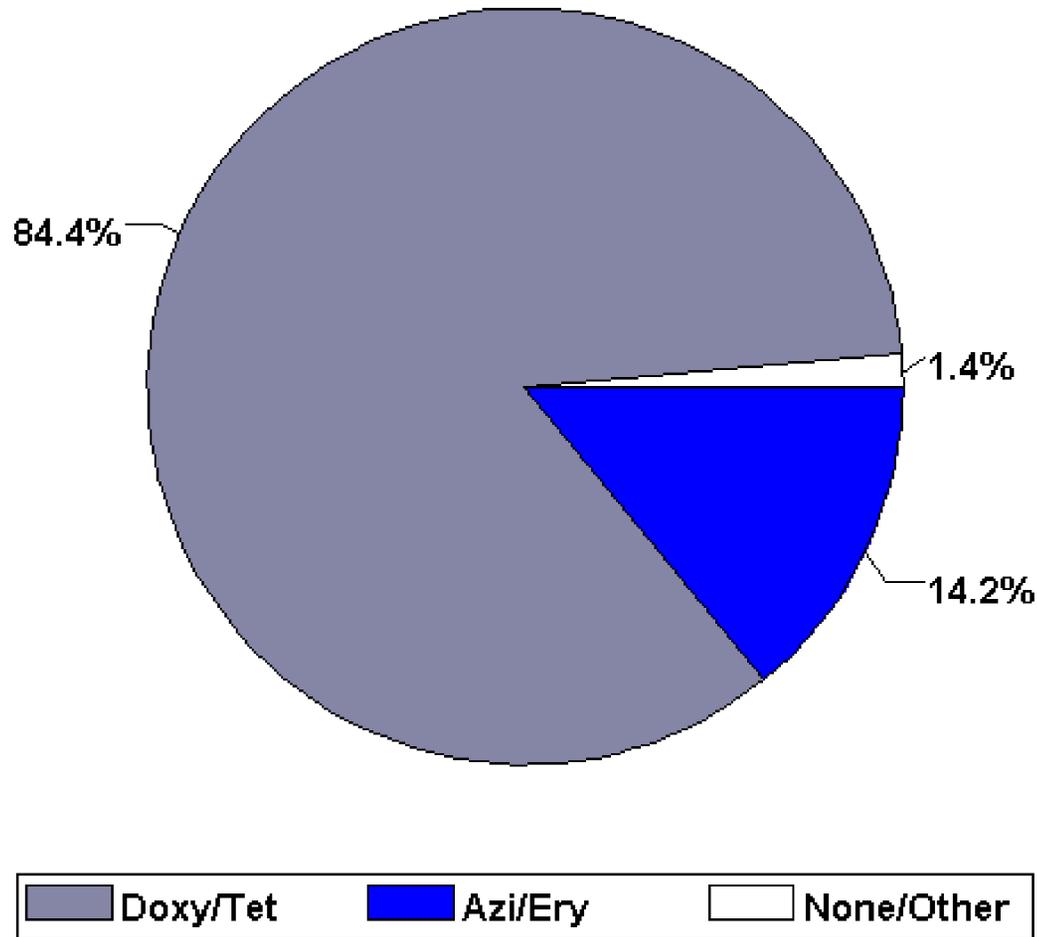
Miami, Florida (N=219)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



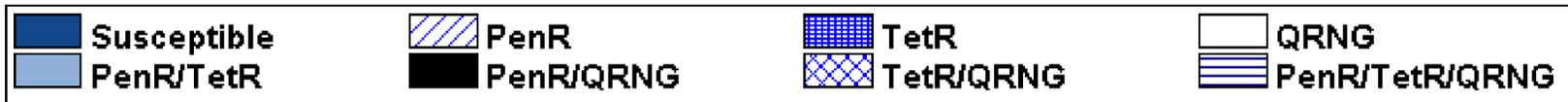
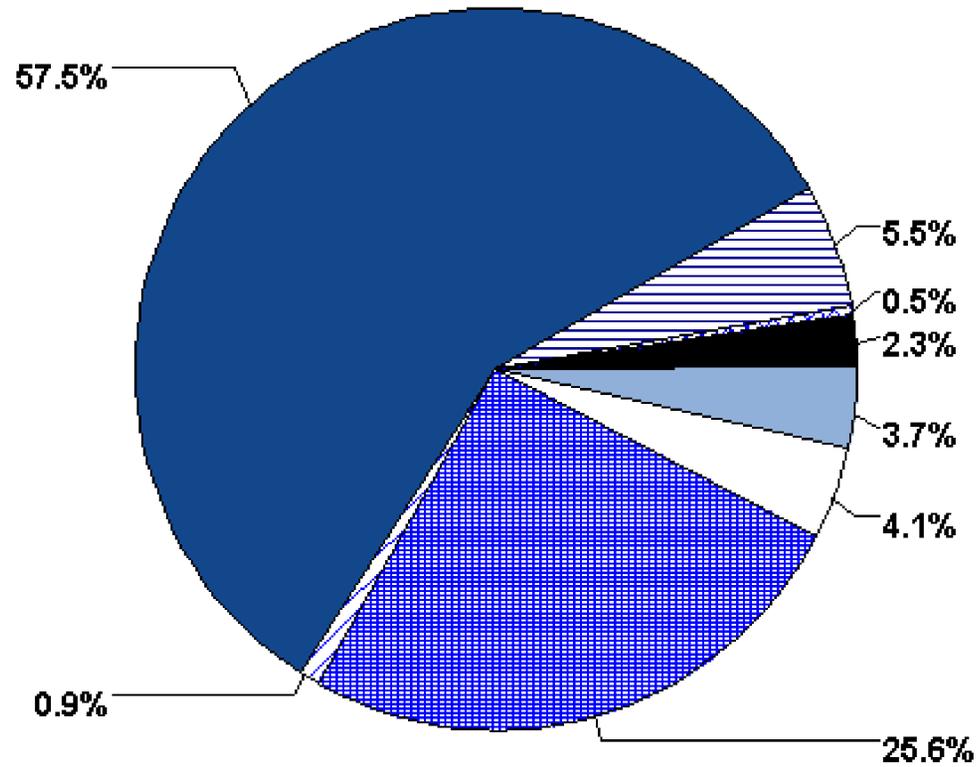
Miami, Florida (N=219)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



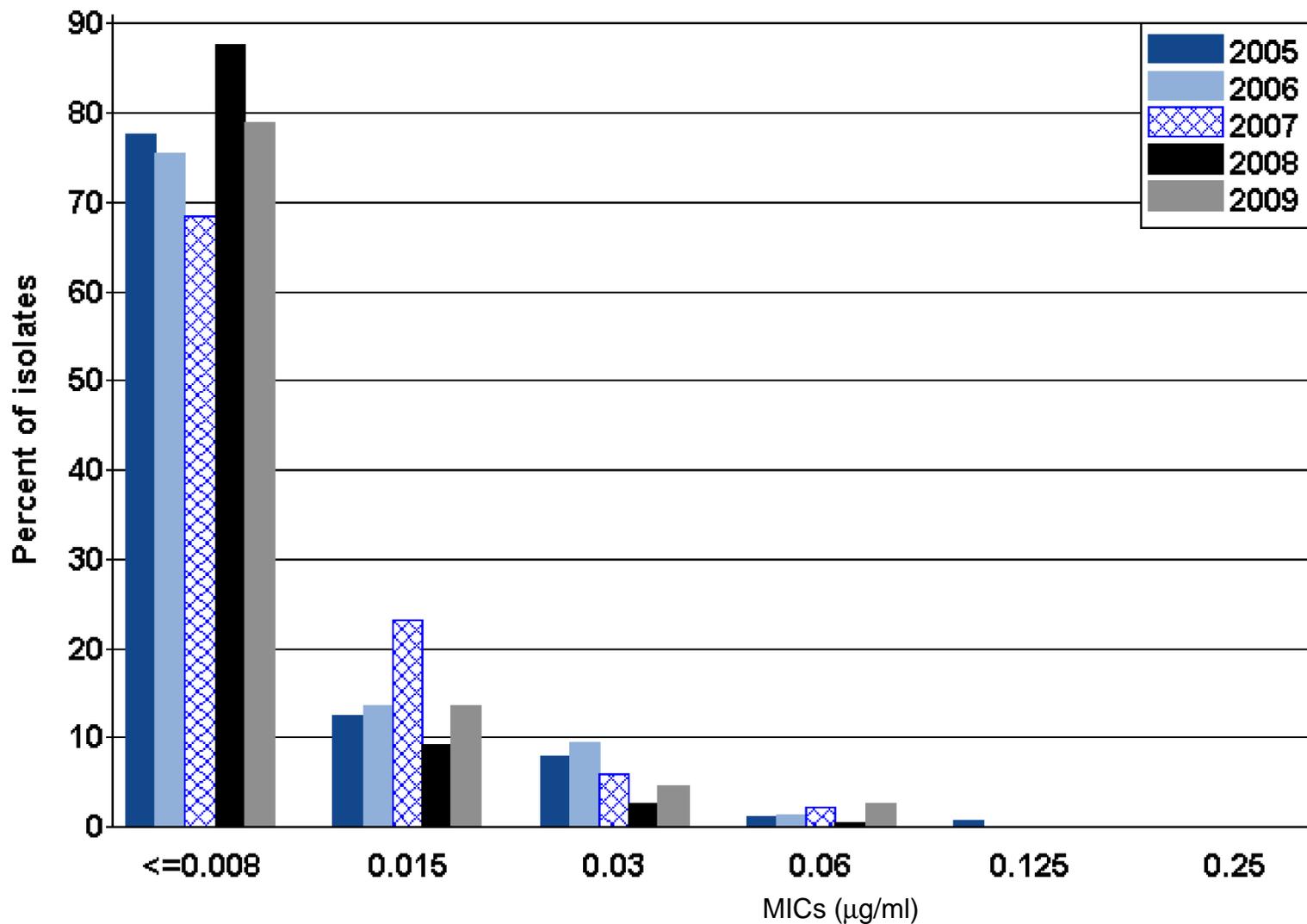
Miami, Florida (N=219)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



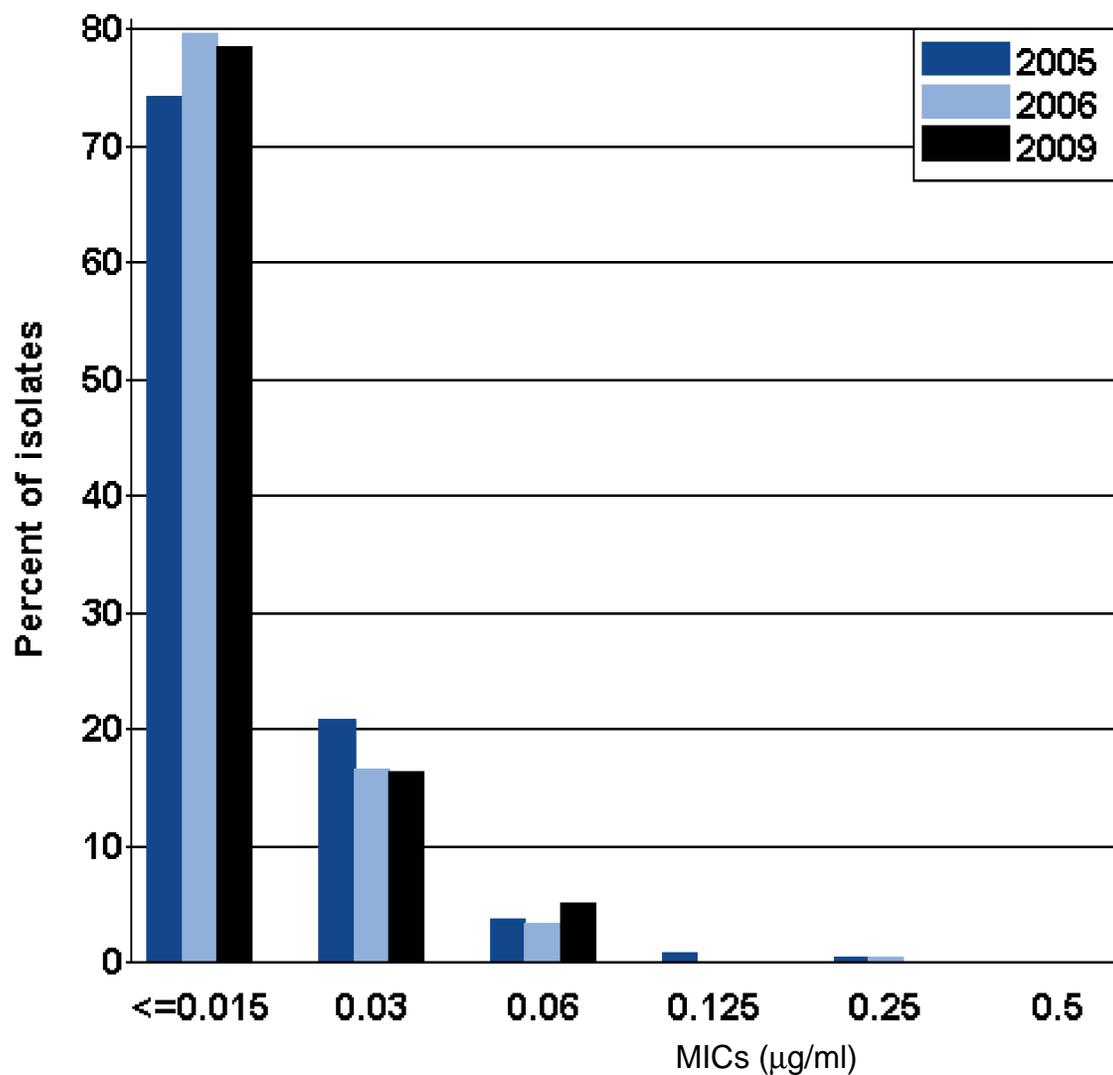
Miami, Florida

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Miami, Florida

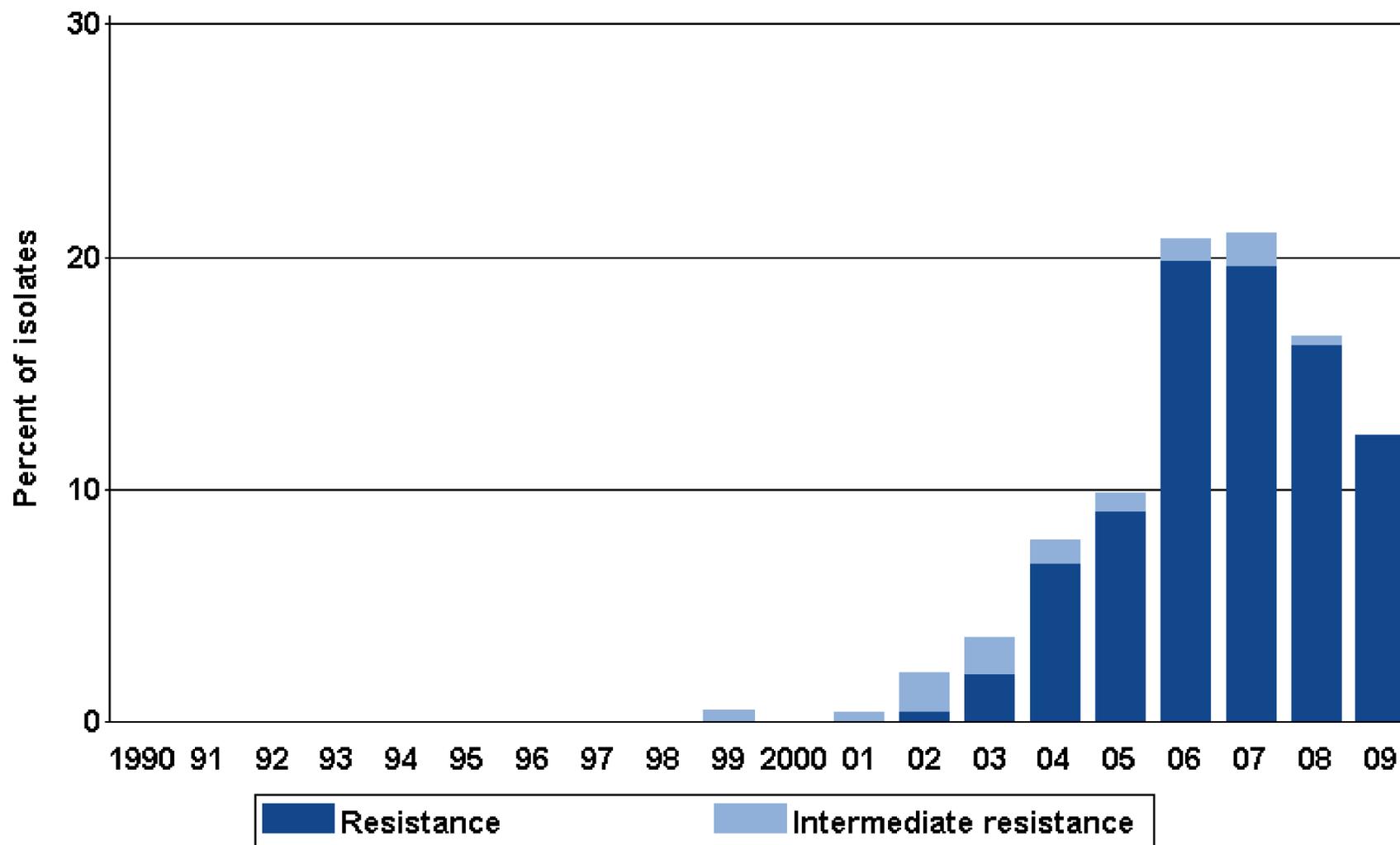
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Miami, Florida

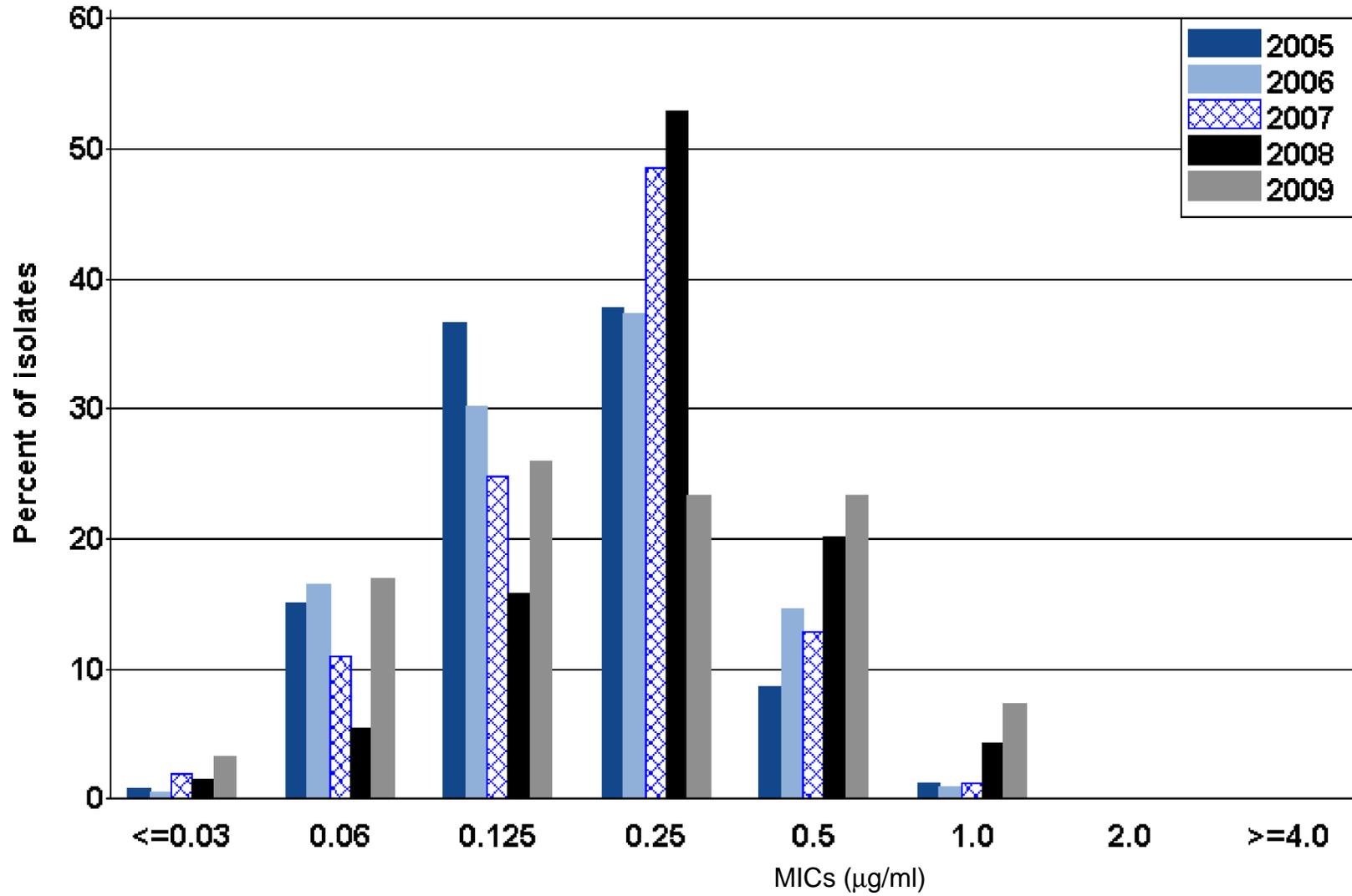
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

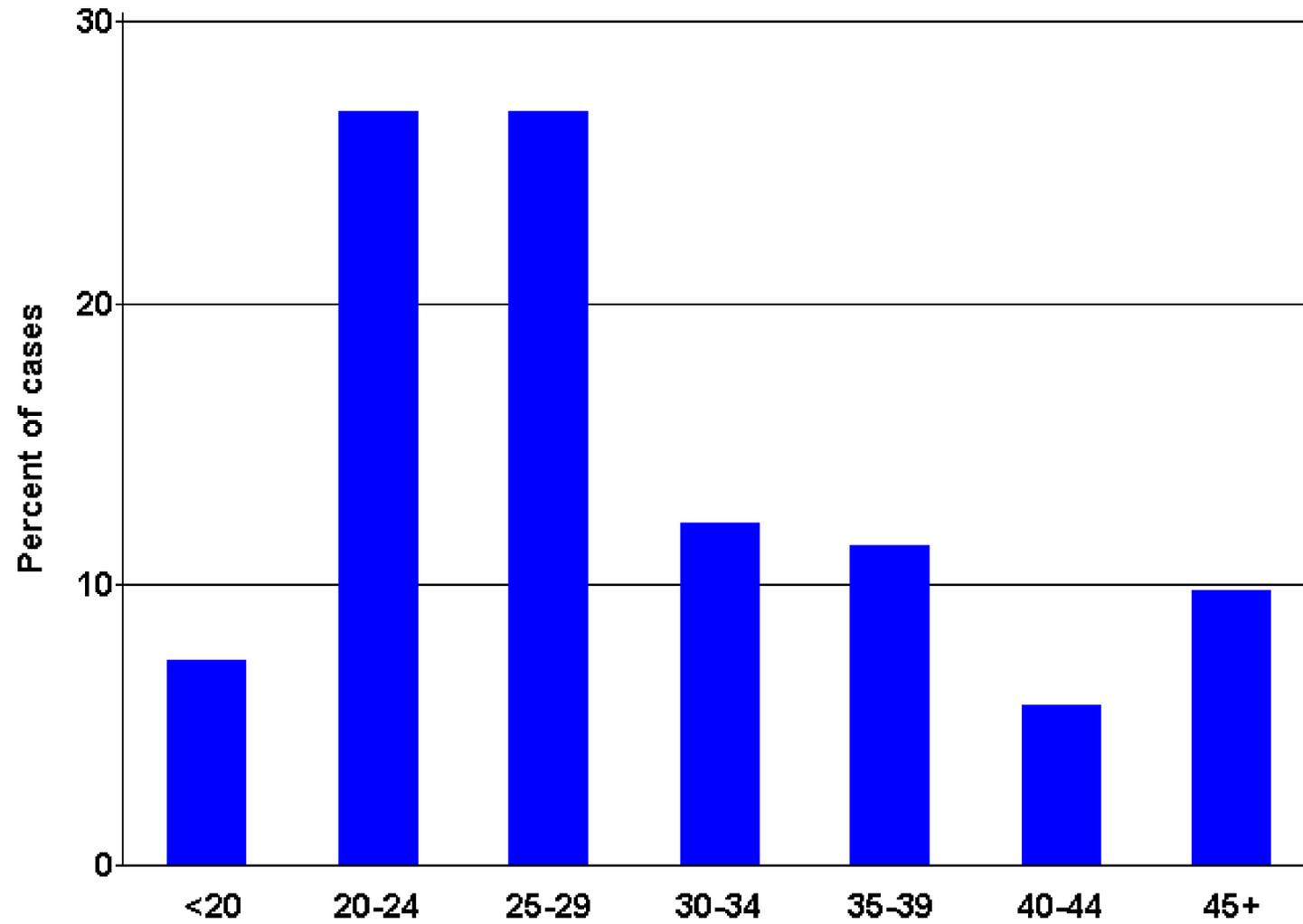
Miami, Florida

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



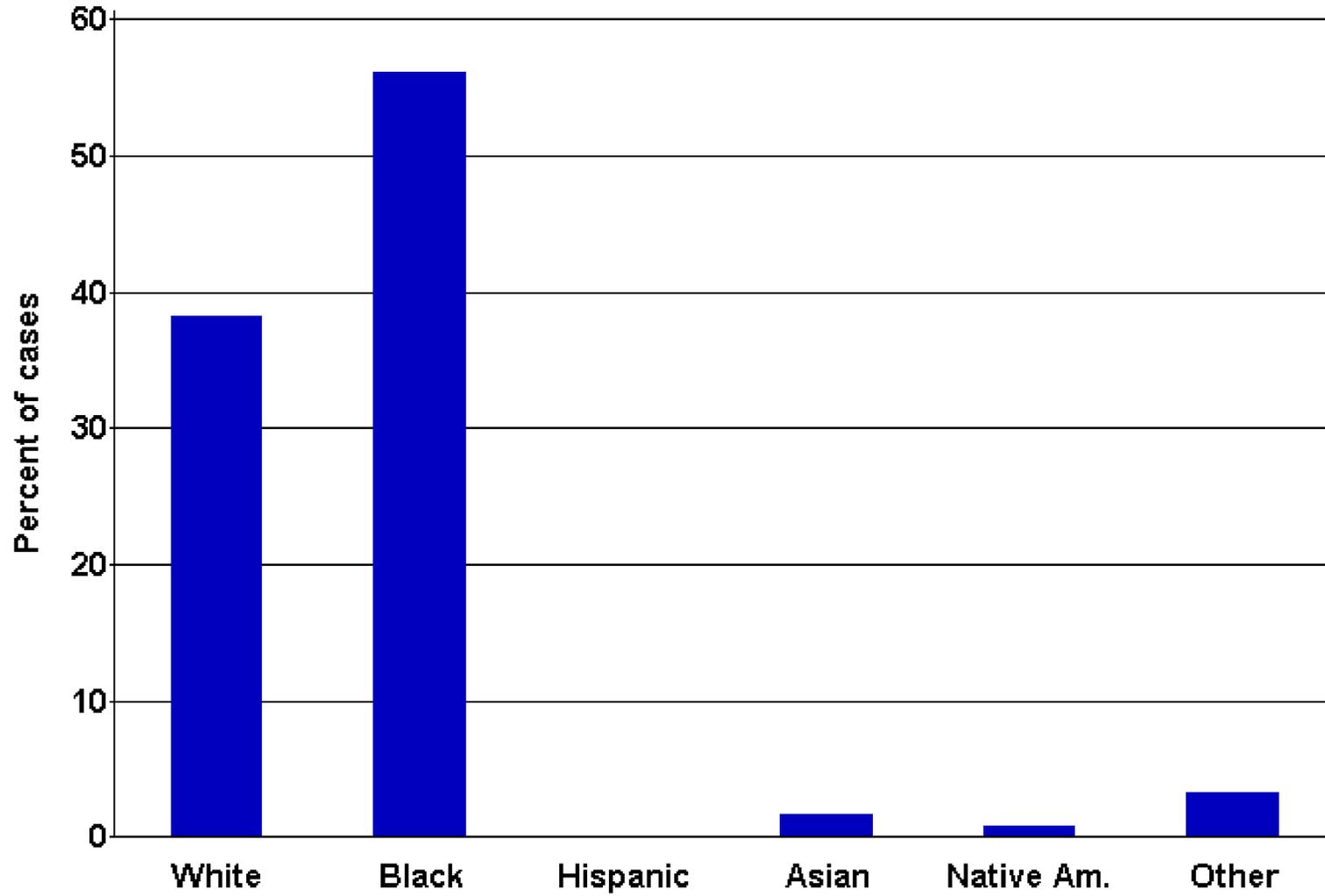
Minneapolis, Minnesota (N=123)

Figure A. Age of GISP participants, in years, 2009



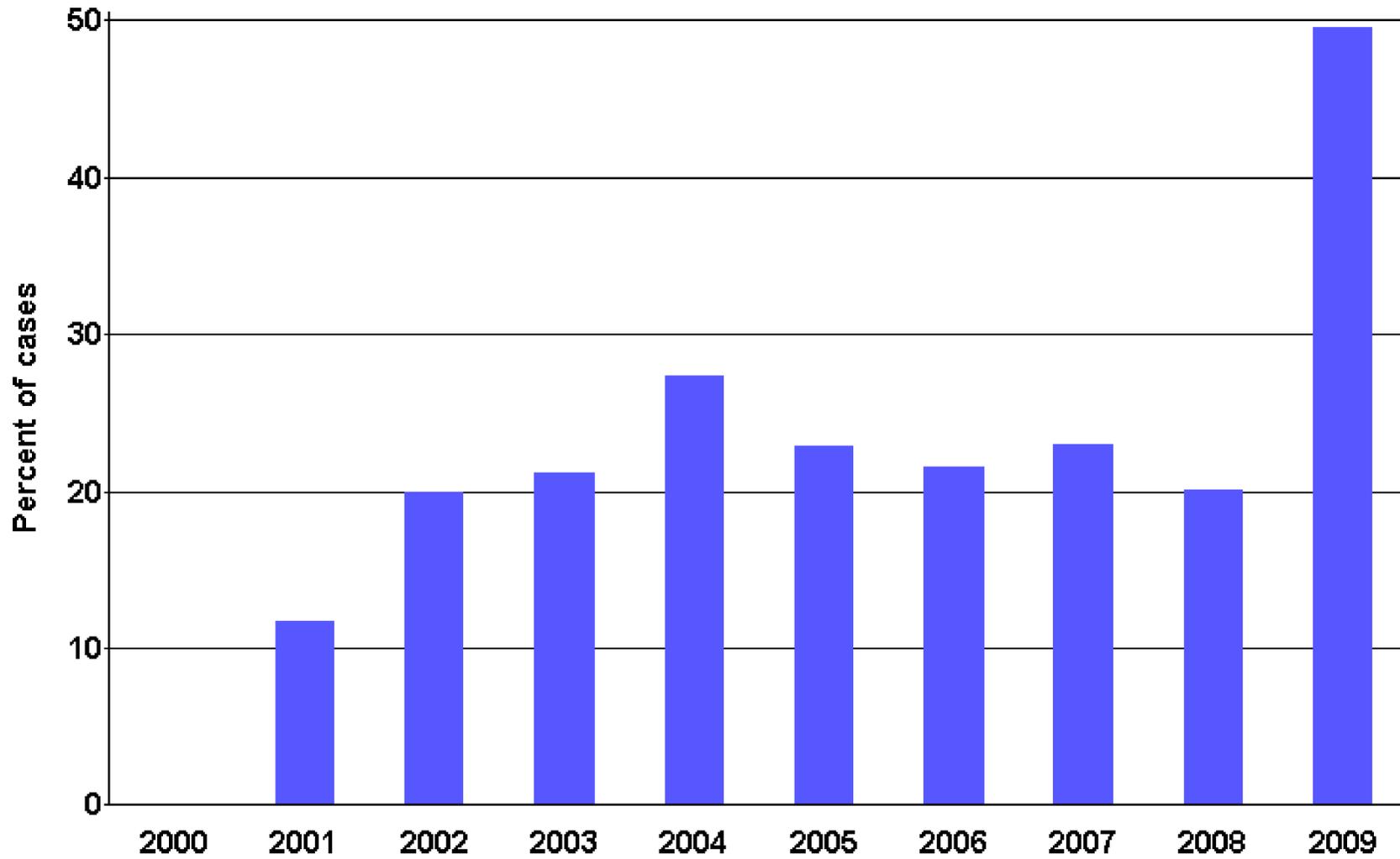
Minneapolis, Minnesota (N=123)

Figure B. Race/ethnicity of GISP participants, 2009



Minneapolis, Minnesota

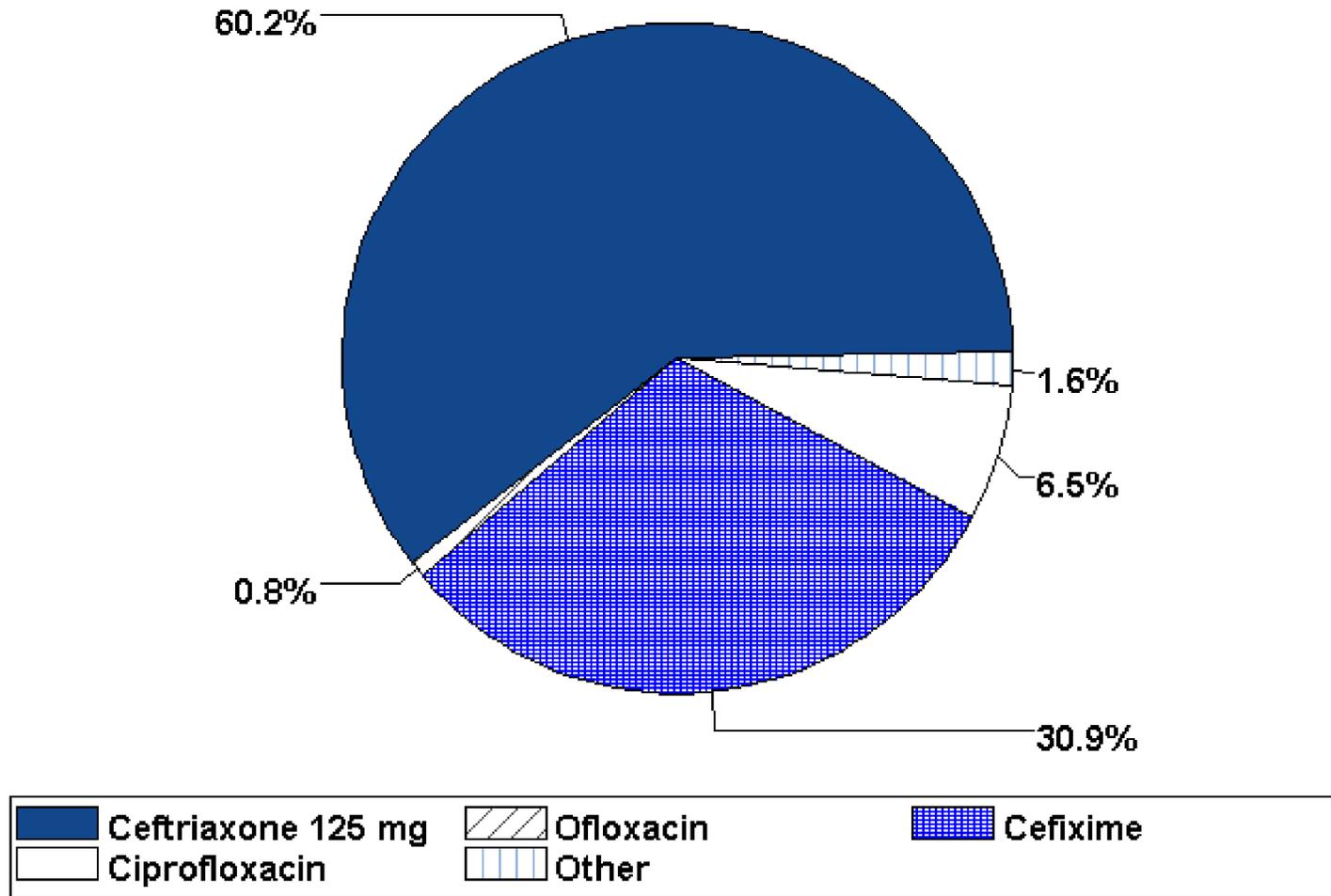
Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009*



*Note: Site participated in GISP from 2001-2009.

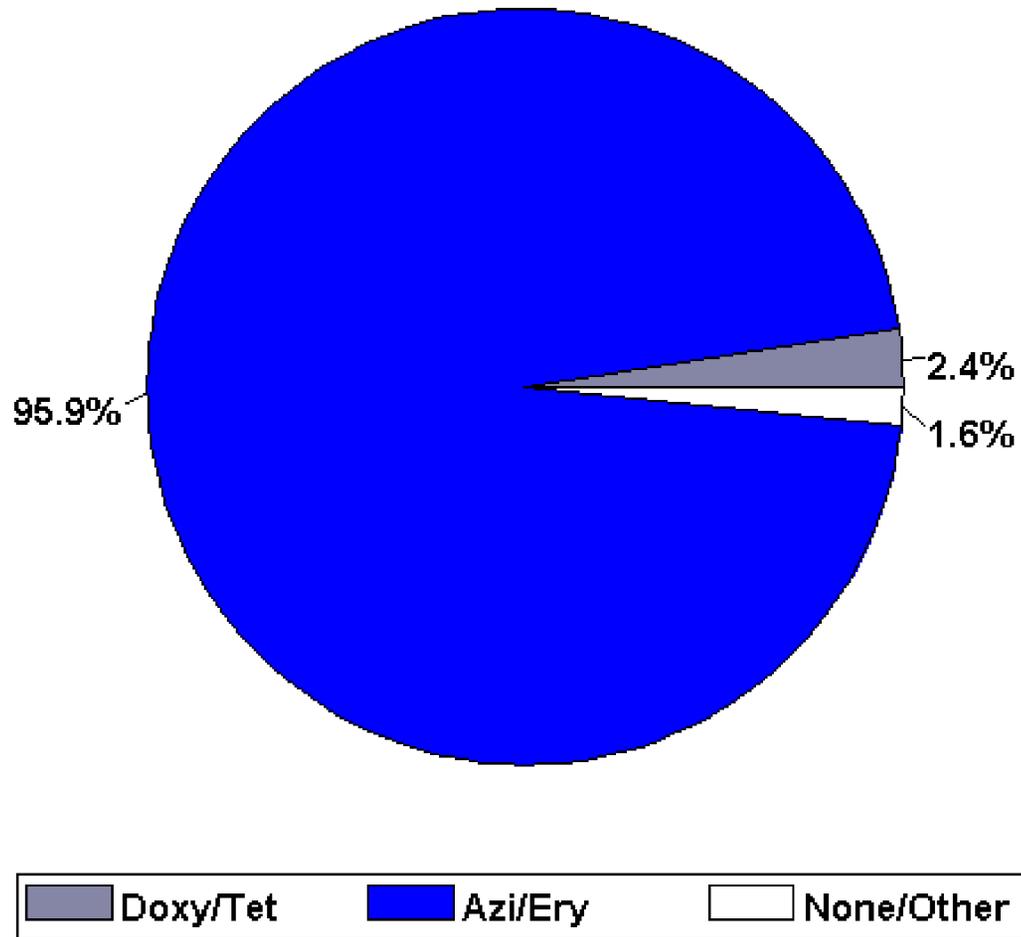
Minneapolis, Minnesota (N=123)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



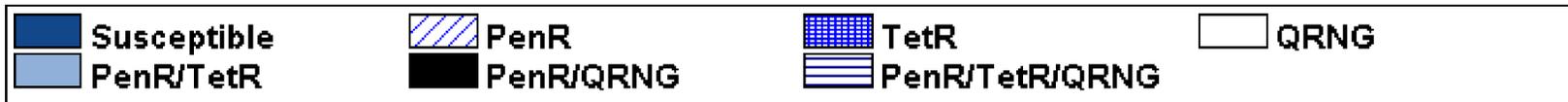
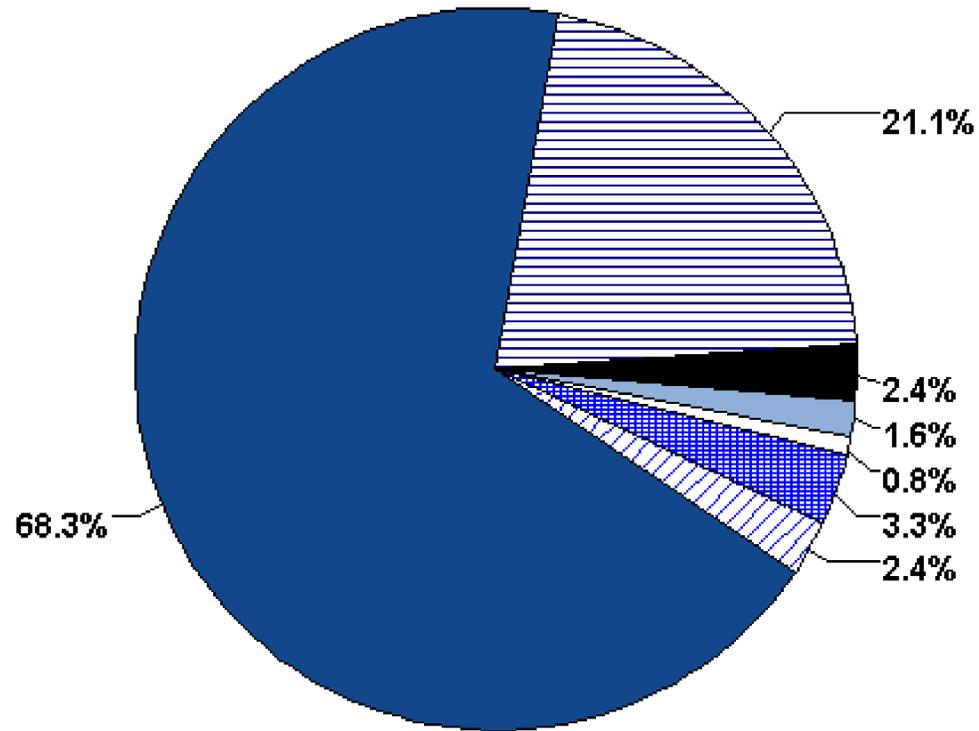
Minneapolis, Minnesota (N=123)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



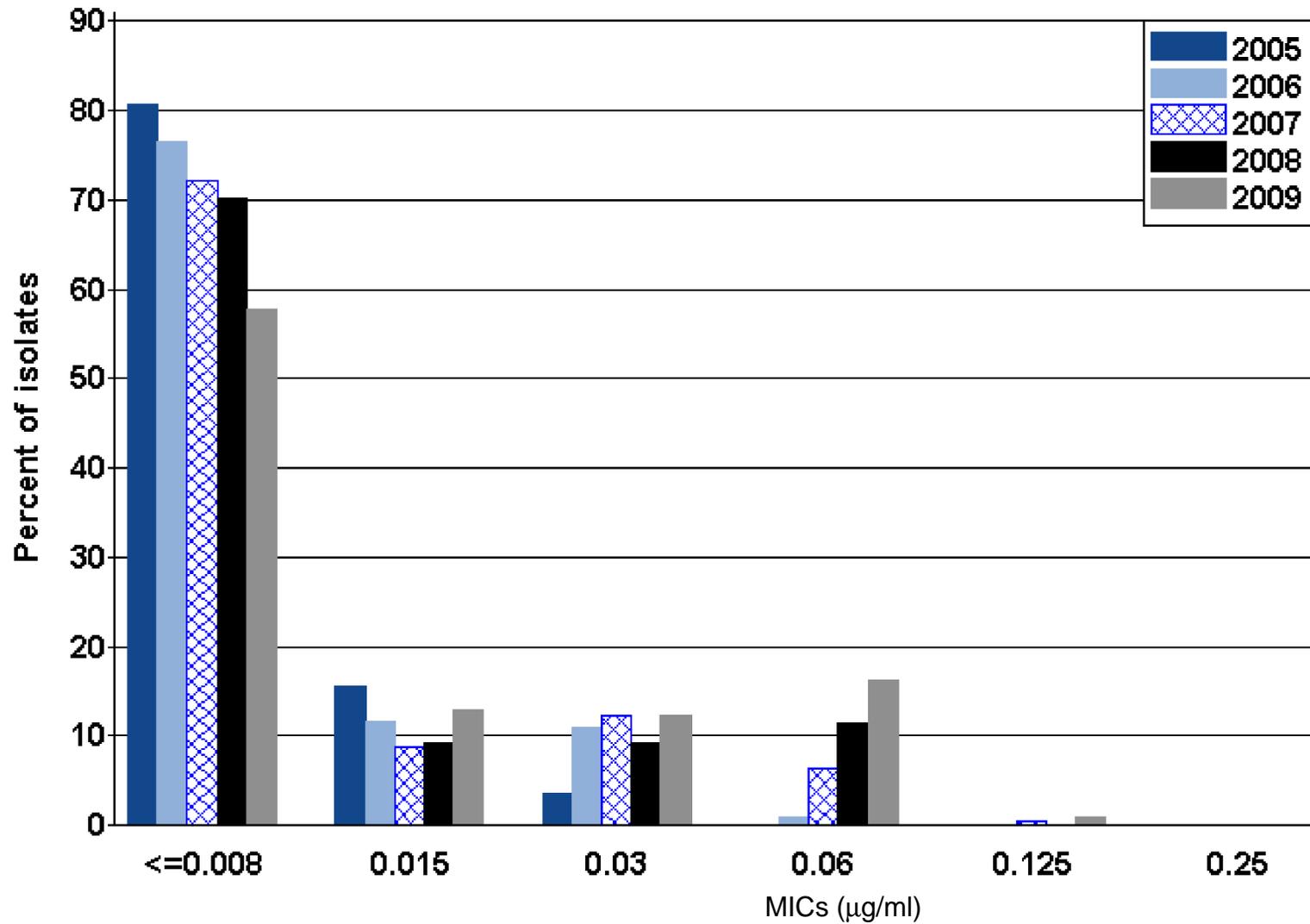
Minneapolis, Minnesota (N=123)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



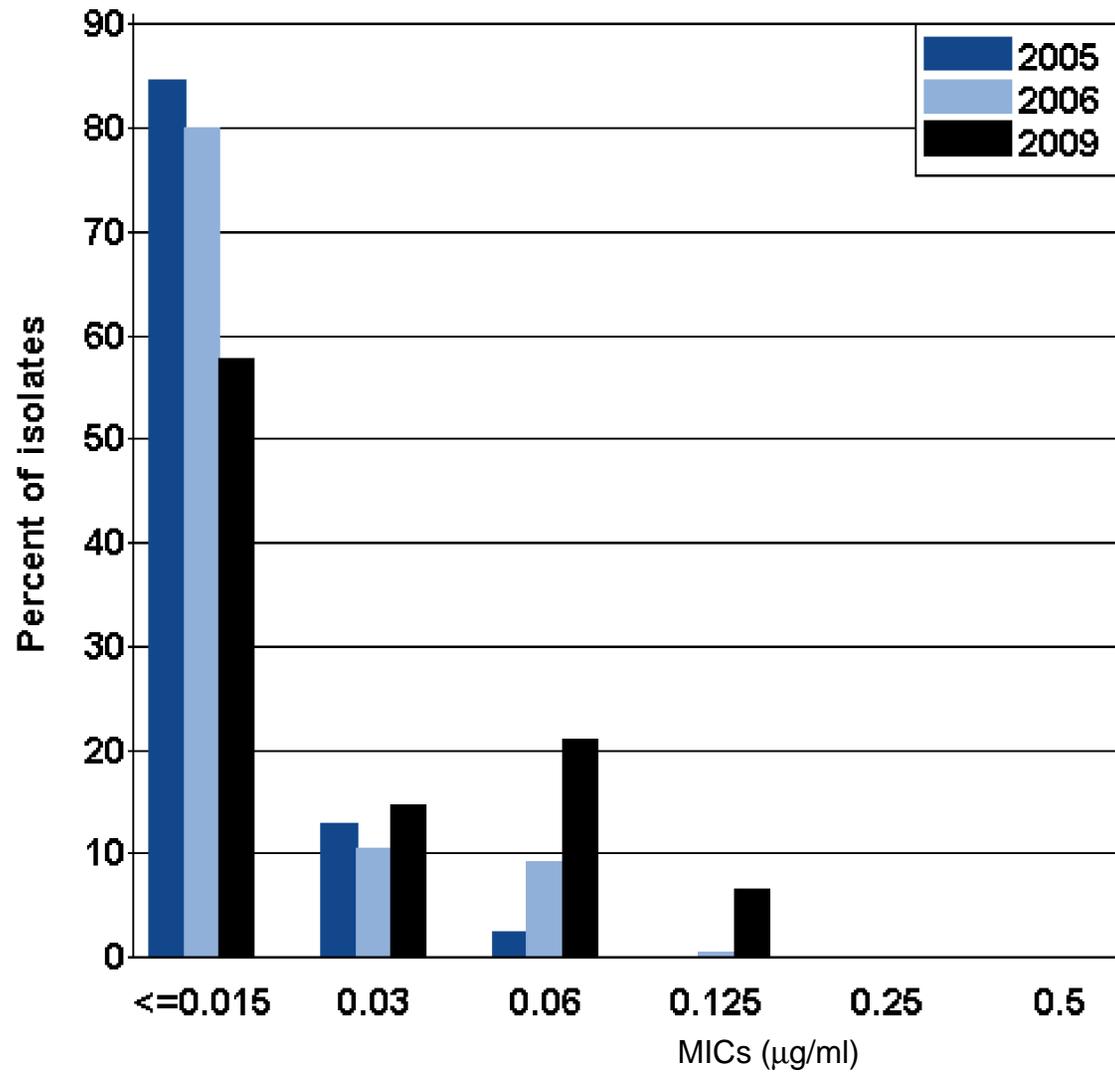
Minneapolis, Minnesota

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Minneapolis, Minnesota

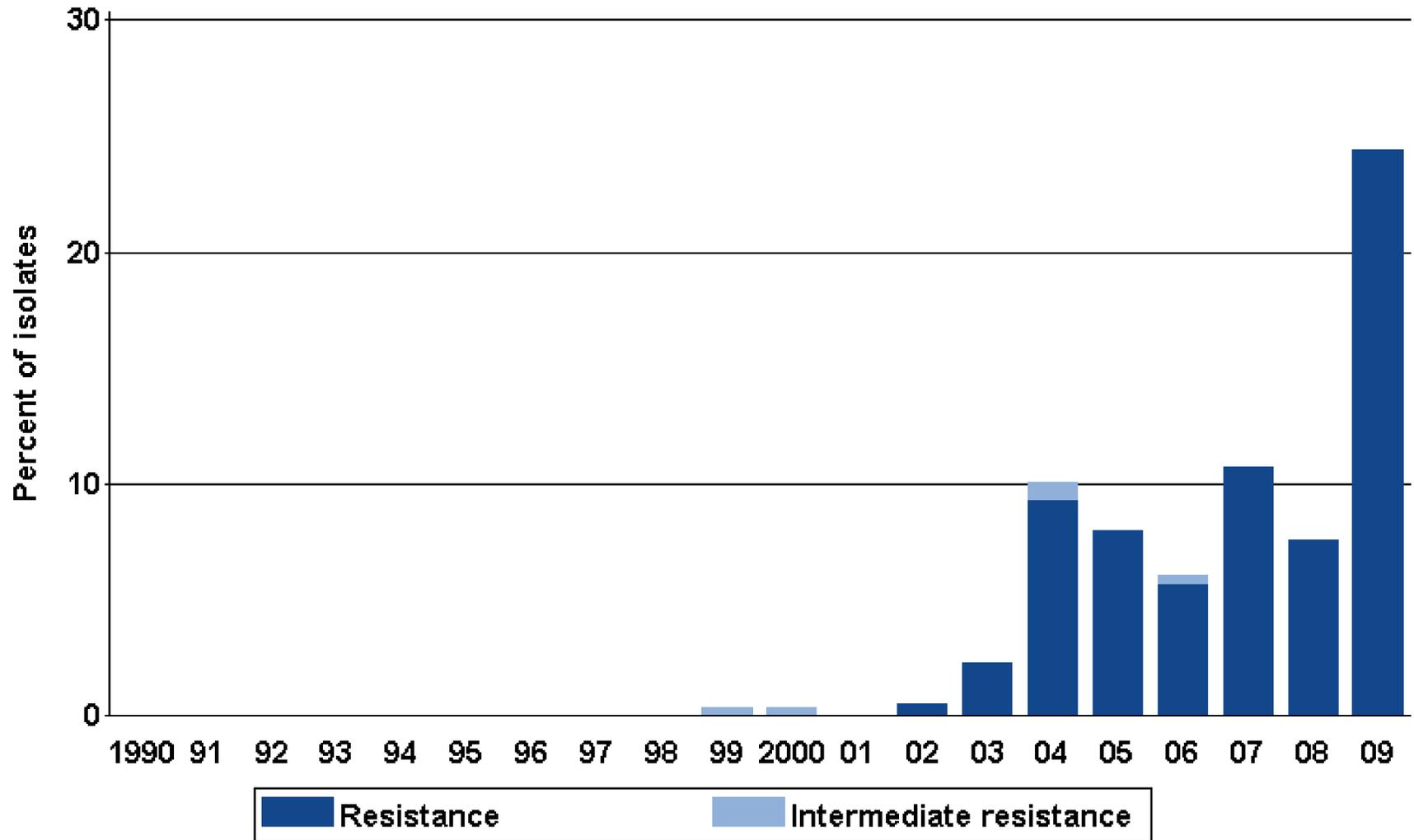
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Minneapolis, Minnesota

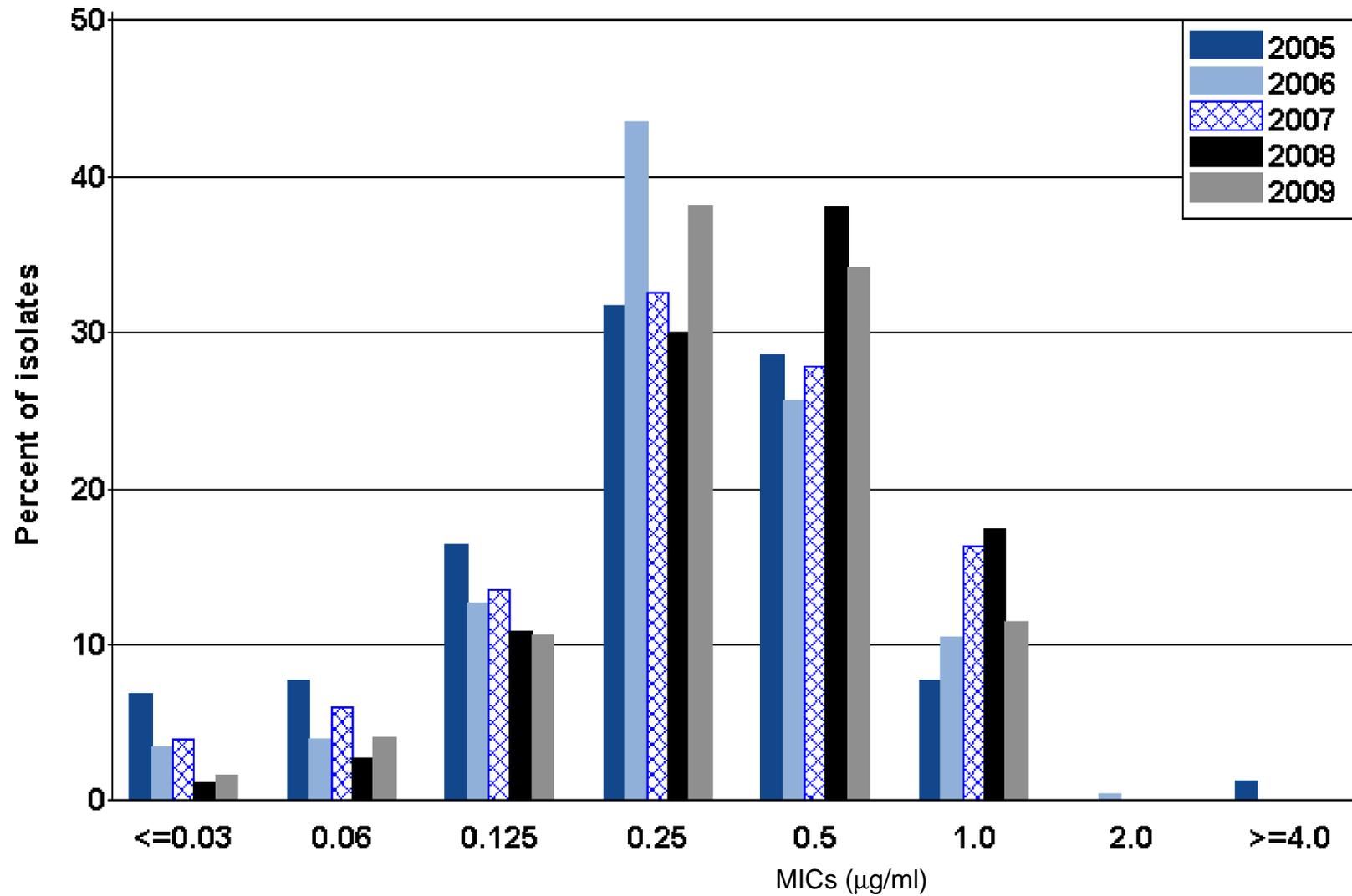
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

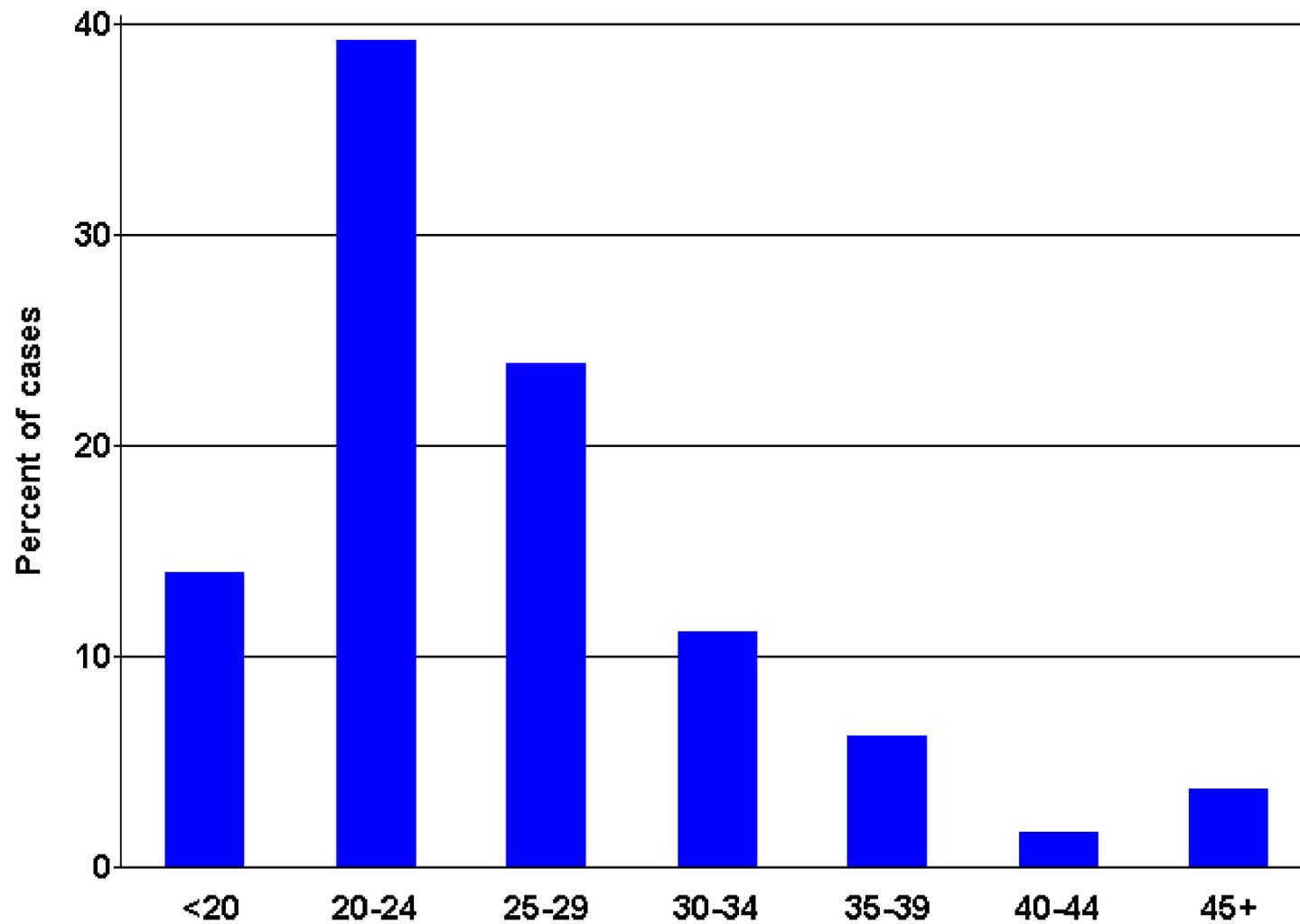
Minneapolis, Minnesota

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



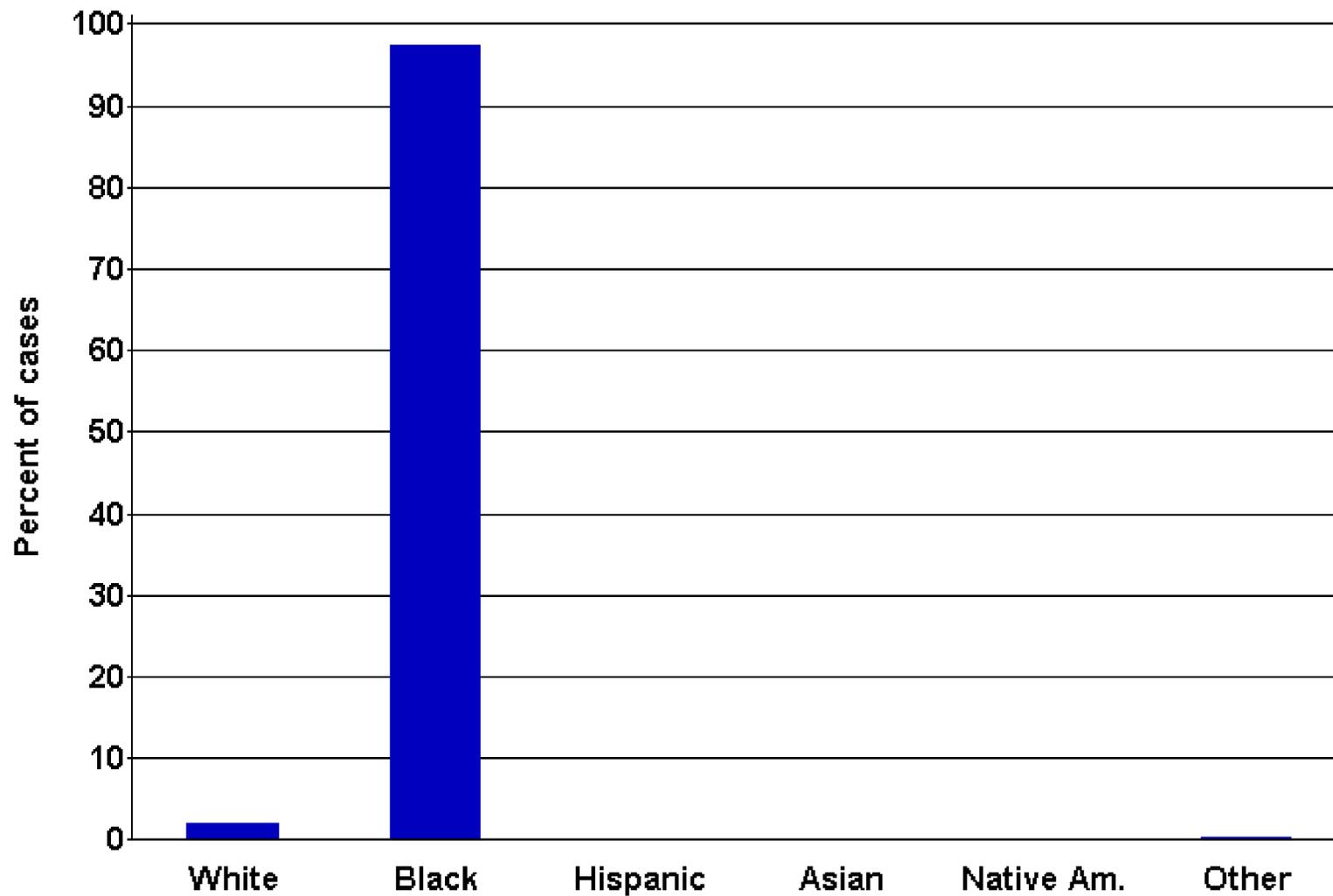
New Orleans, Louisiana (N=242)

Figure A. Age of GISP participants, in years, 2009



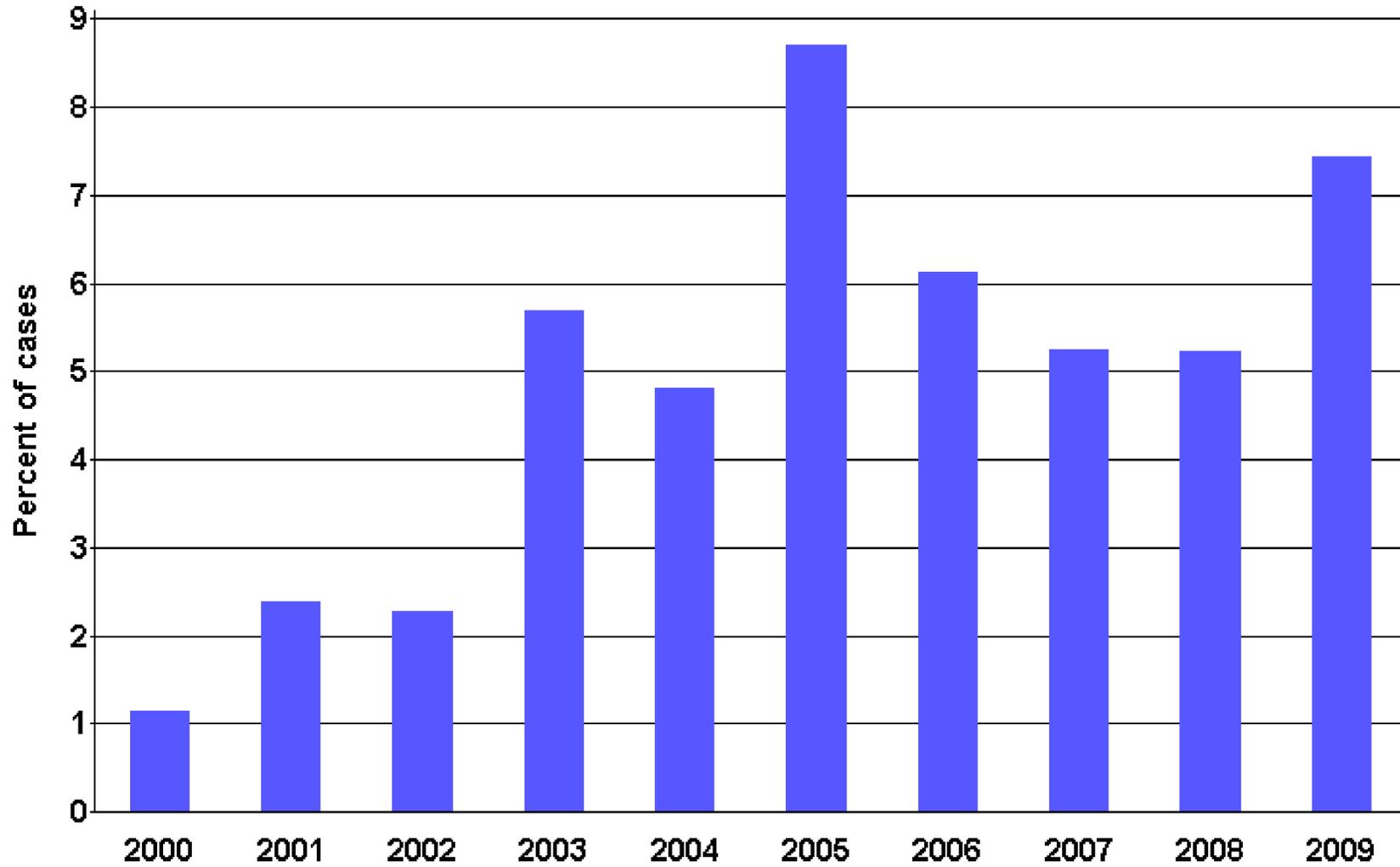
New Orleans, Louisiana (N=242)

Figure B. Race/ethnicity of GISP participants, 2009



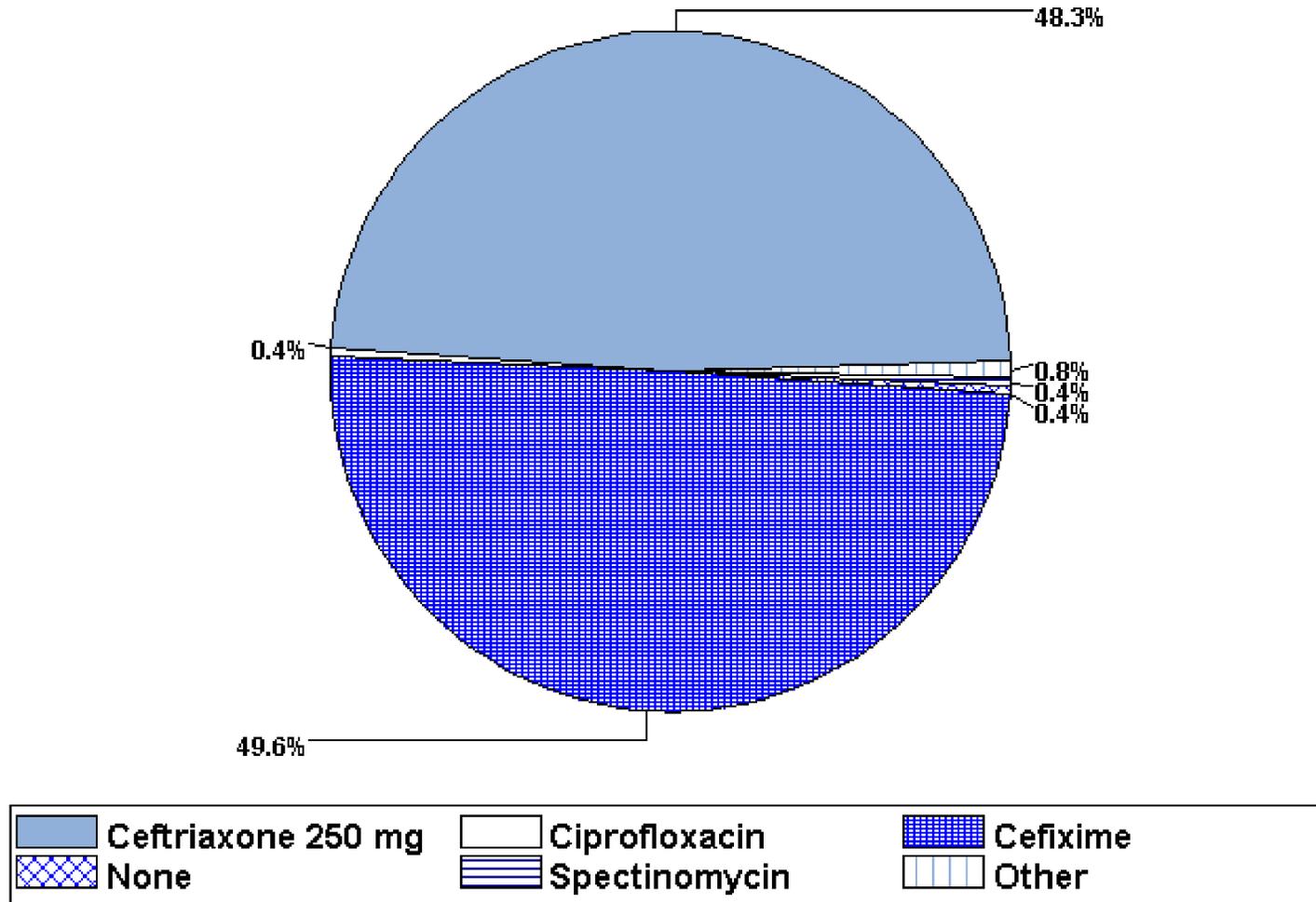
New Orleans, Louisiana

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



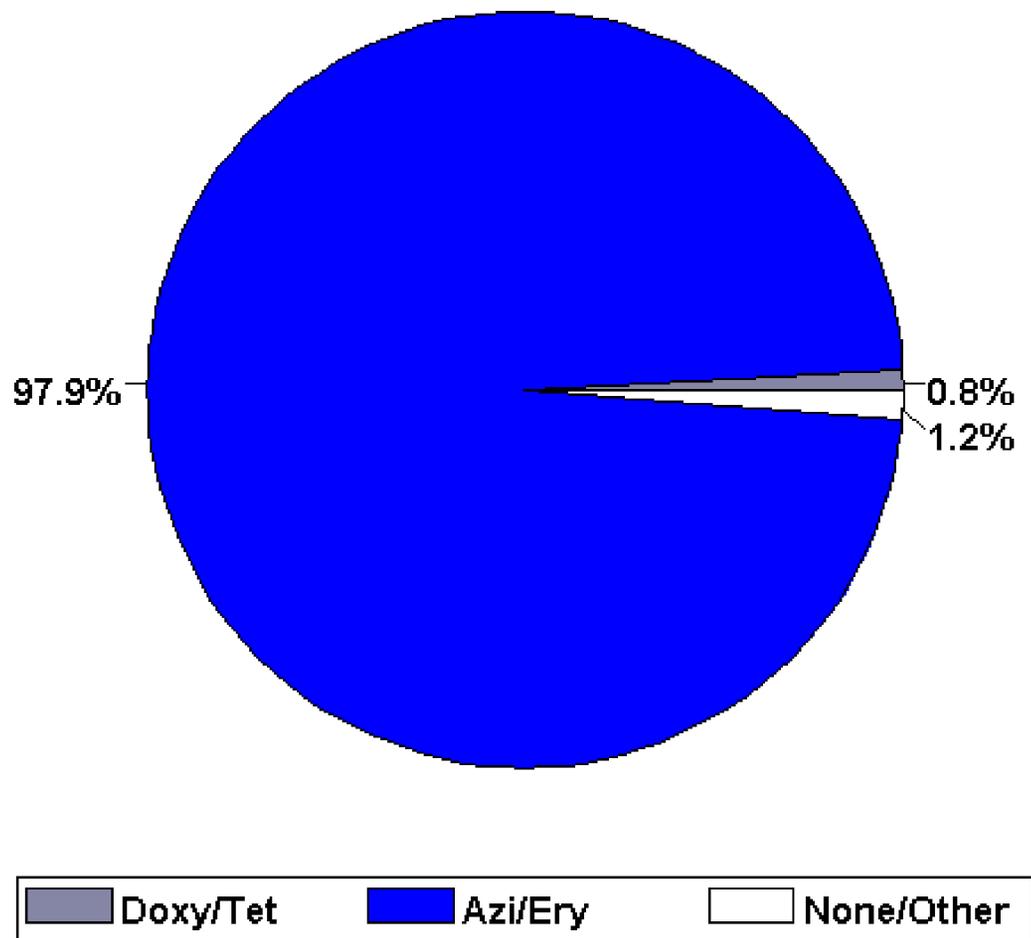
New Orleans, Louisiana (N=242)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



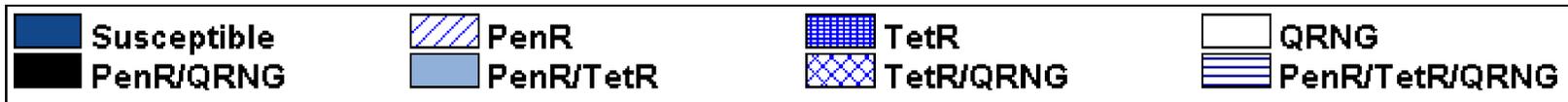
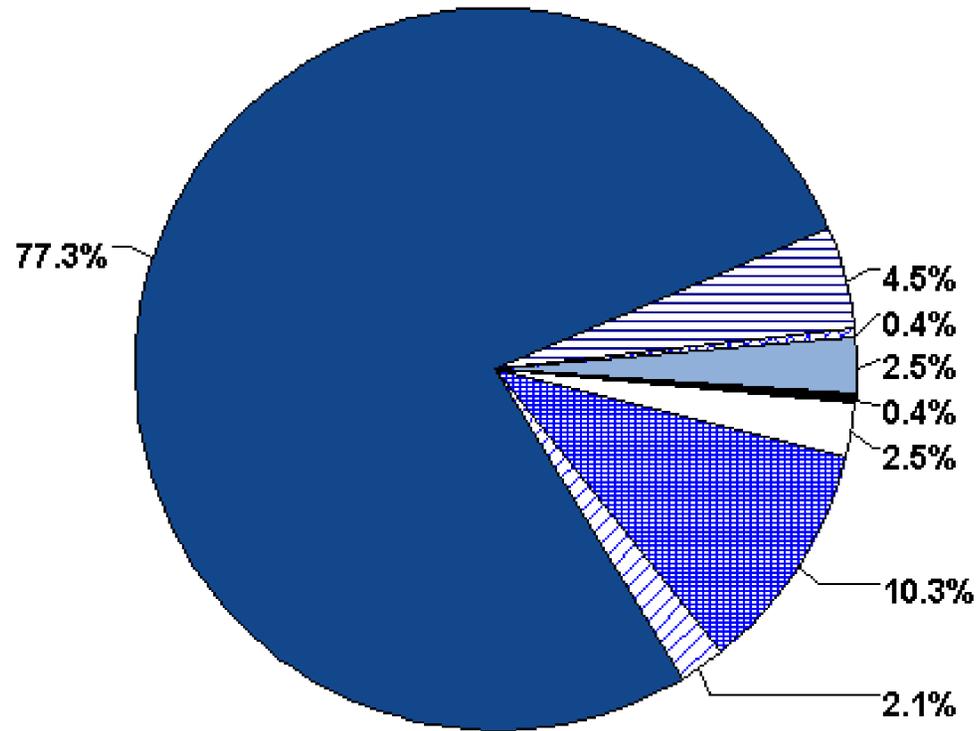
New Orleans, Louisiana (N=242)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



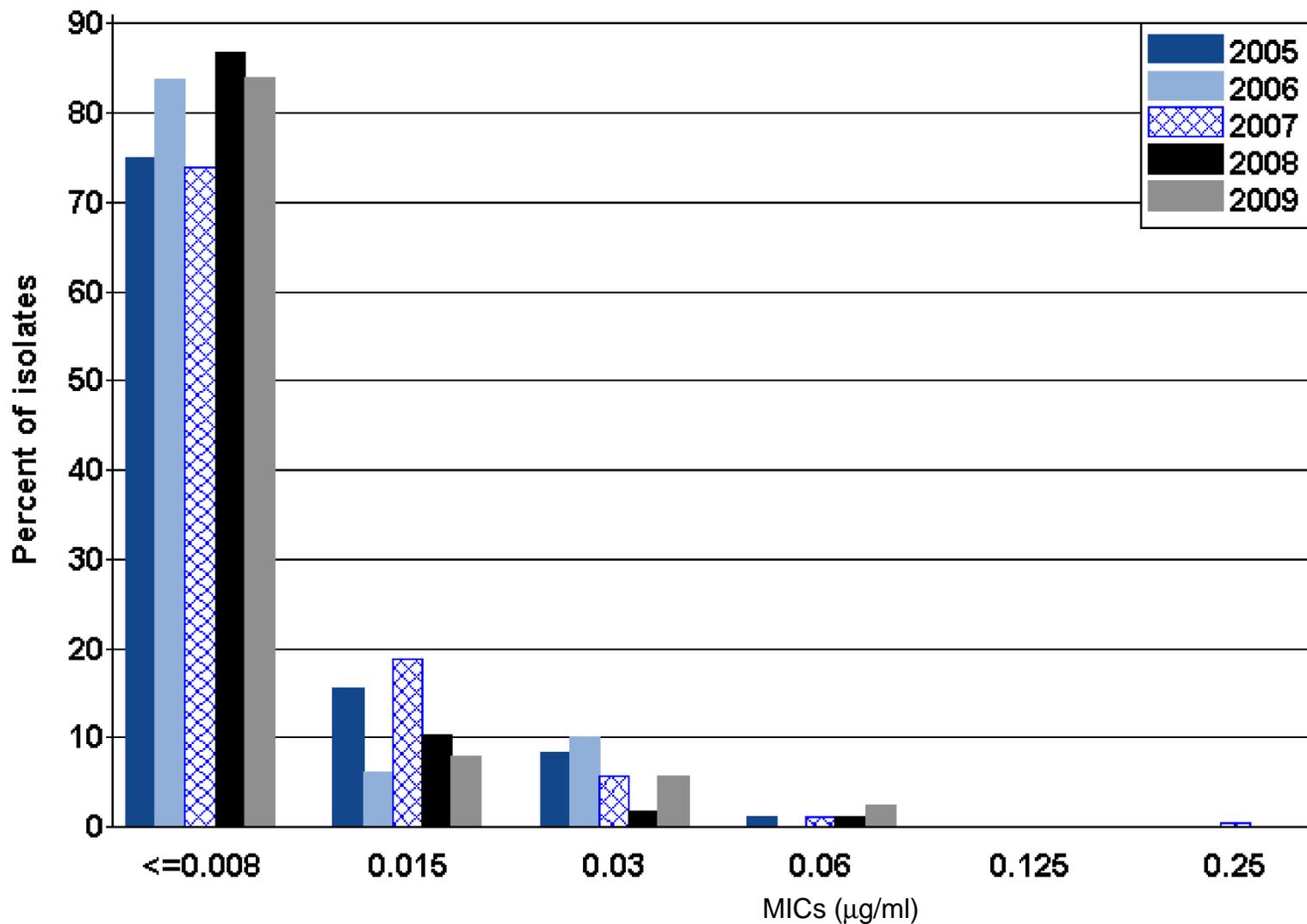
New Orleans, Louisiana (N=242)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



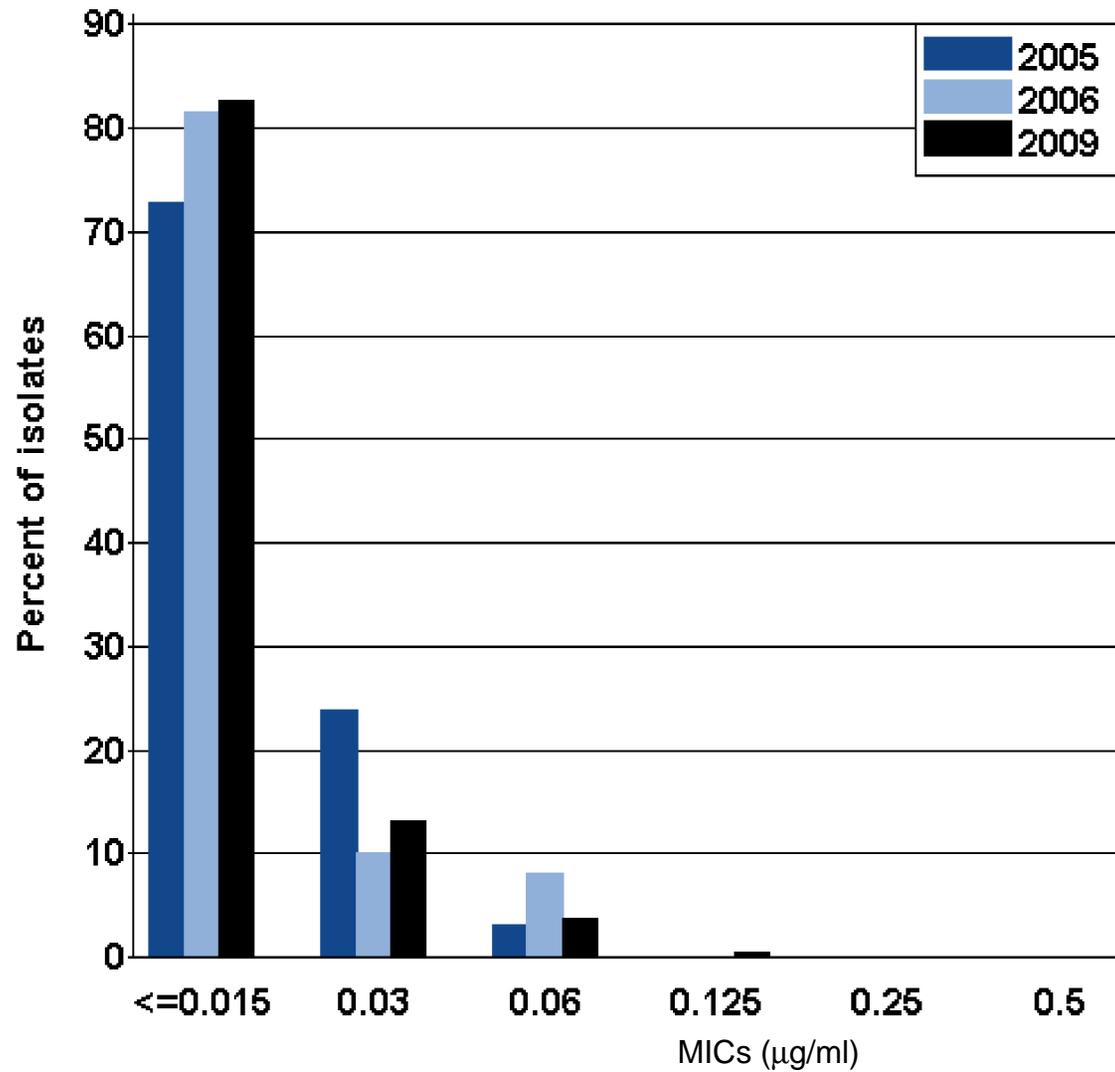
New Orleans, Louisiana

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



New Orleans, Louisiana

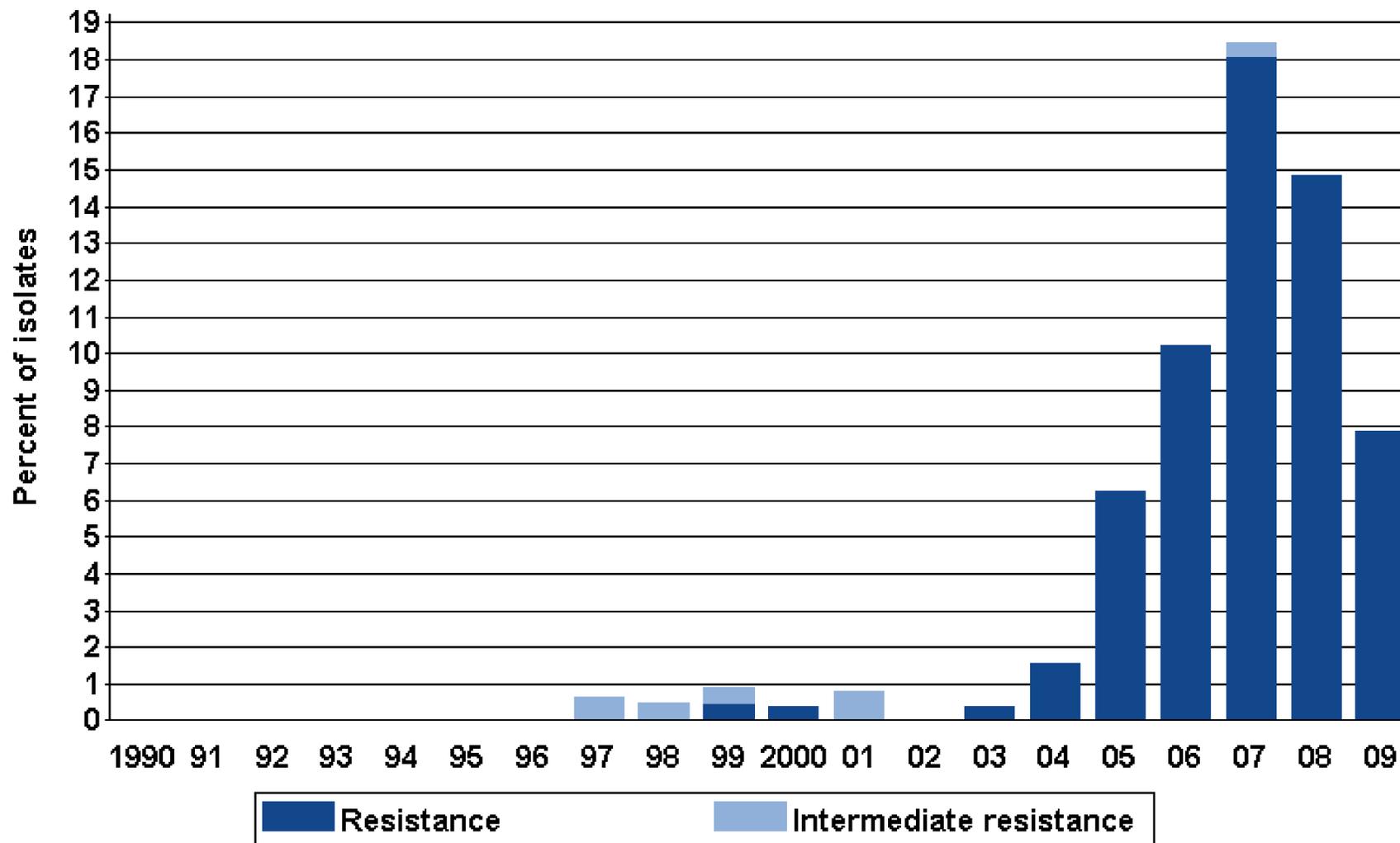
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

New Orleans, Louisiana

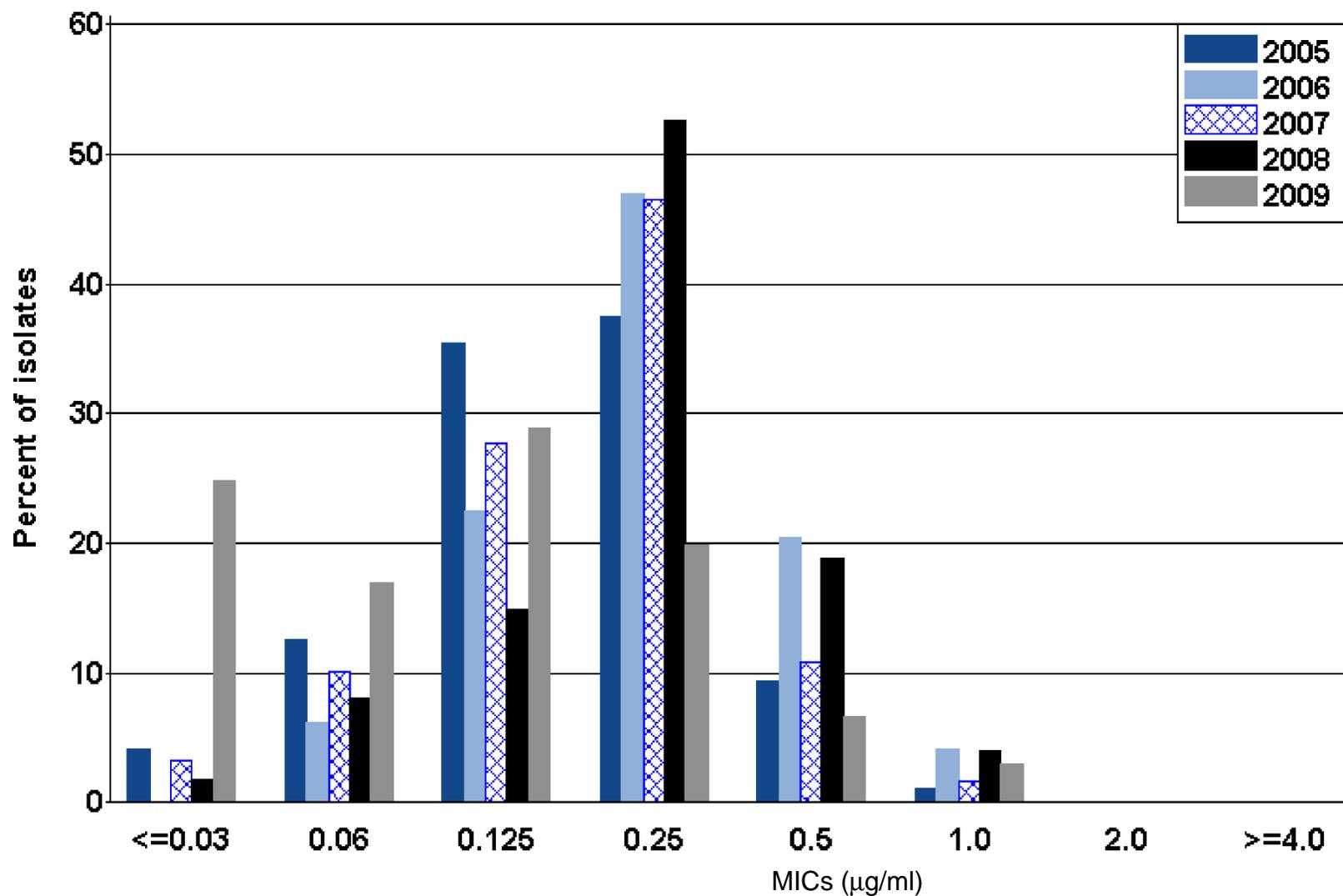
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

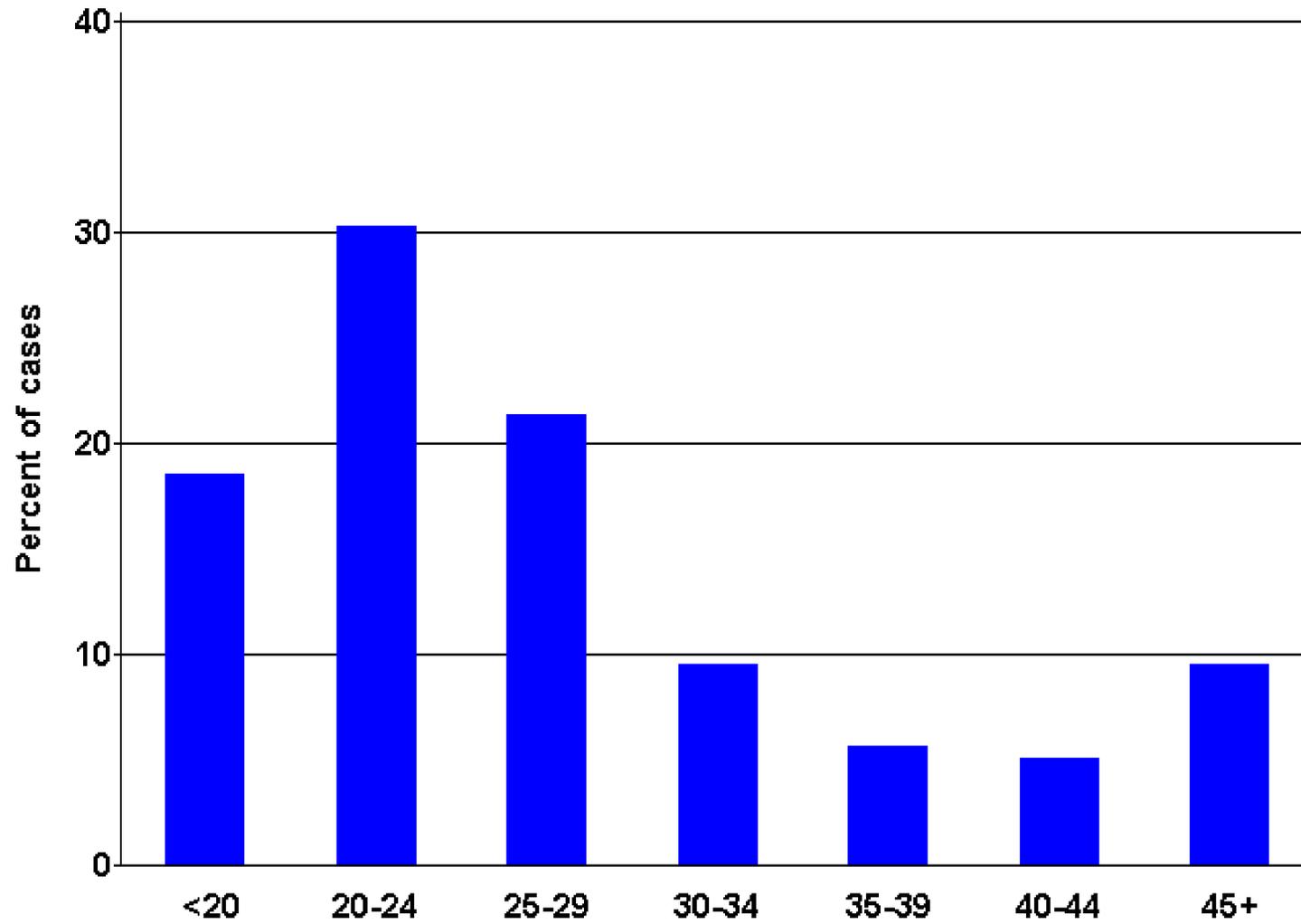
New Orleans, Louisiana

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



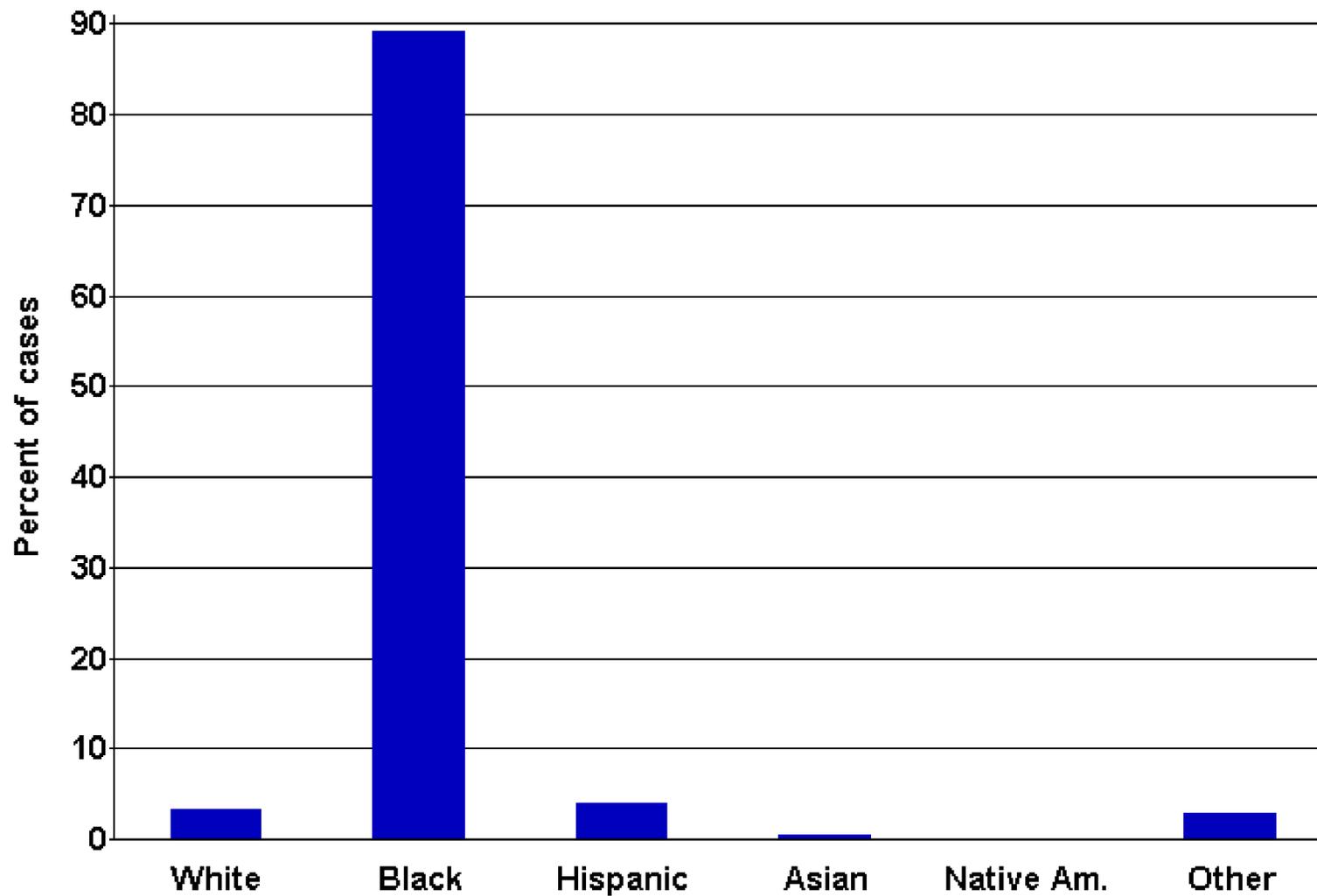
New York City, New York (N=179)

Figure A. Age of GISP participants, in years, 2009



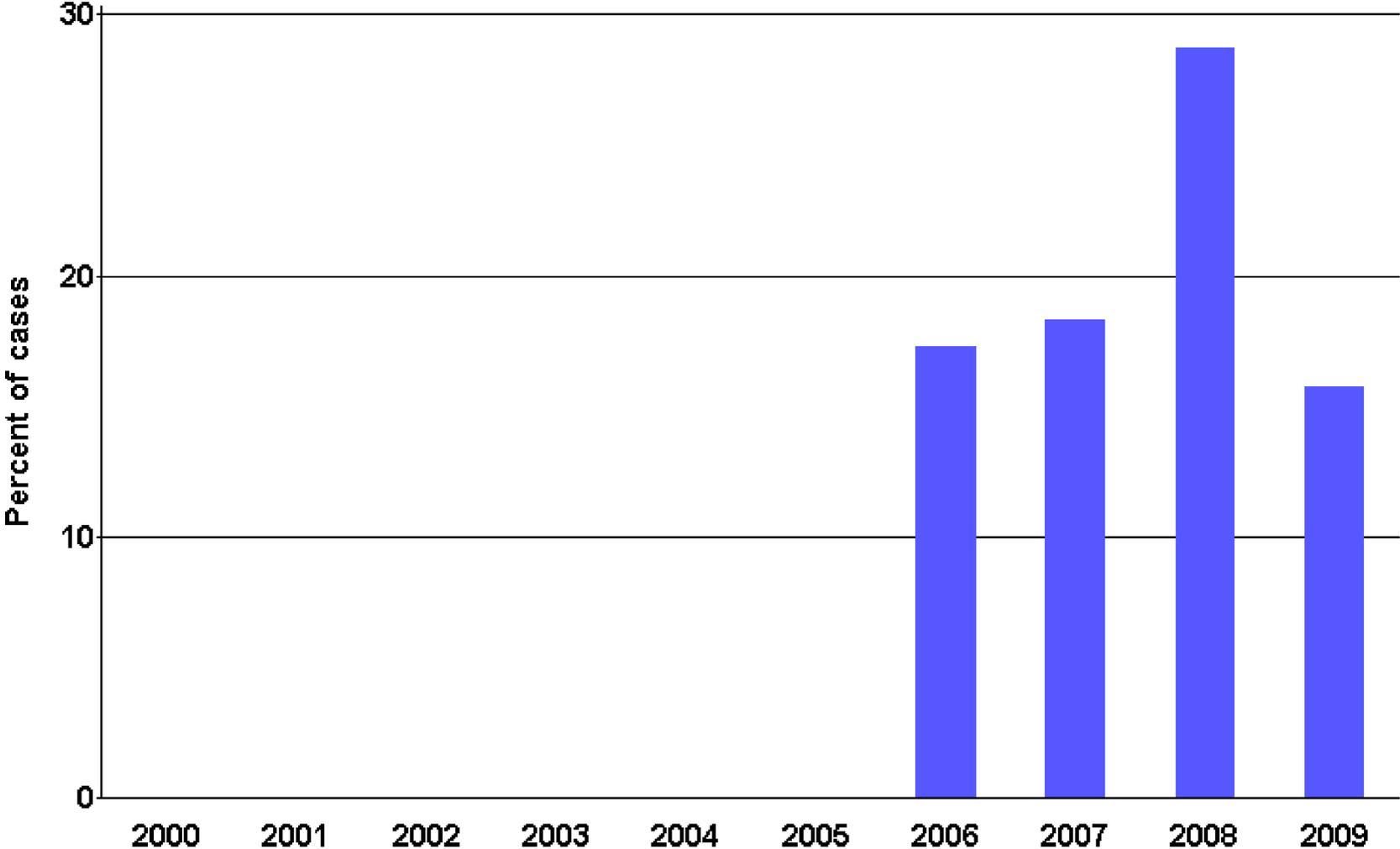
New York City, New York (N=179)

Figure B. Race/ethnicity of GISP participants, 2009



New York City, New York

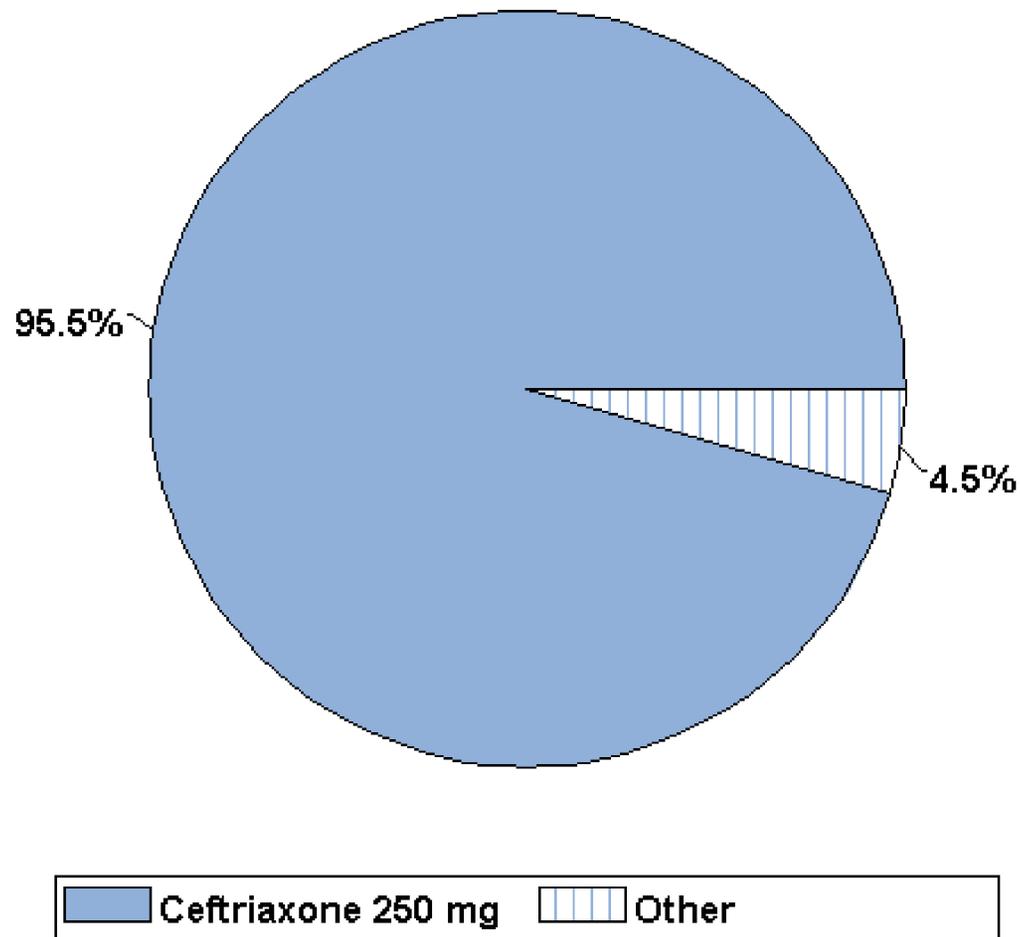
Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009*



*Note: Site participated in GISP from 2006-2009.

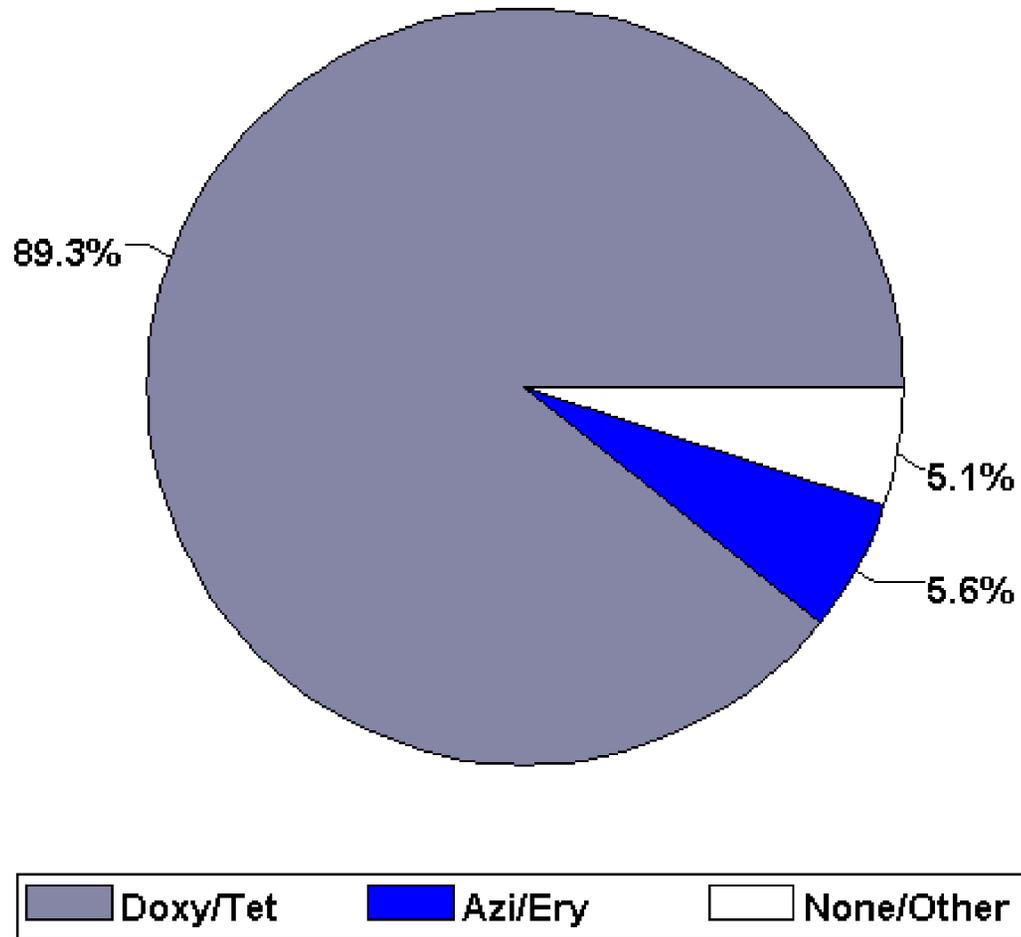
New York City, New York (N=179)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



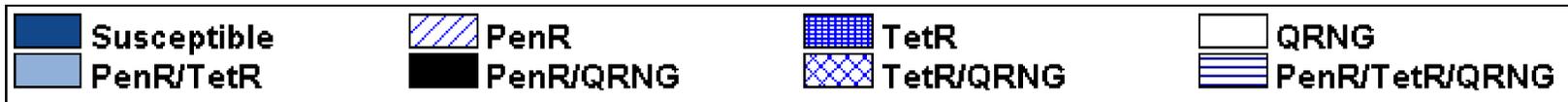
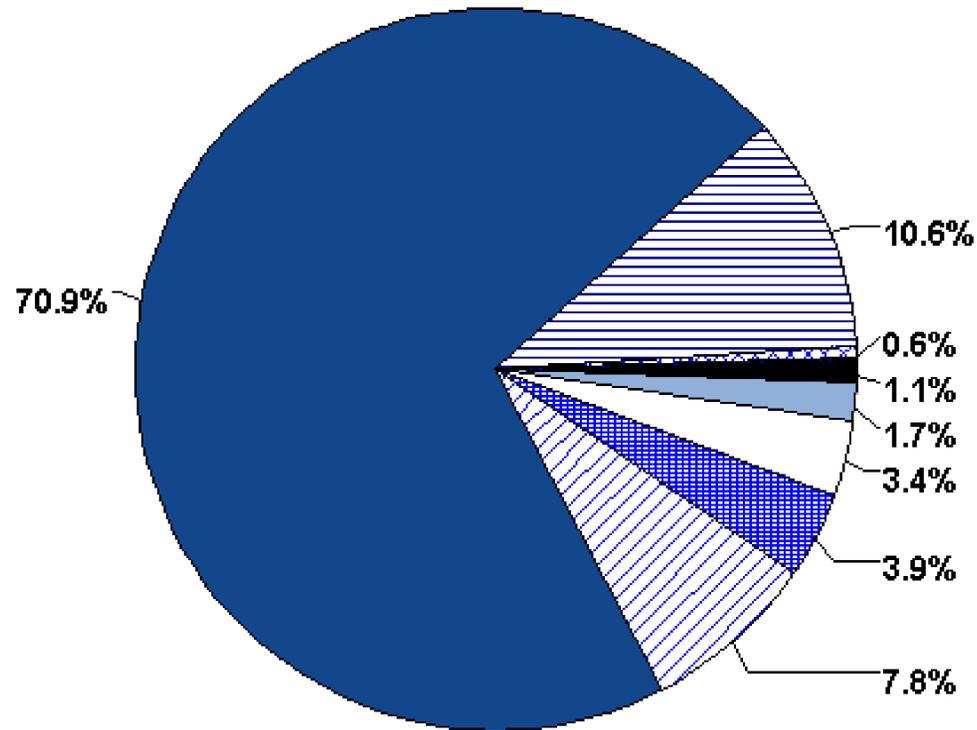
New York City, New York (N=179)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



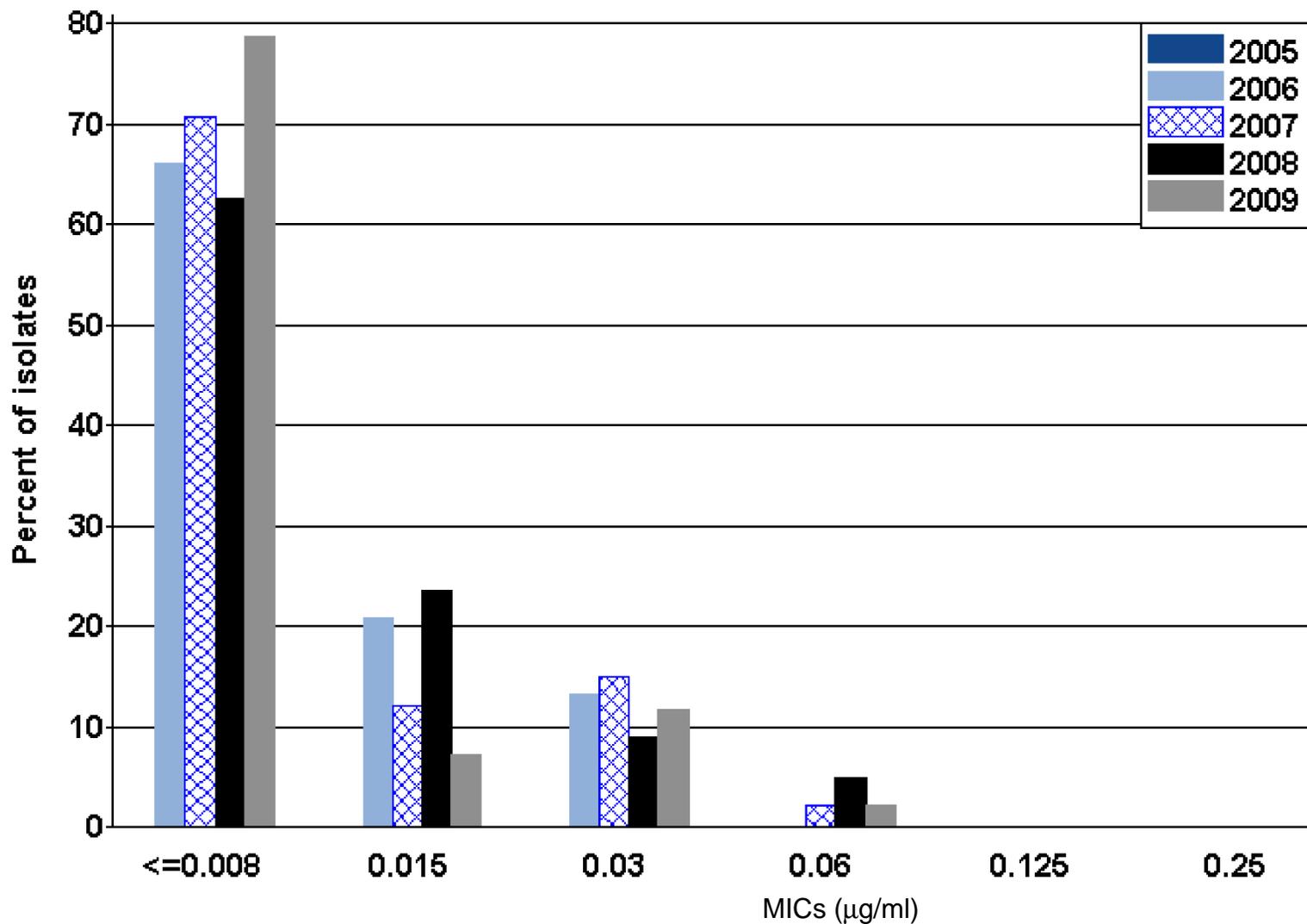
New York City, New York (N=179)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



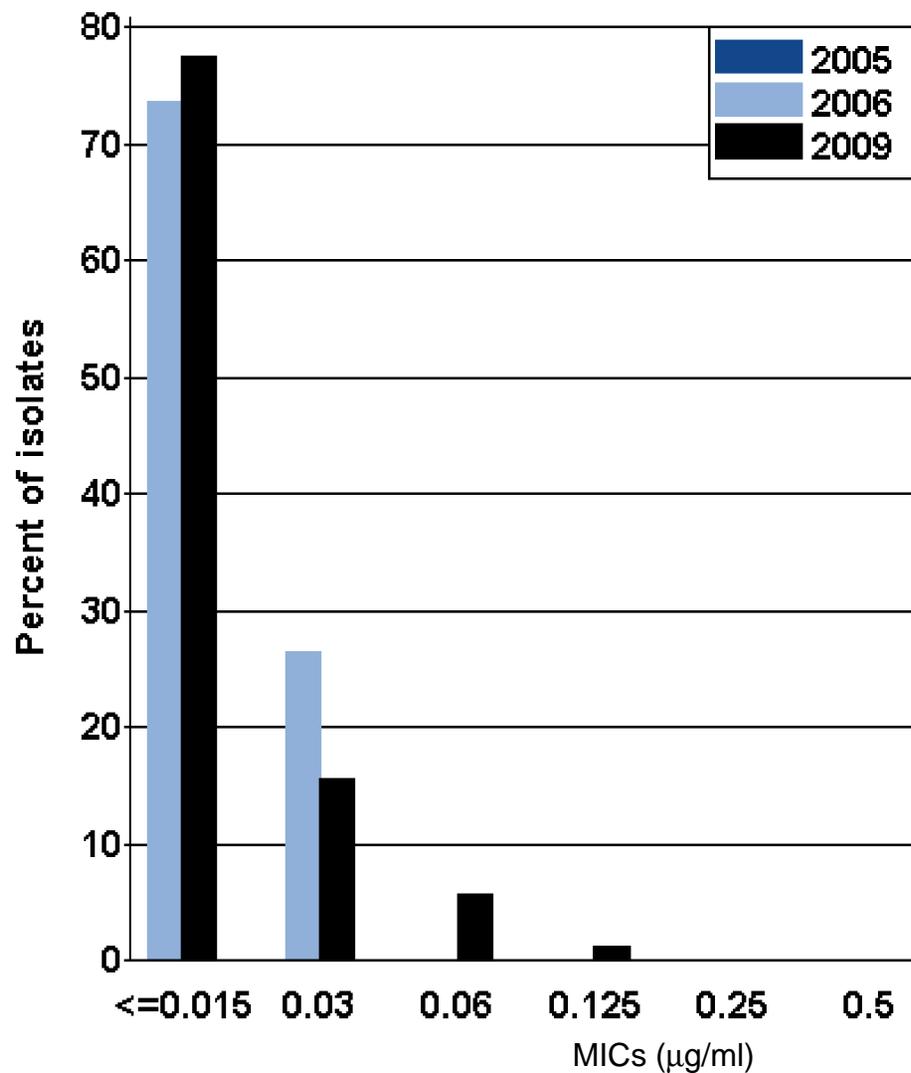
New York City, New York

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



New York City, New York

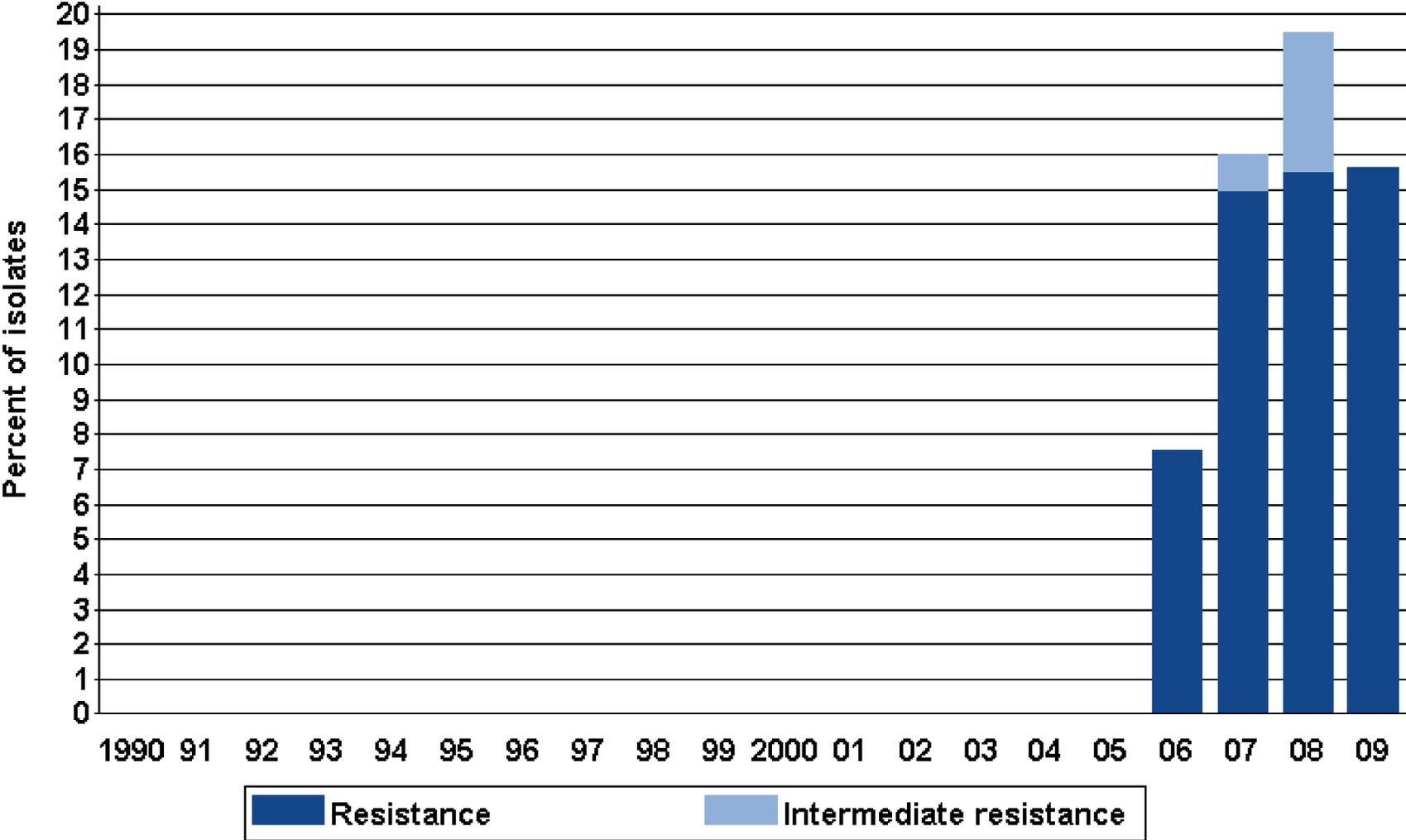
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

New York City, New York

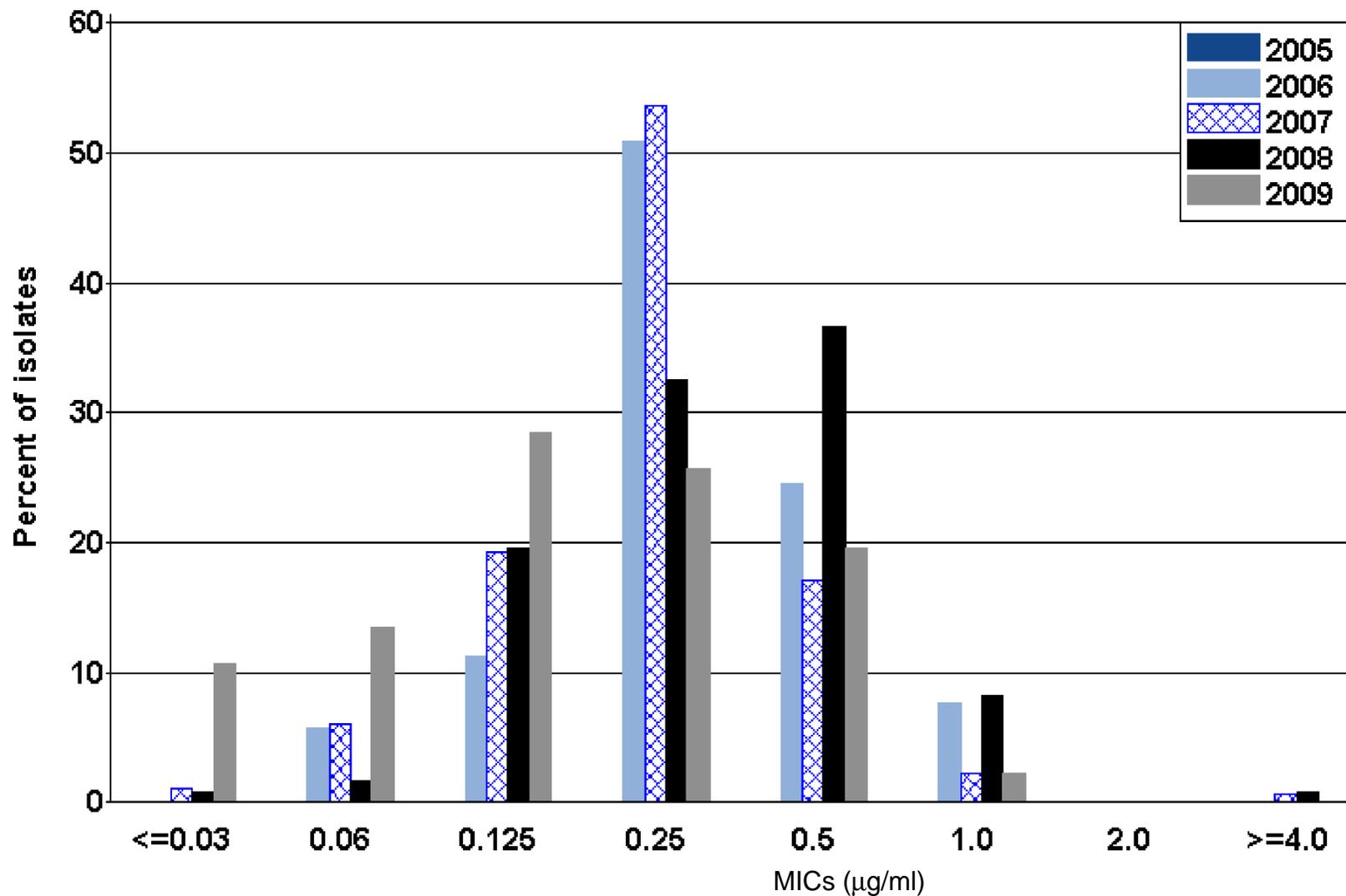
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

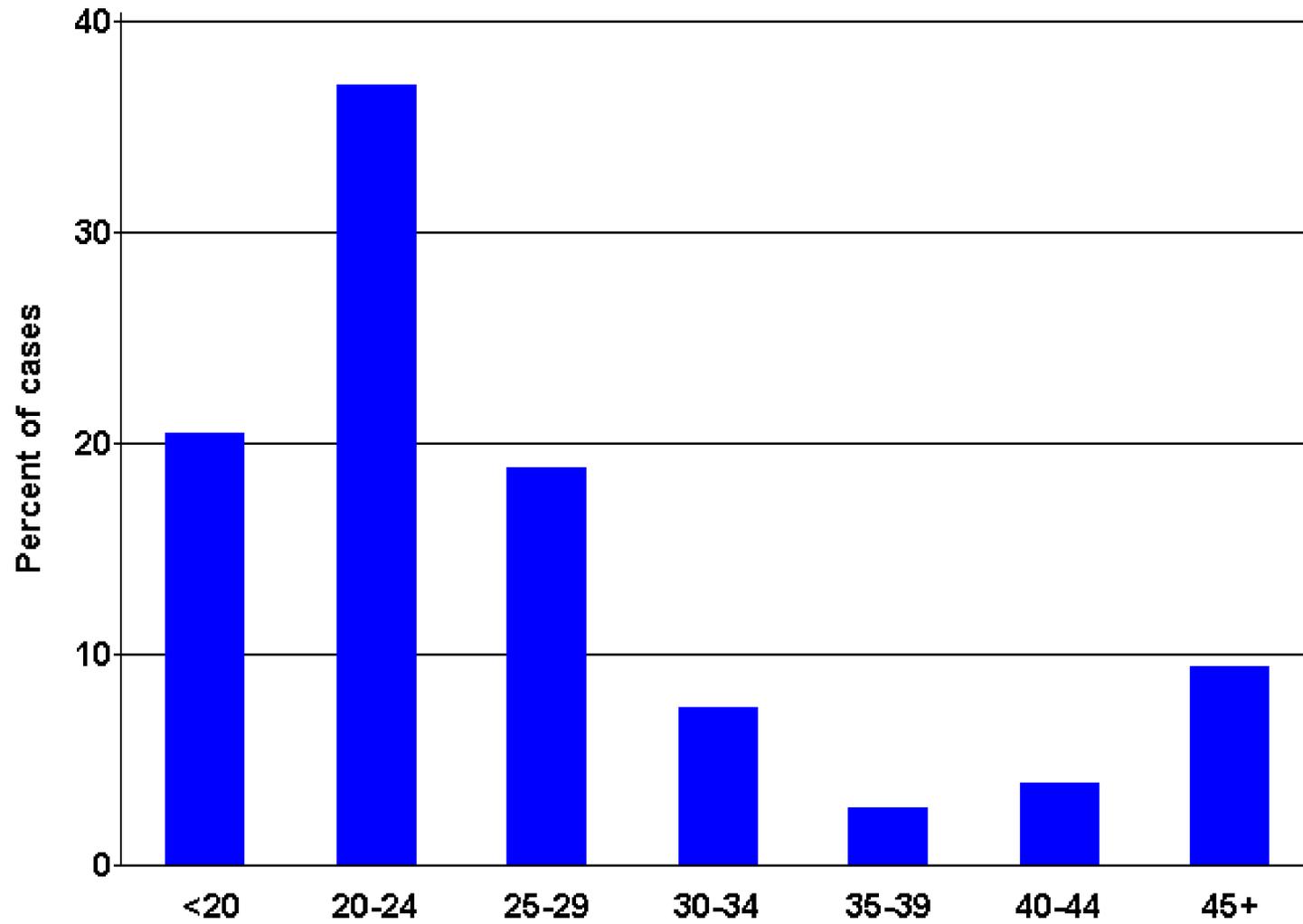
New York City, New York

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



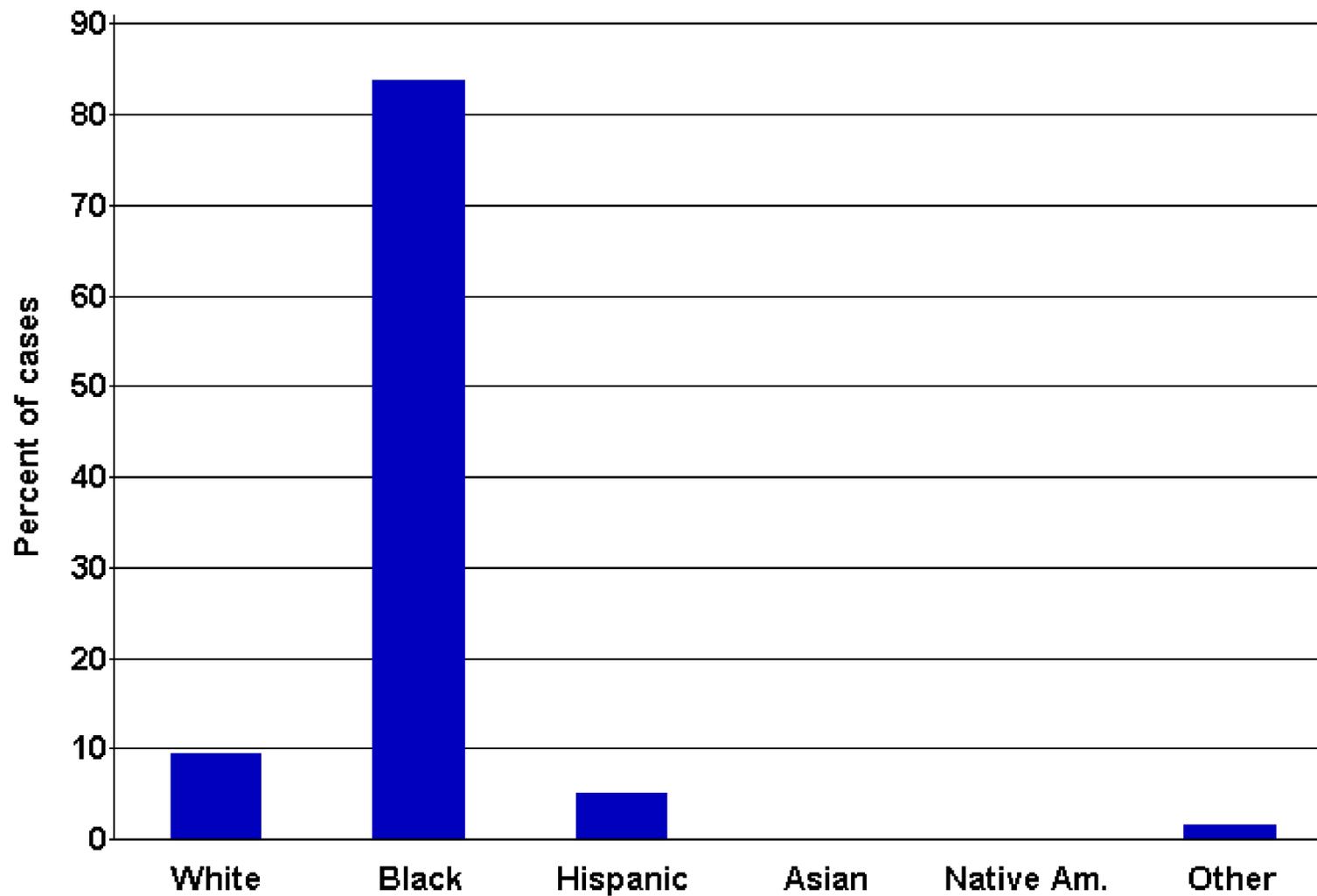
Oklahoma City, Oklahoma (N=254)

Figure A. Age of GISP participants, in years, 2009



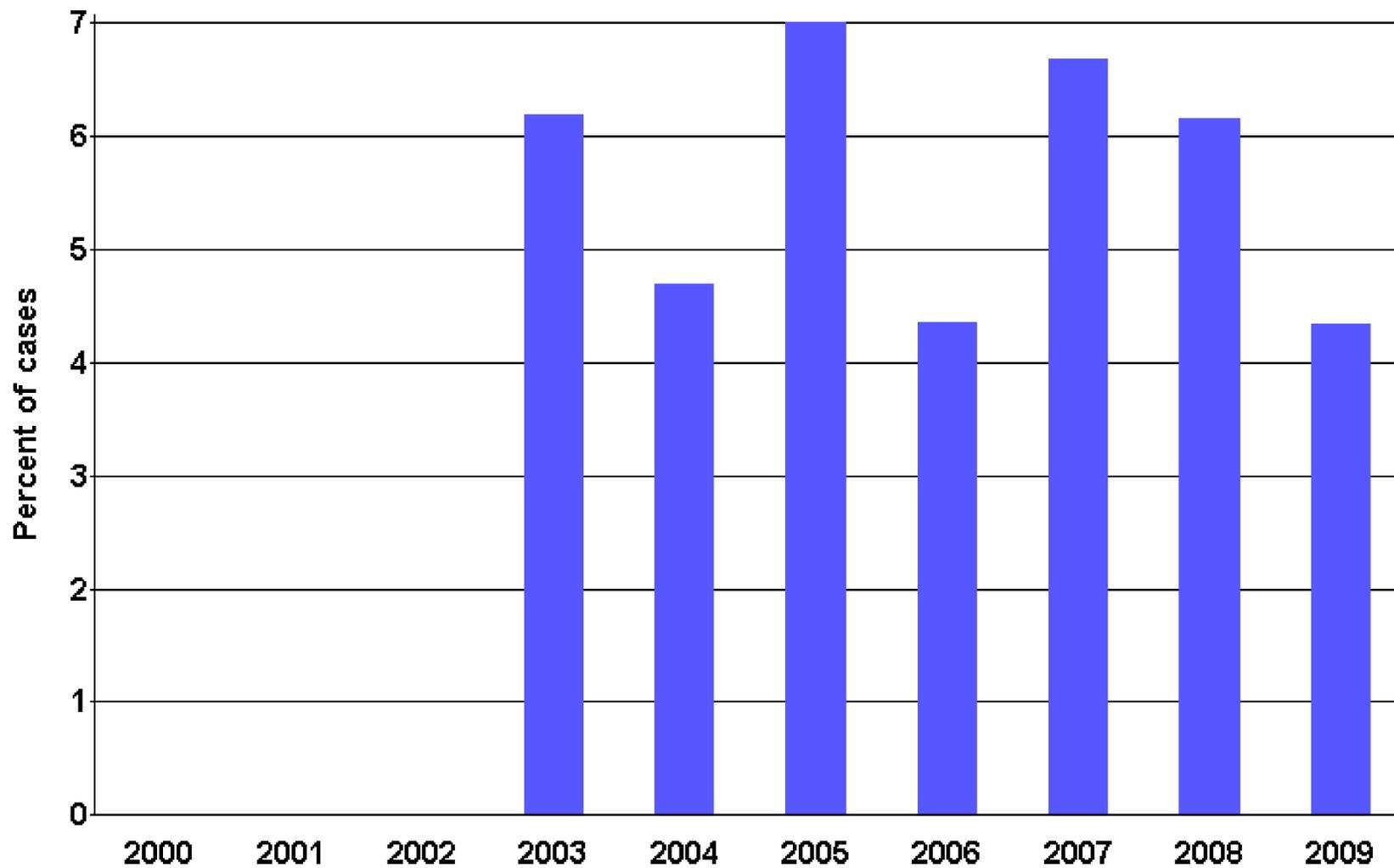
Oklahoma City, Oklahoma (N=254)

Figure B. Race/ethnicity of GISP participants, 2009



Oklahoma City, Oklahoma

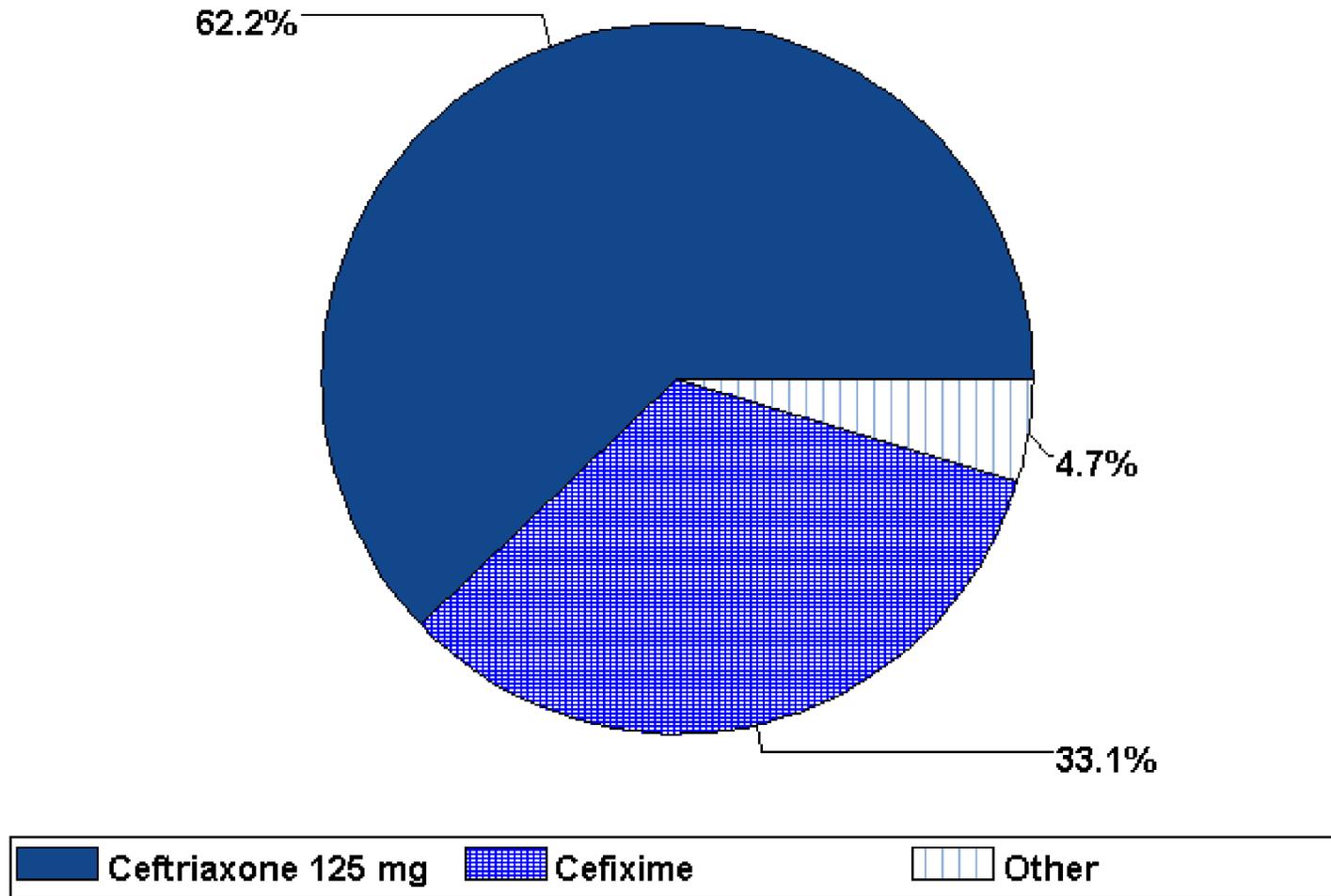
Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009*



*Note: Site participated in GISP from 2003-2009.

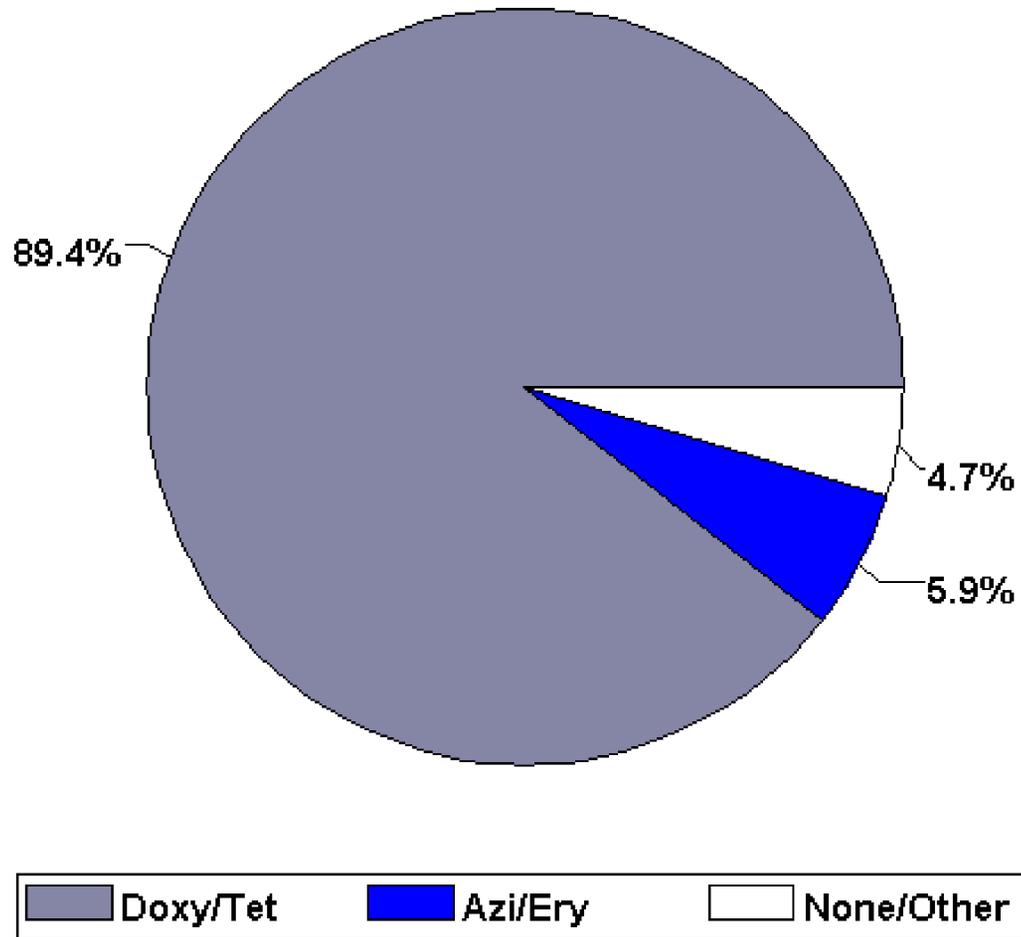
Oklahoma City, Oklahoma (N=254)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



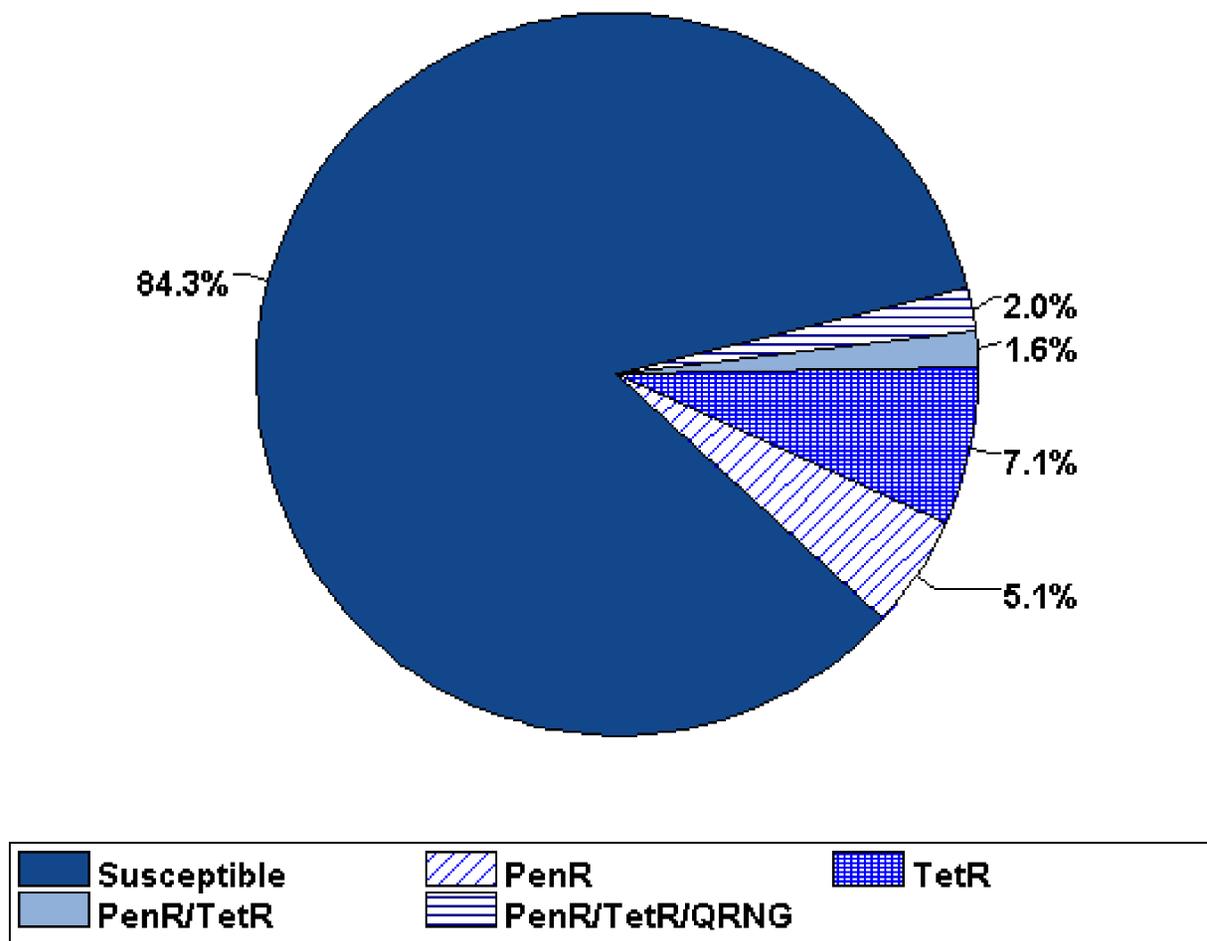
Oklahoma City, Oklahoma (N=254)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



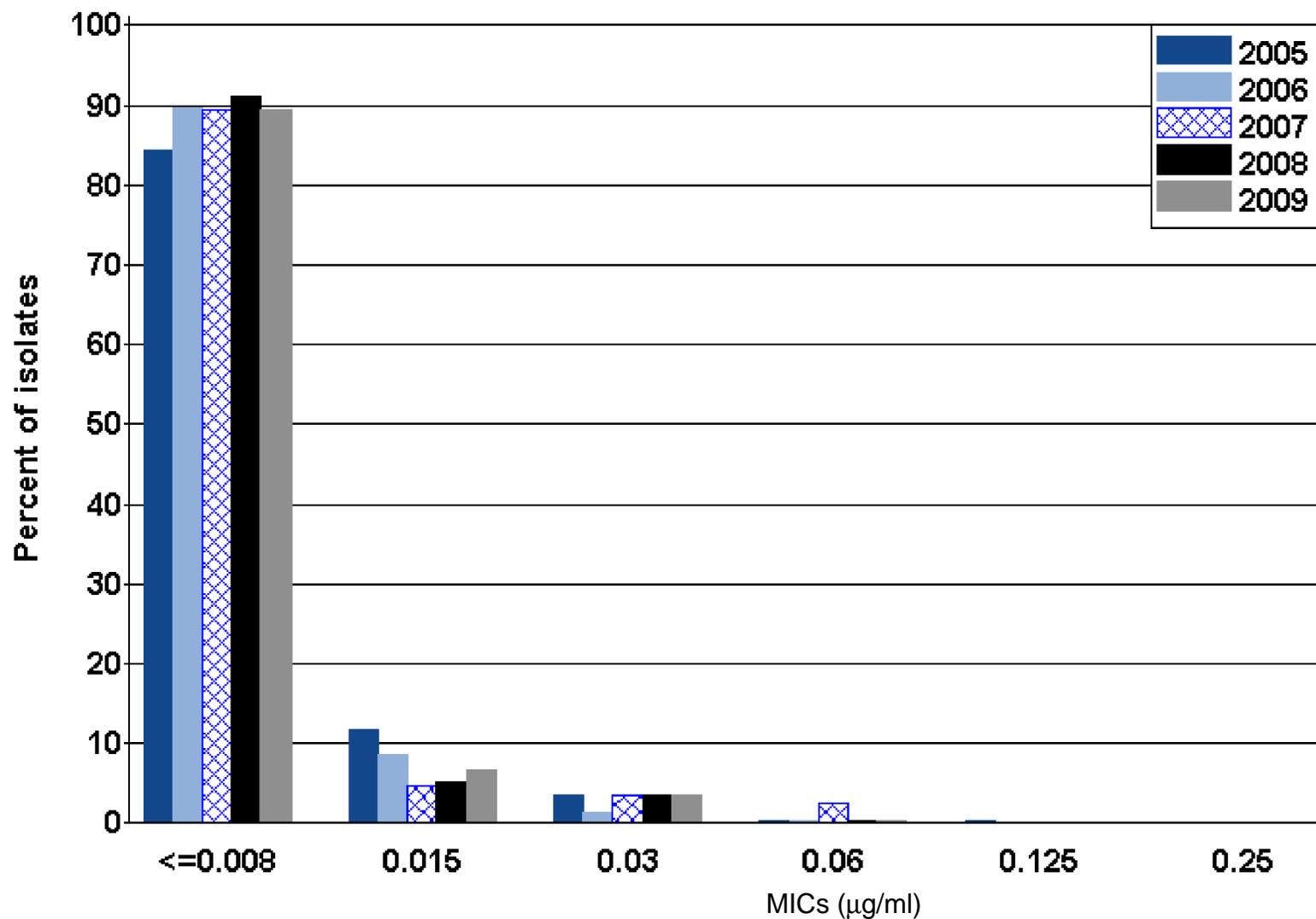
Oklahoma City, Oklahoma (N=254)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



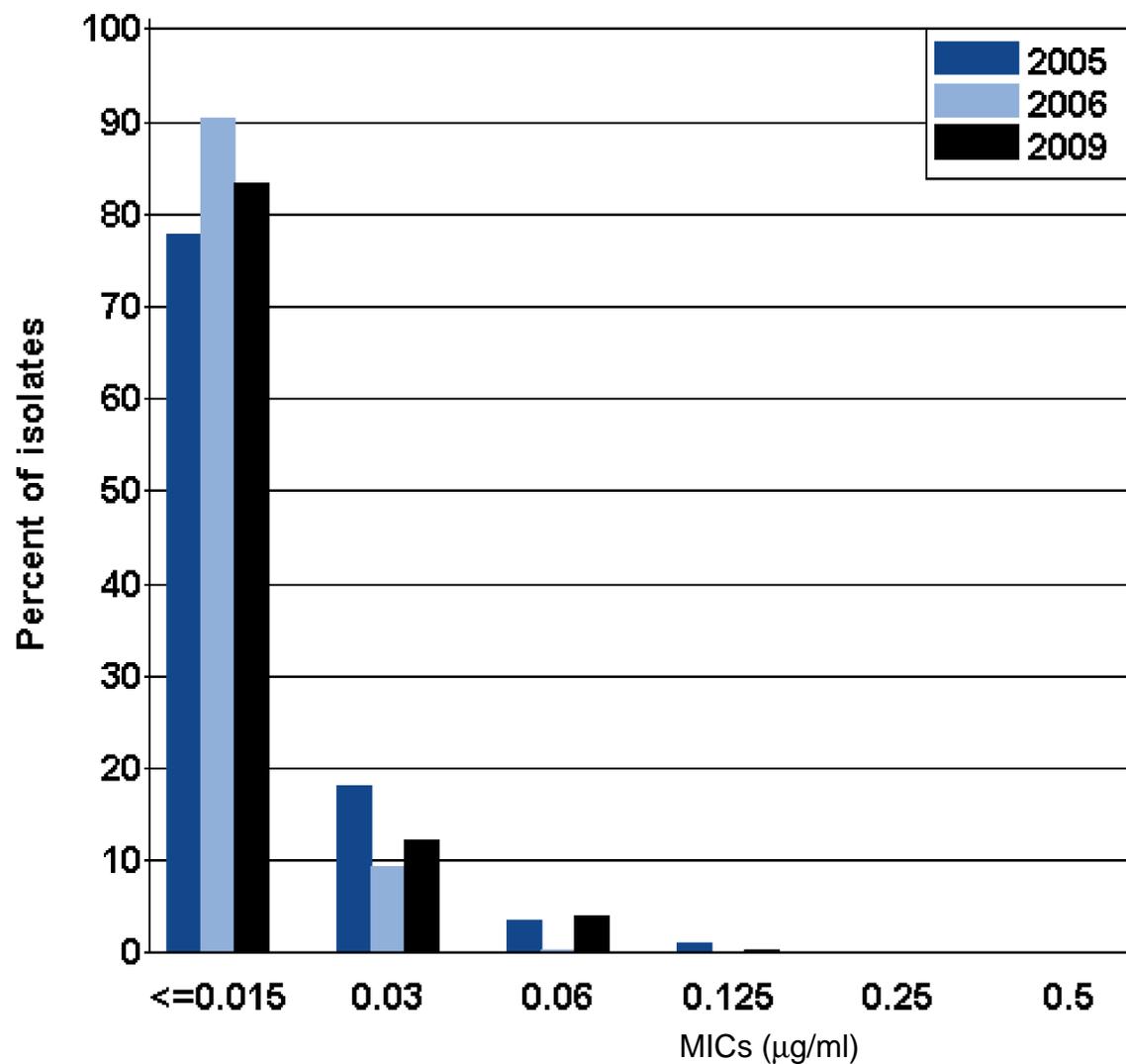
Oklahoma City, Oklahoma

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Oklahoma City, Oklahoma

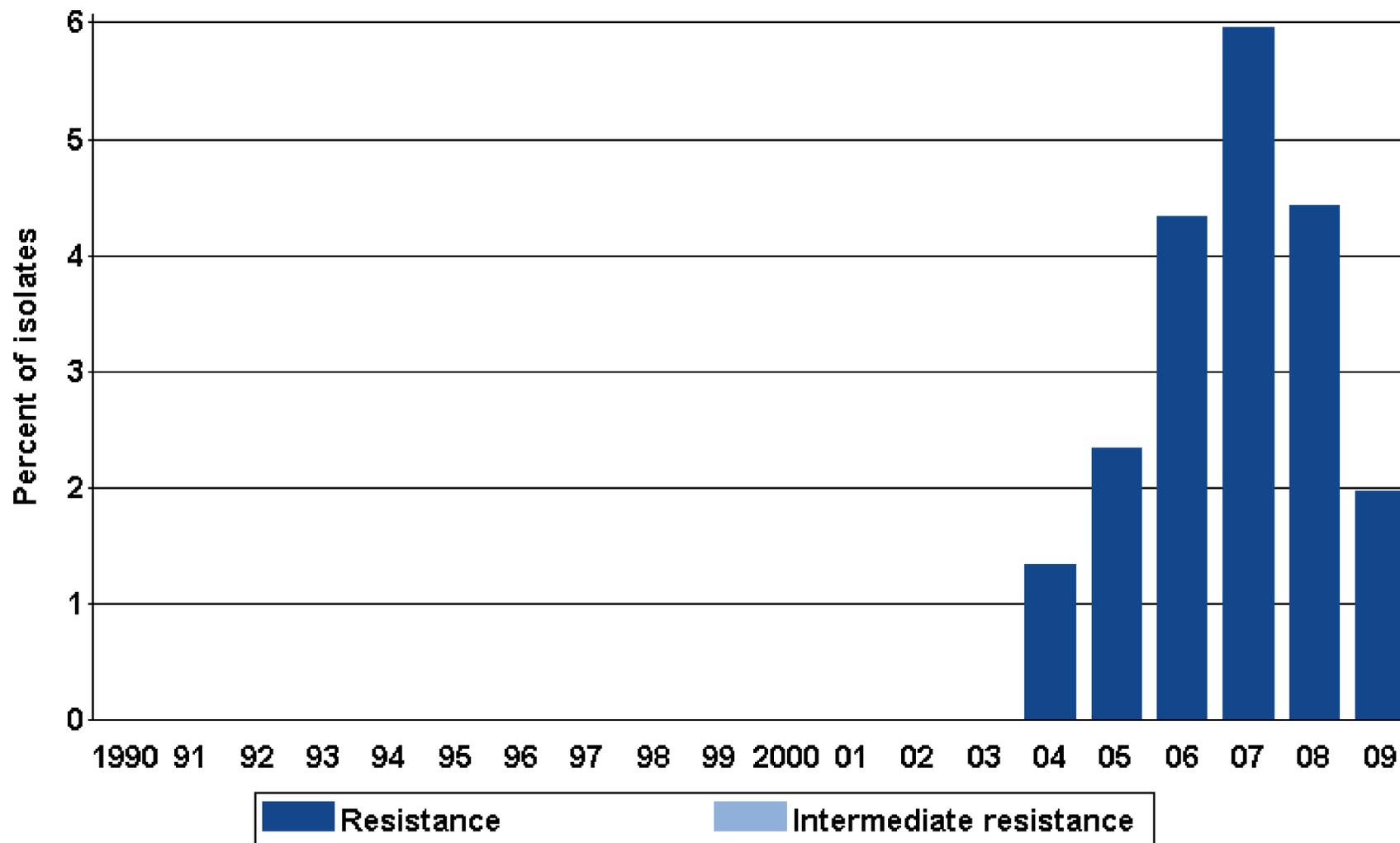
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Oklahoma City, Oklahoma

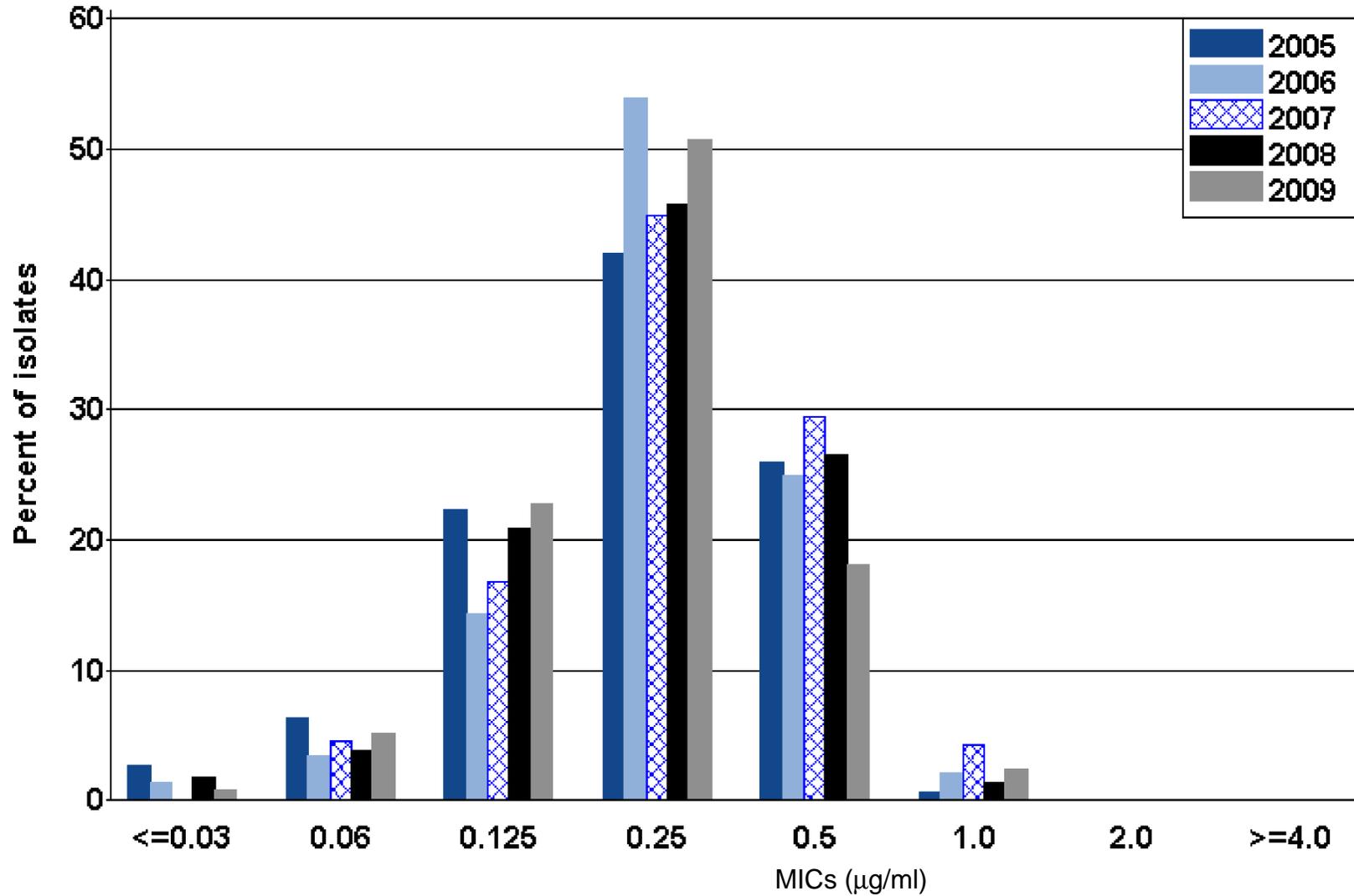
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

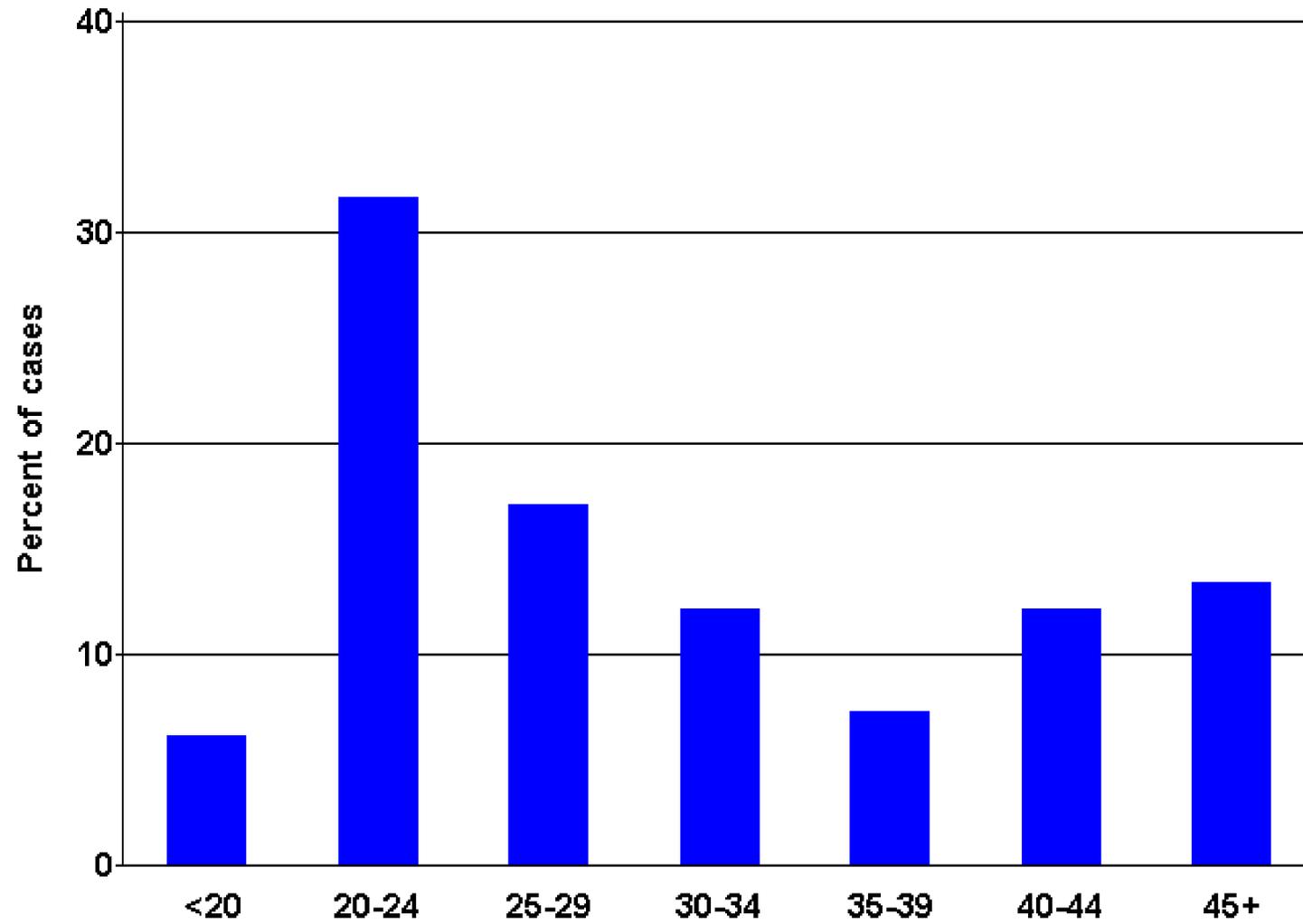
Oklahoma City, Oklahoma

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



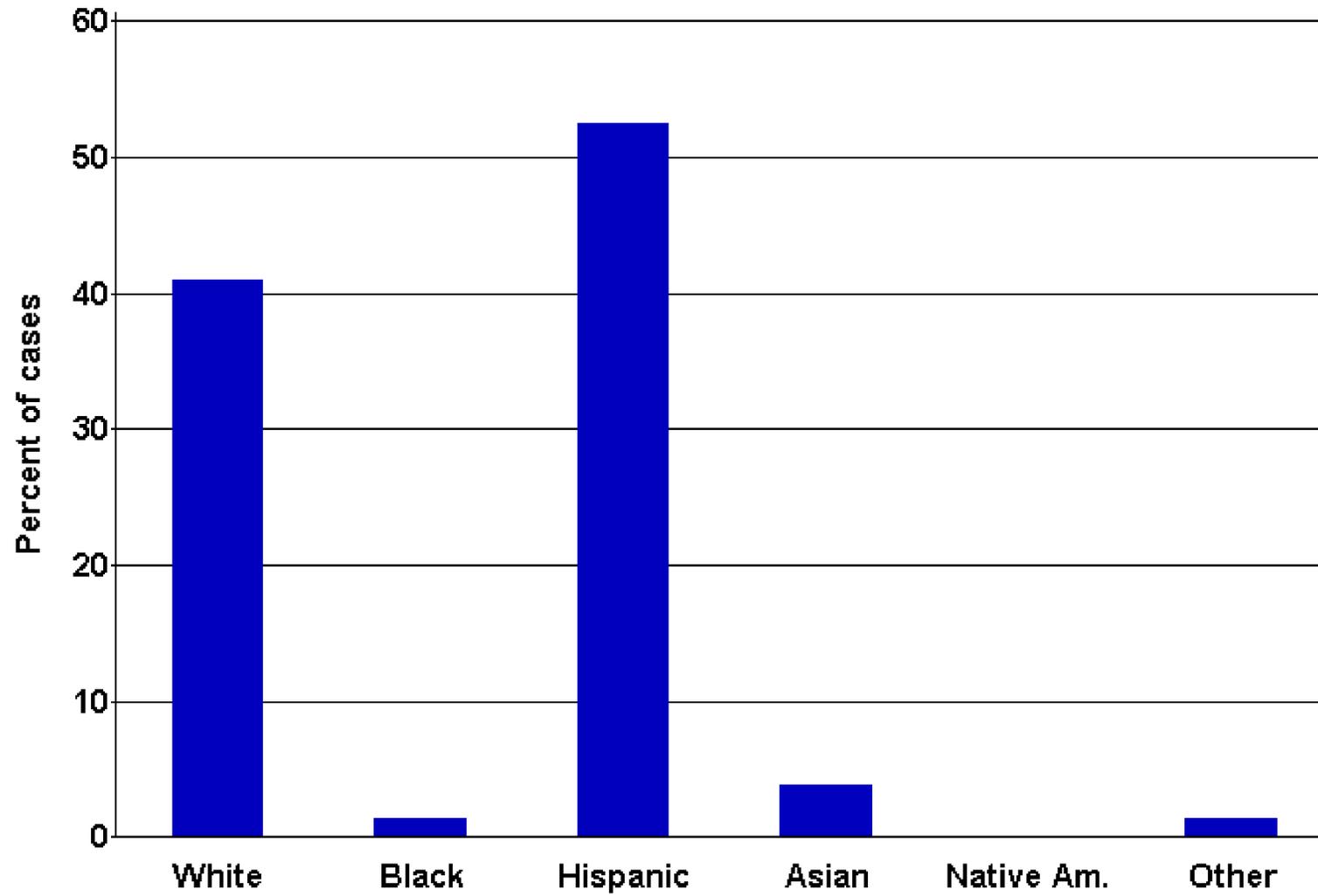
Orange County, California (N=82)

Figure A. Age of GISP participants, in years, 2009



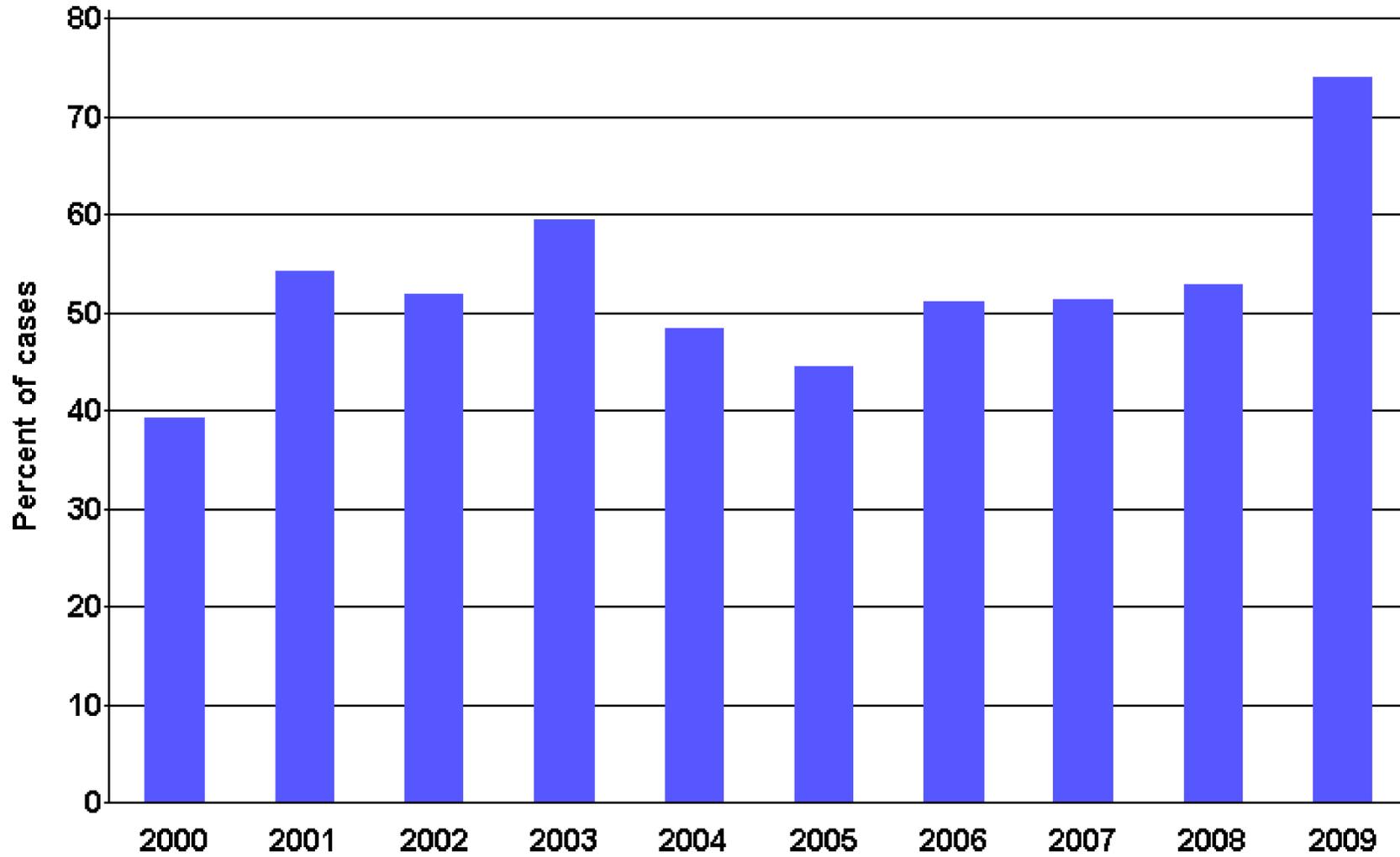
Orange County, California (N=82)

Figure B. Race/ethnicity of GISP participants, 2009



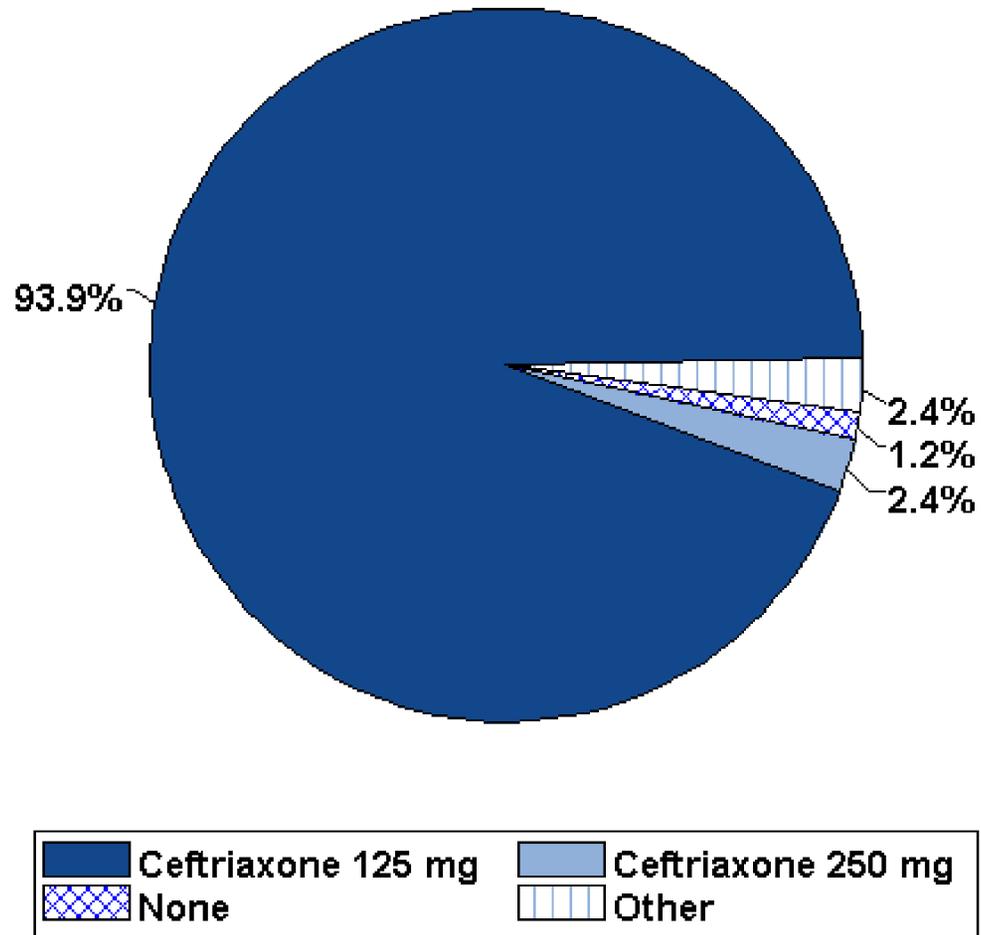
Orange County, California

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



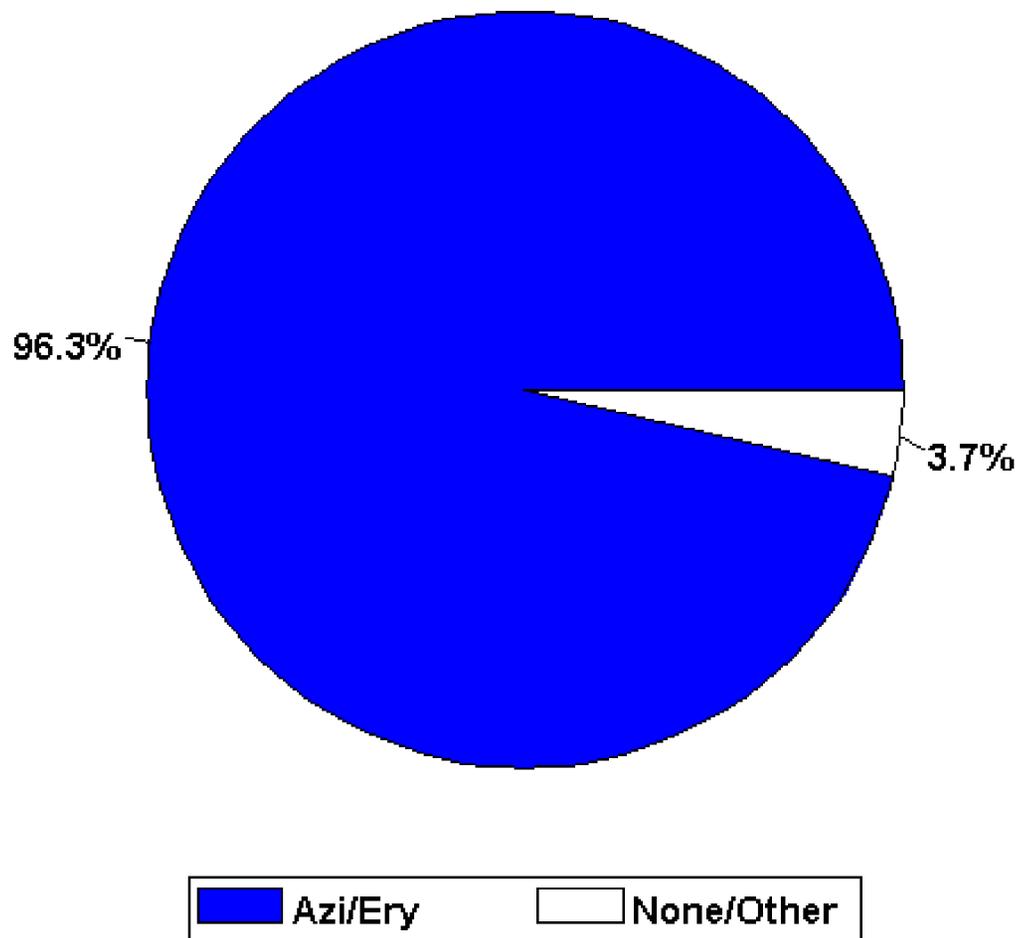
Orange County, California (N=82)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



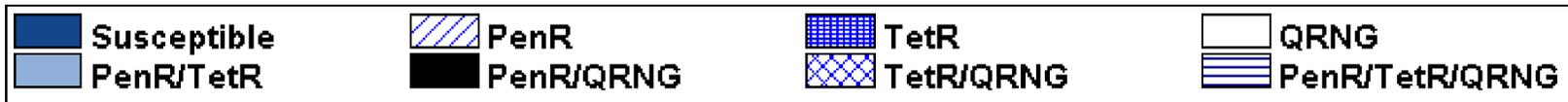
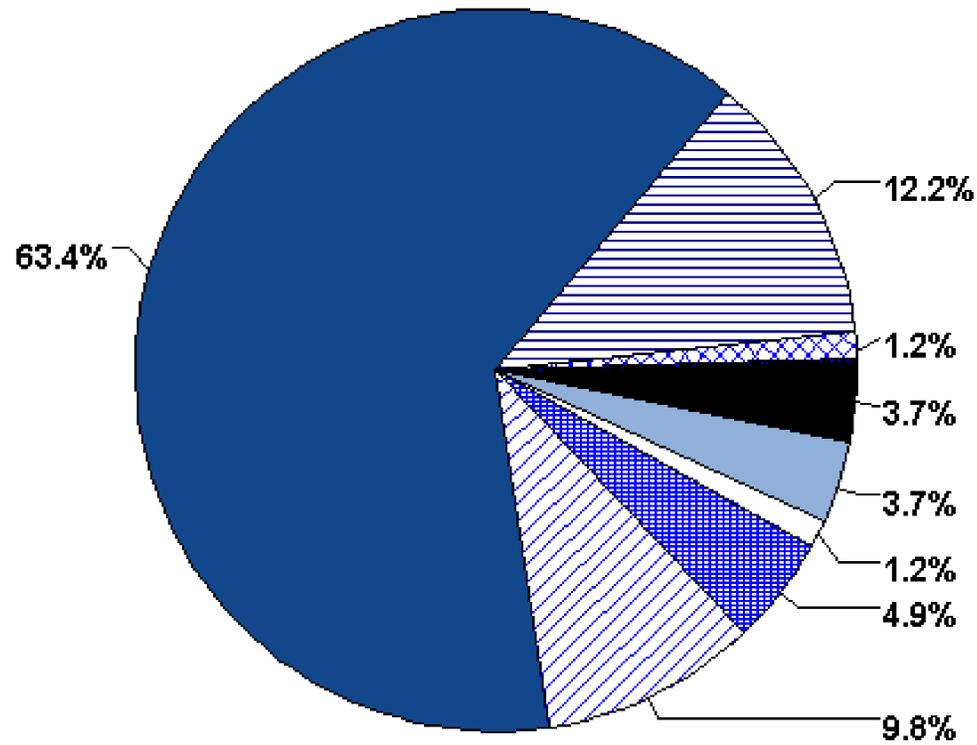
Orange County, California (N=82)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



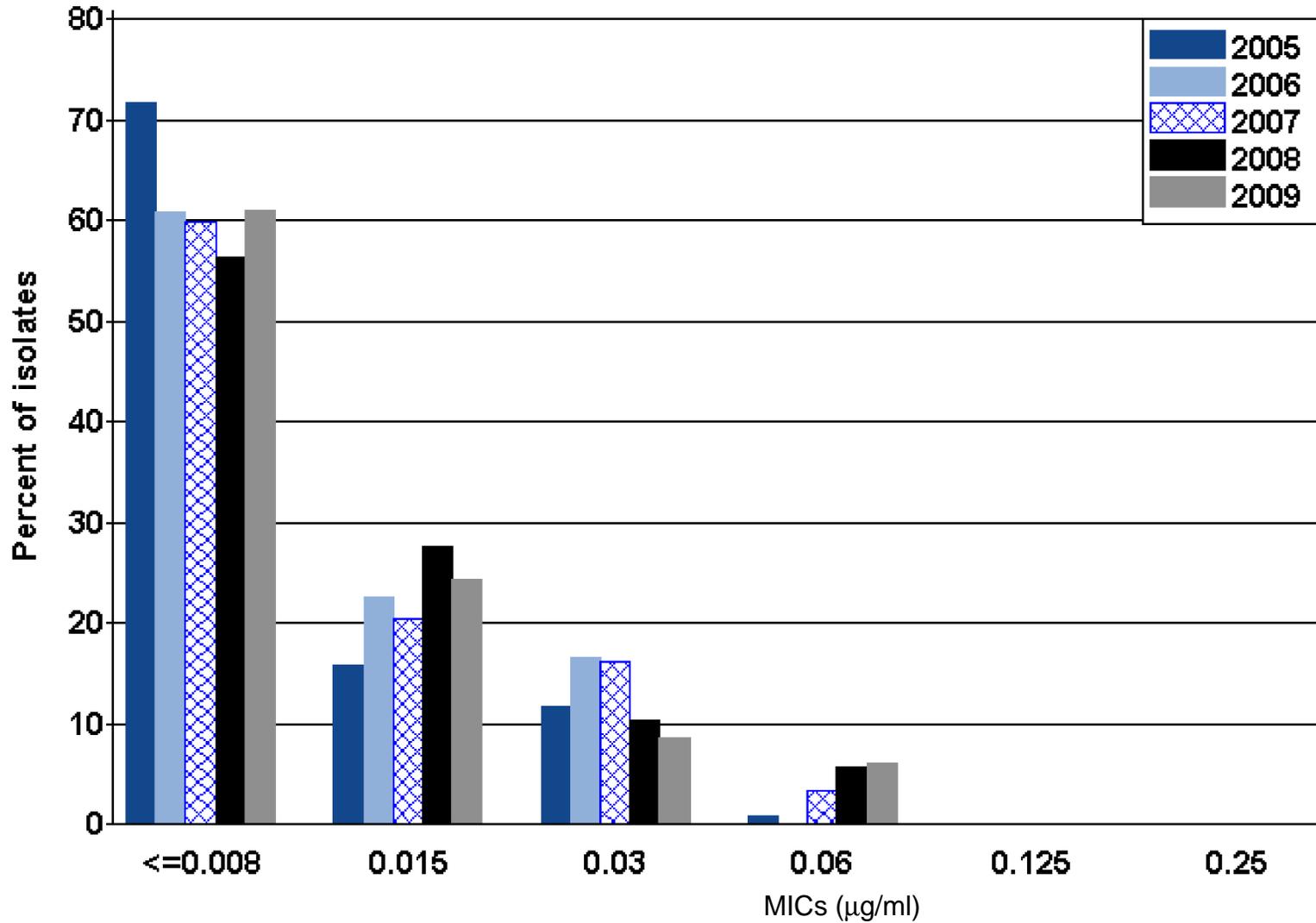
Orange County, California (N=82)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



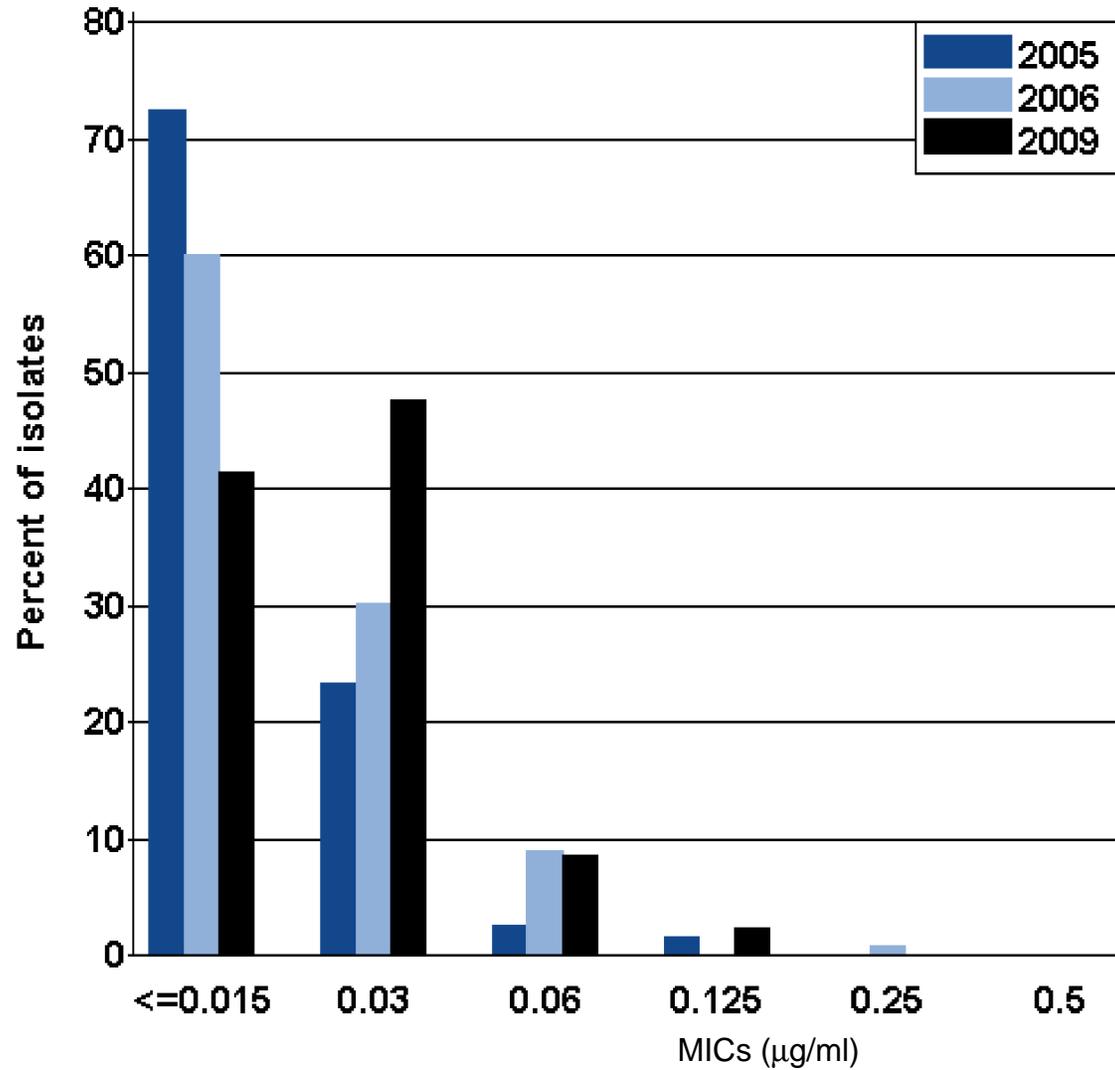
Orange County, California

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Orange County, California

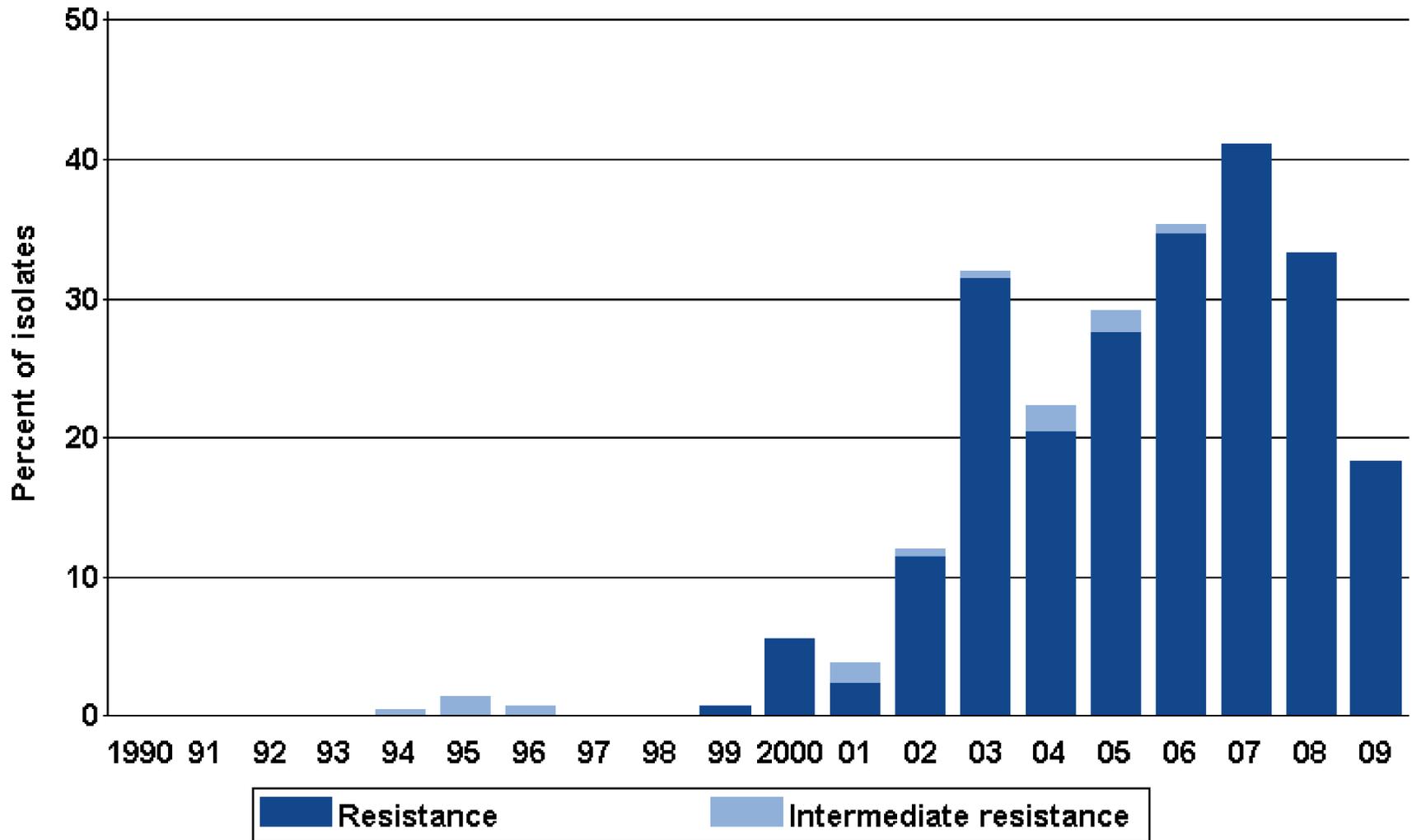
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Orange County, California

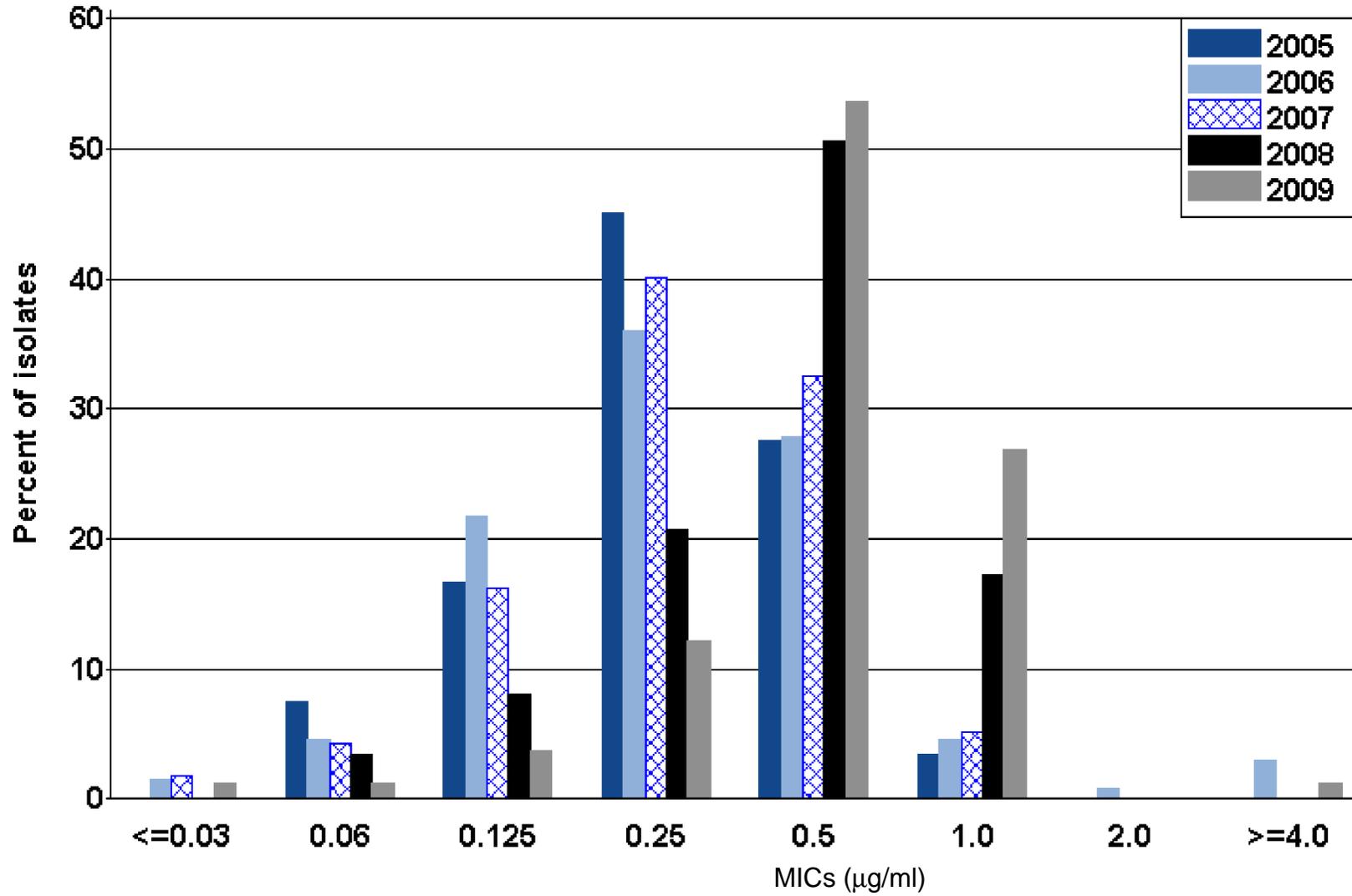
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

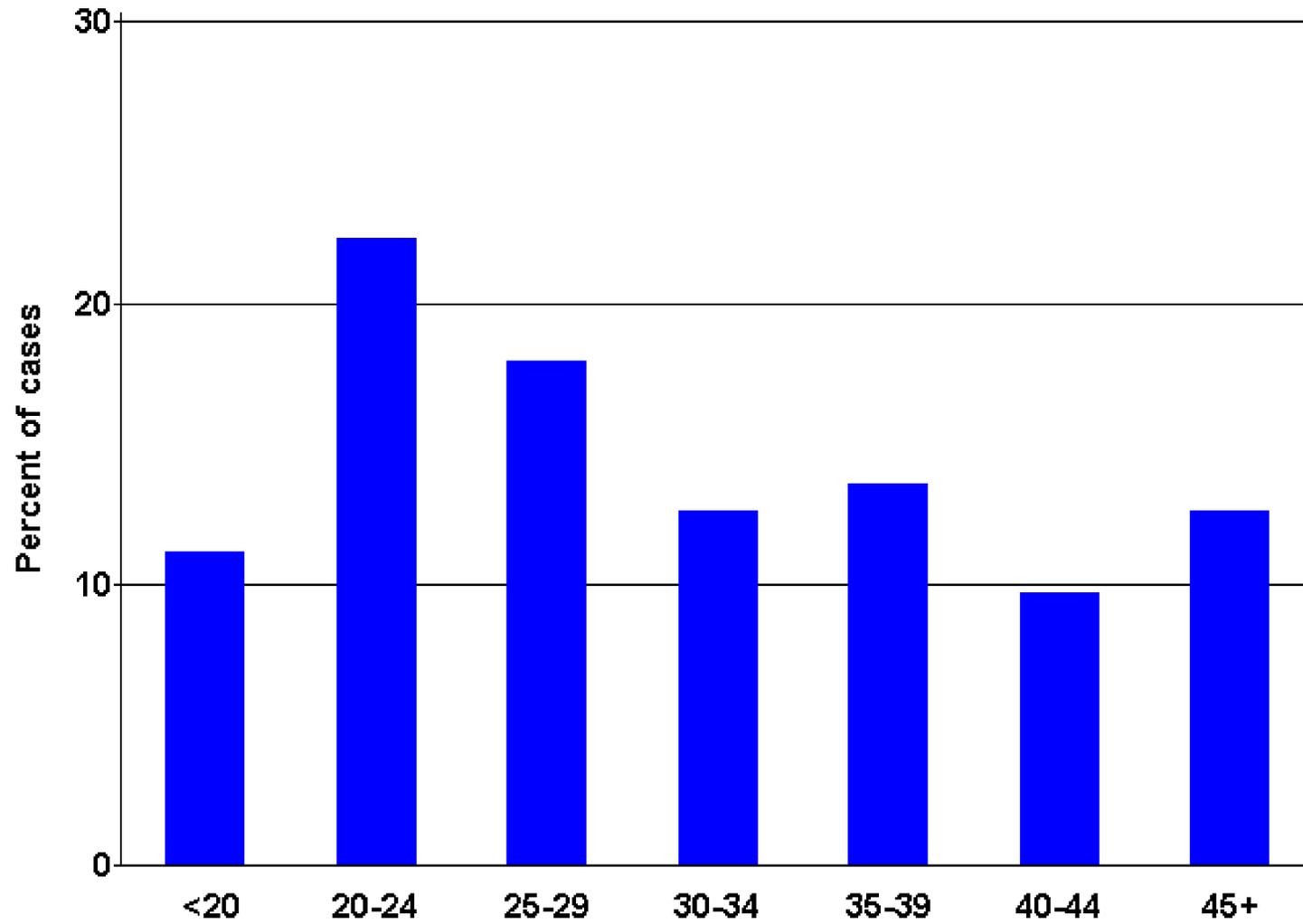
Orange County, California

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



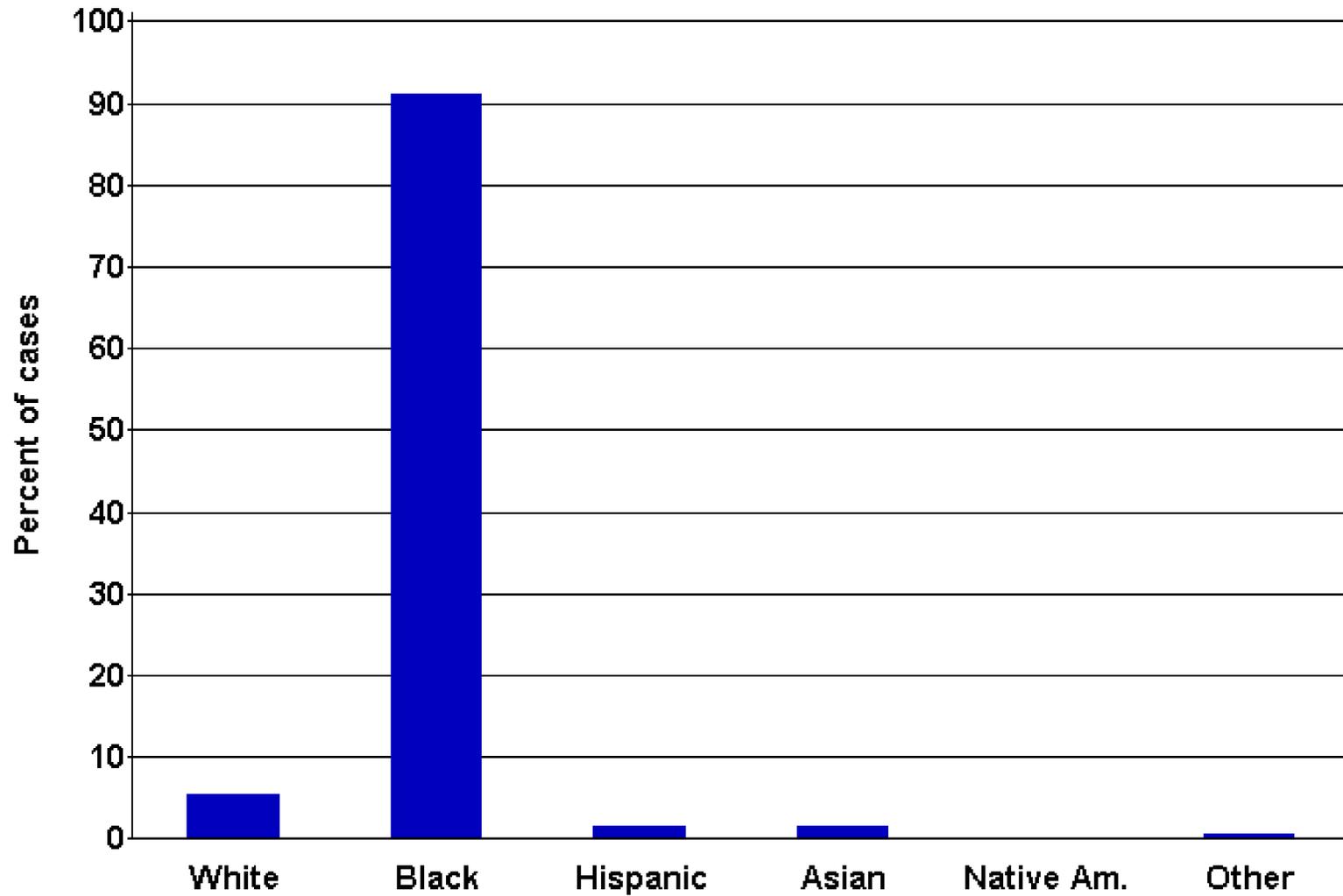
Philadelphia, Pennsylvania (N=206)

Figure A. Age of GISP participants, in years, 2009



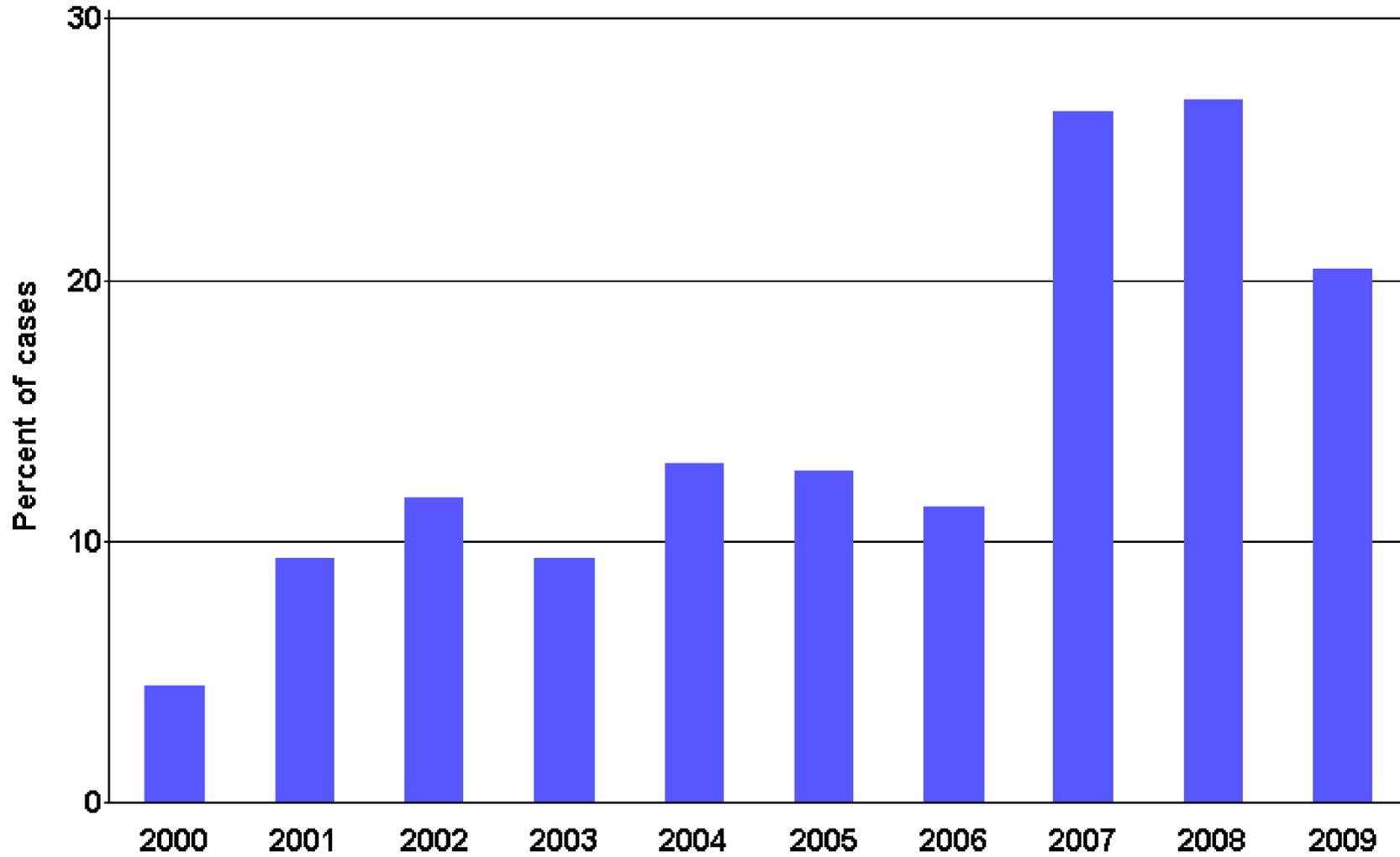
Philadelphia, Pennsylvania (N=206)

Figure B. Race/ethnicity of GISP participants, 2009



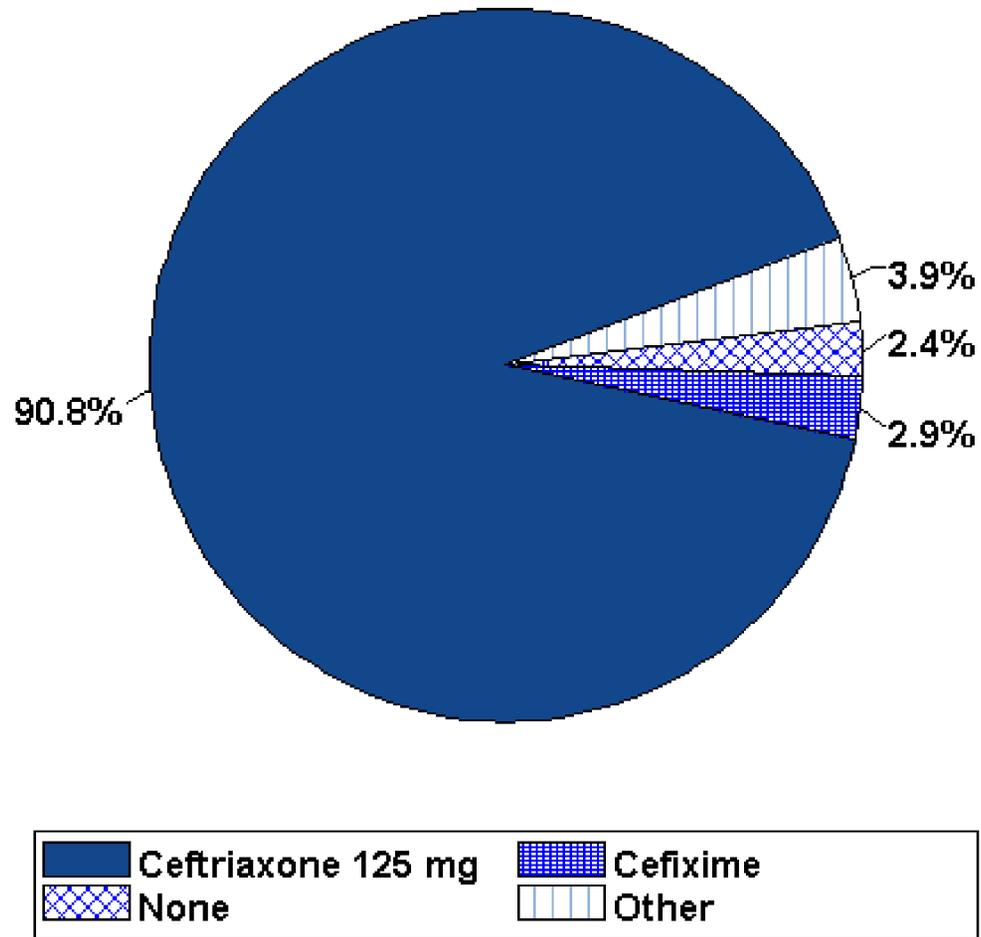
Philadelphia, Pennsylvania

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



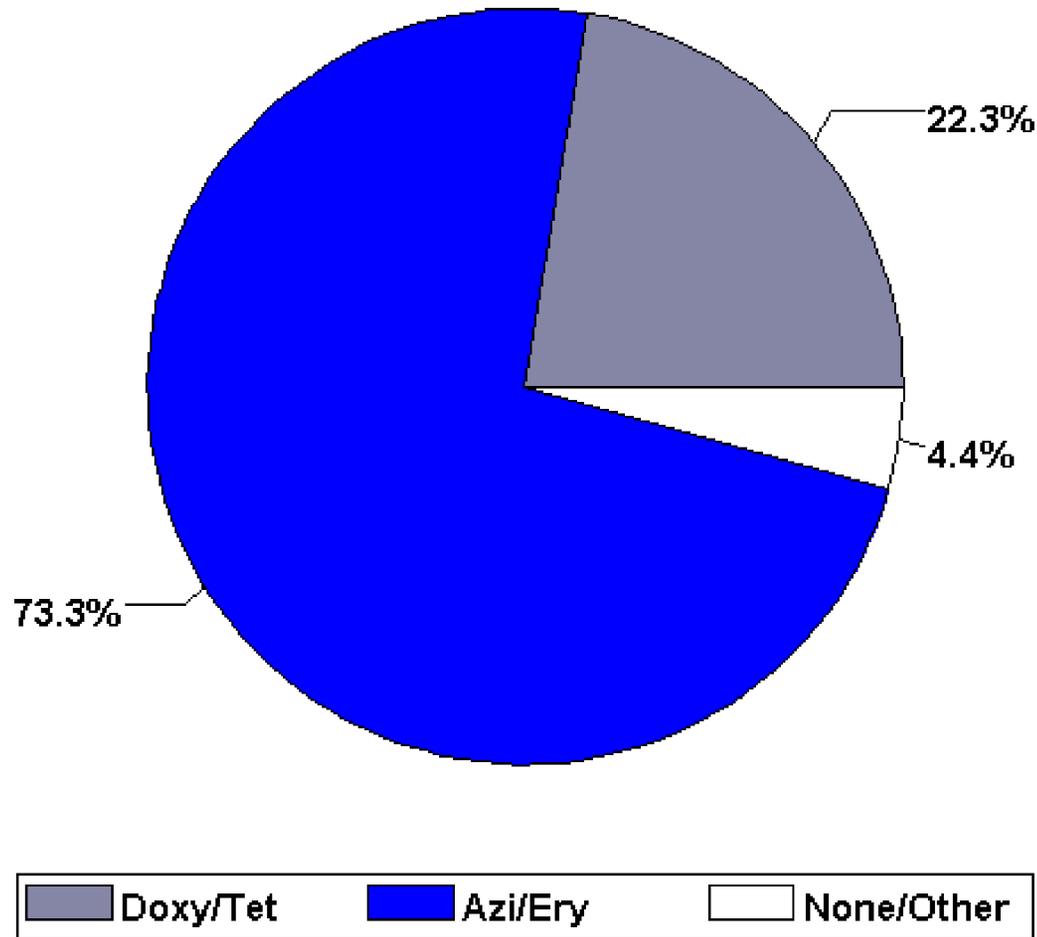
Philadelphia, Pennsylvania (N=206)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



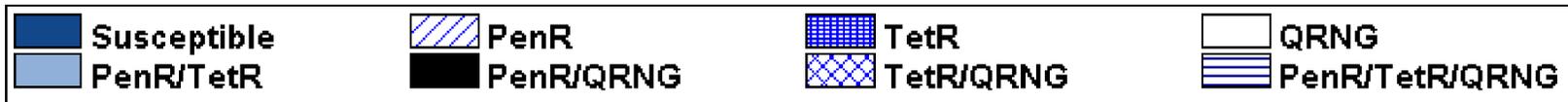
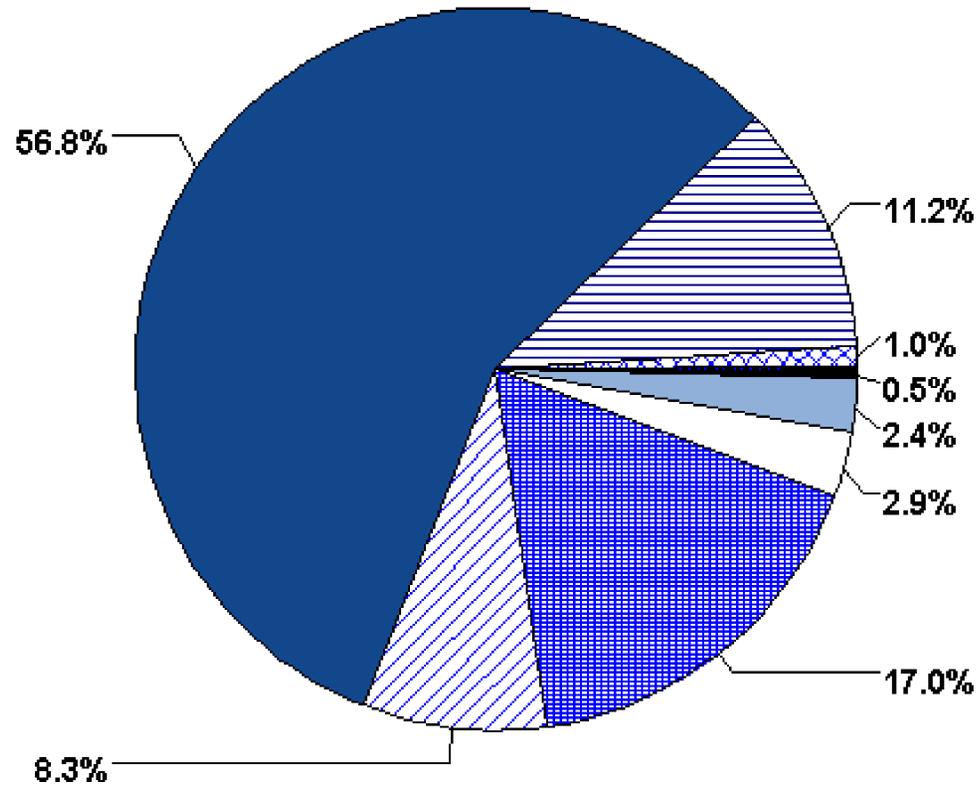
Philadelphia, Pennsylvania (N=206)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



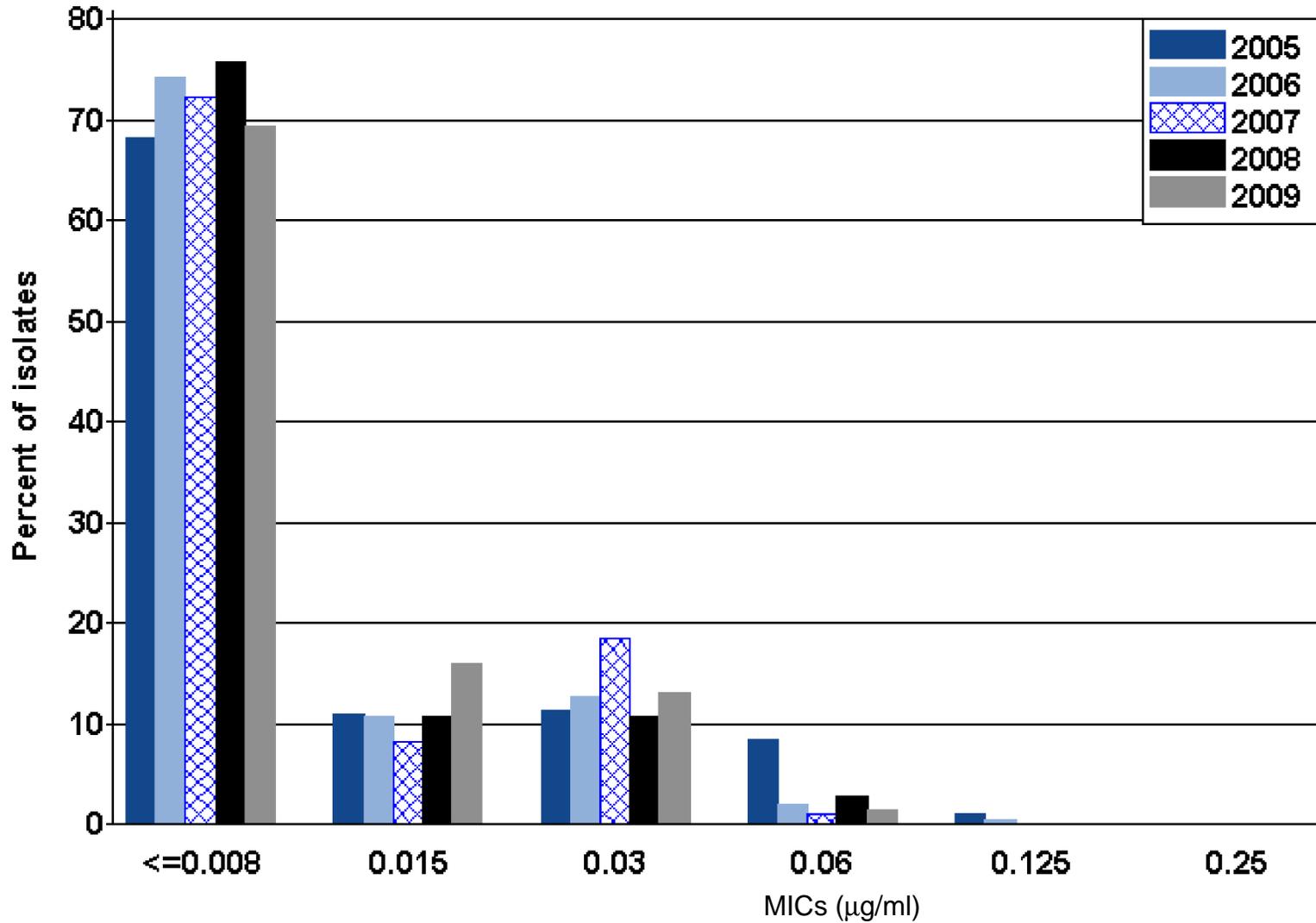
Philadelphia, Pennsylvania (N=206)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



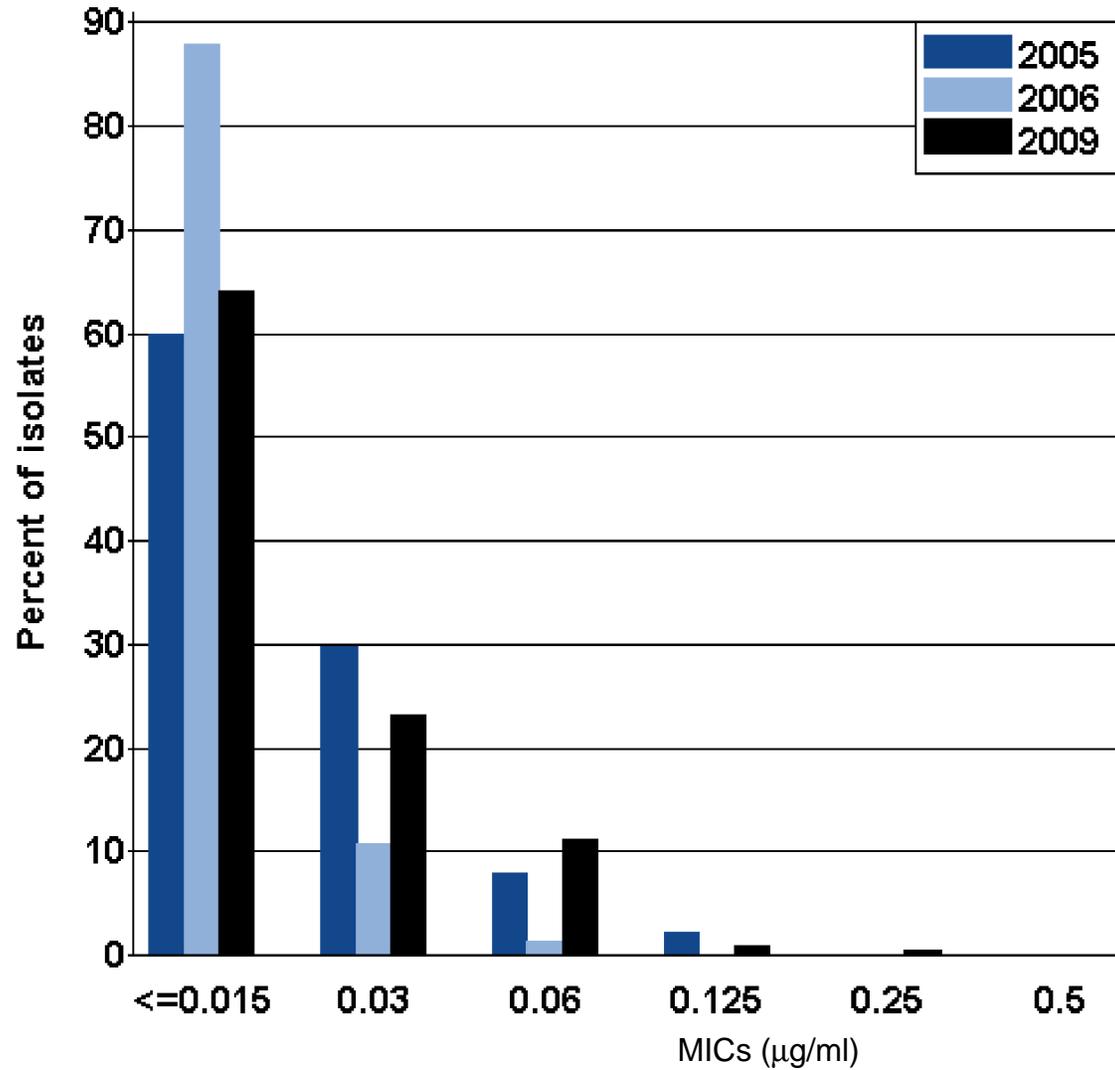
Philadelphia, Pennsylvania

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Philadelphia, Pennsylvania

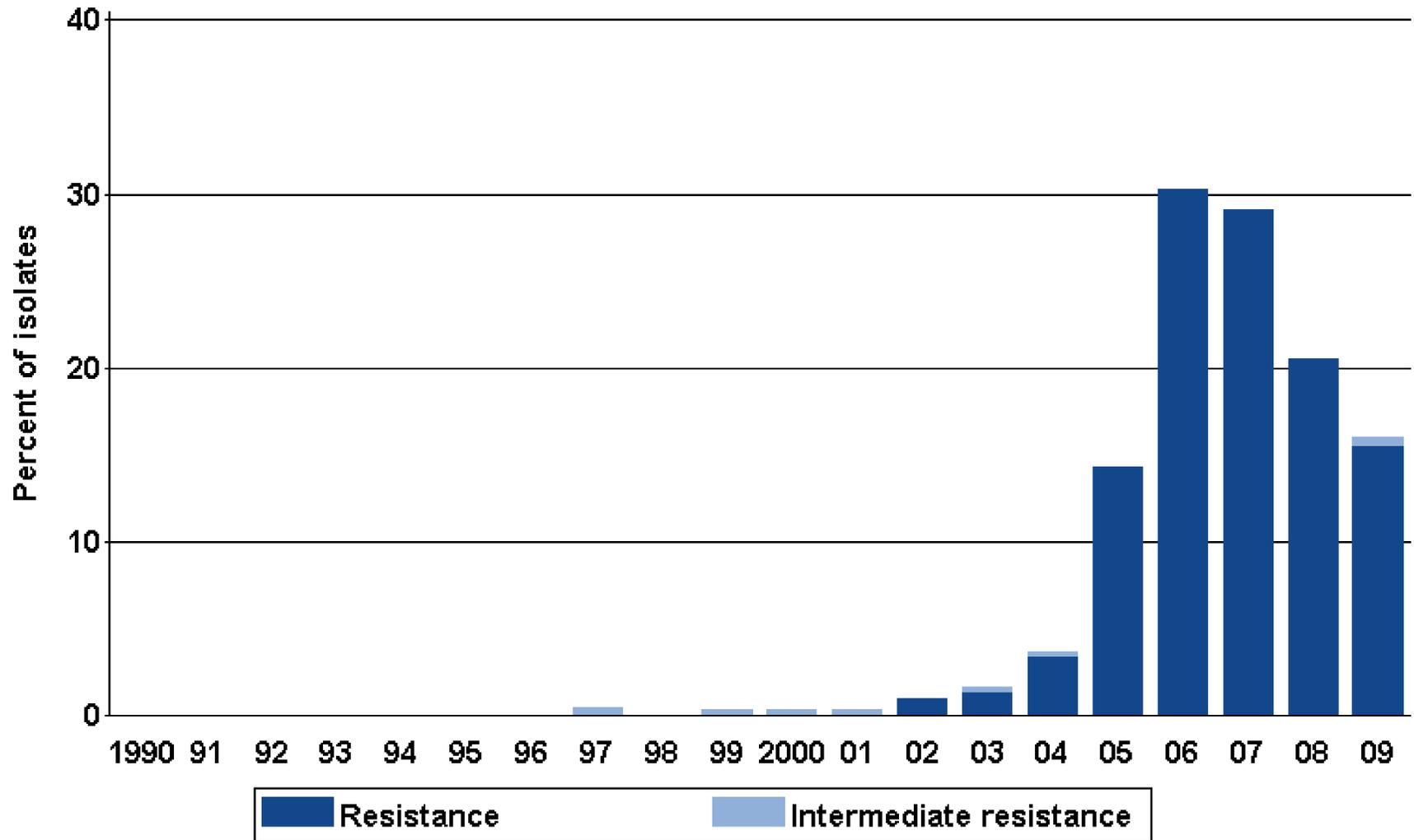
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Philadelphia, Pennsylvania

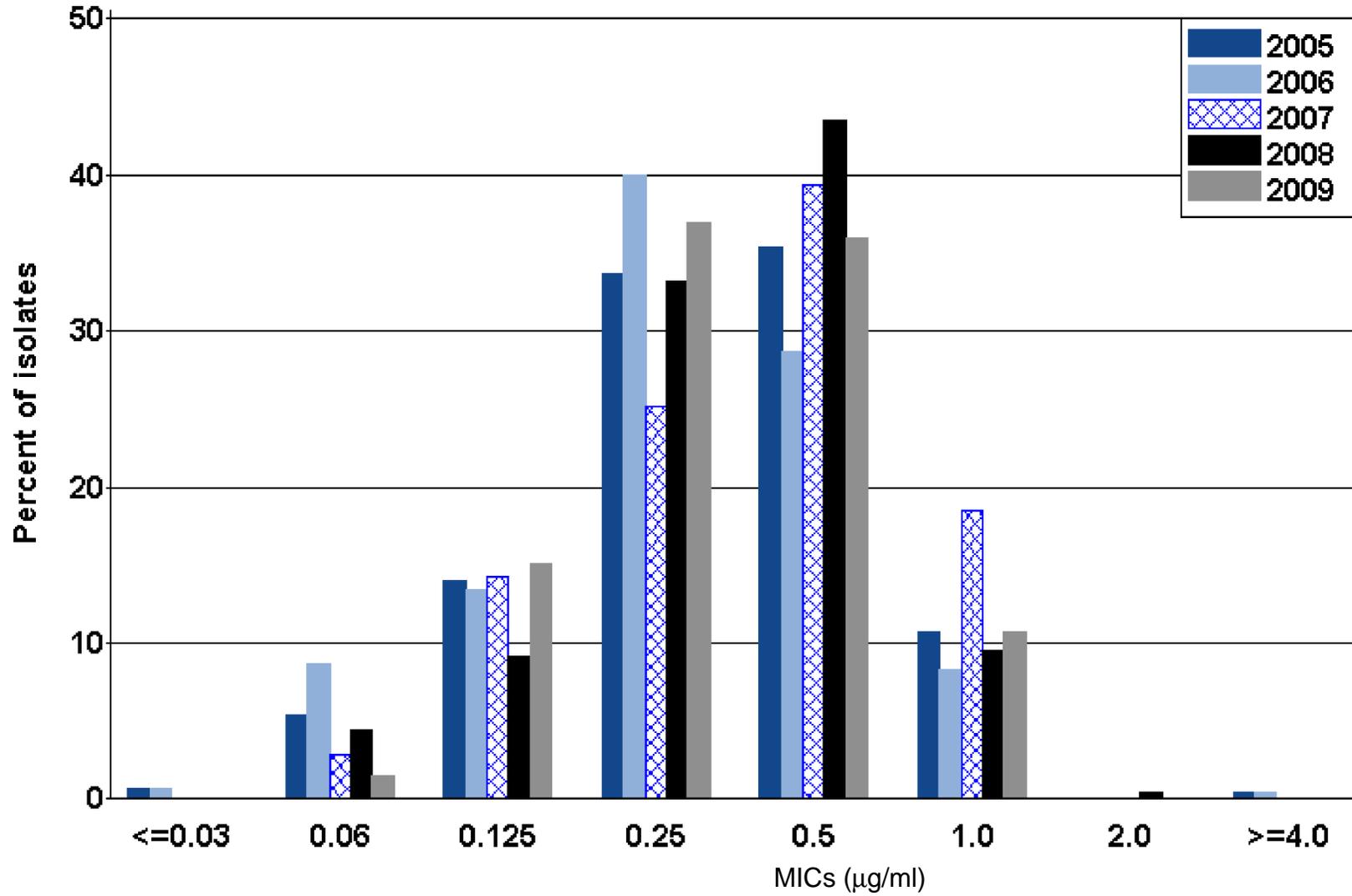
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

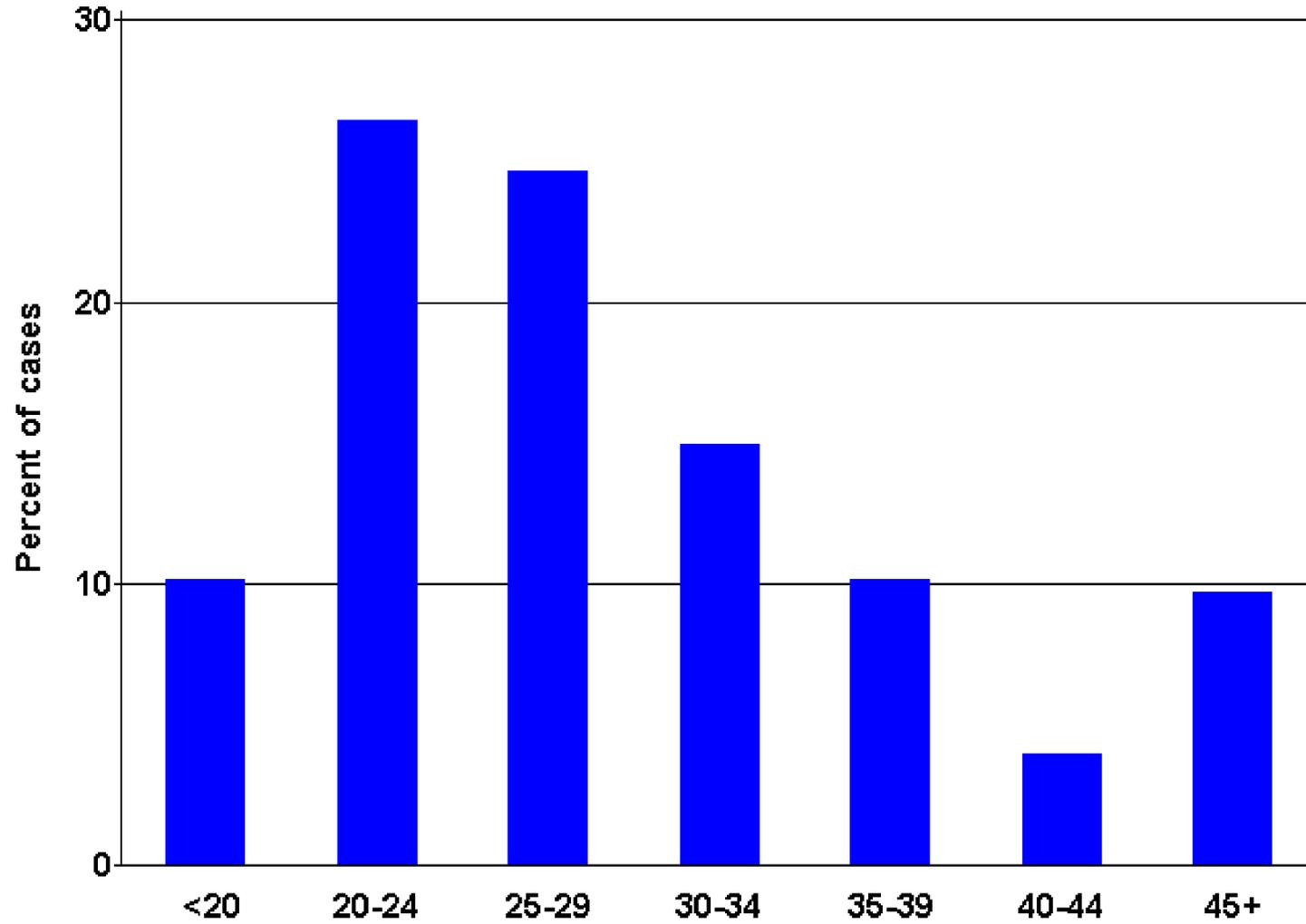
Philadelphia, Pennsylvania

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



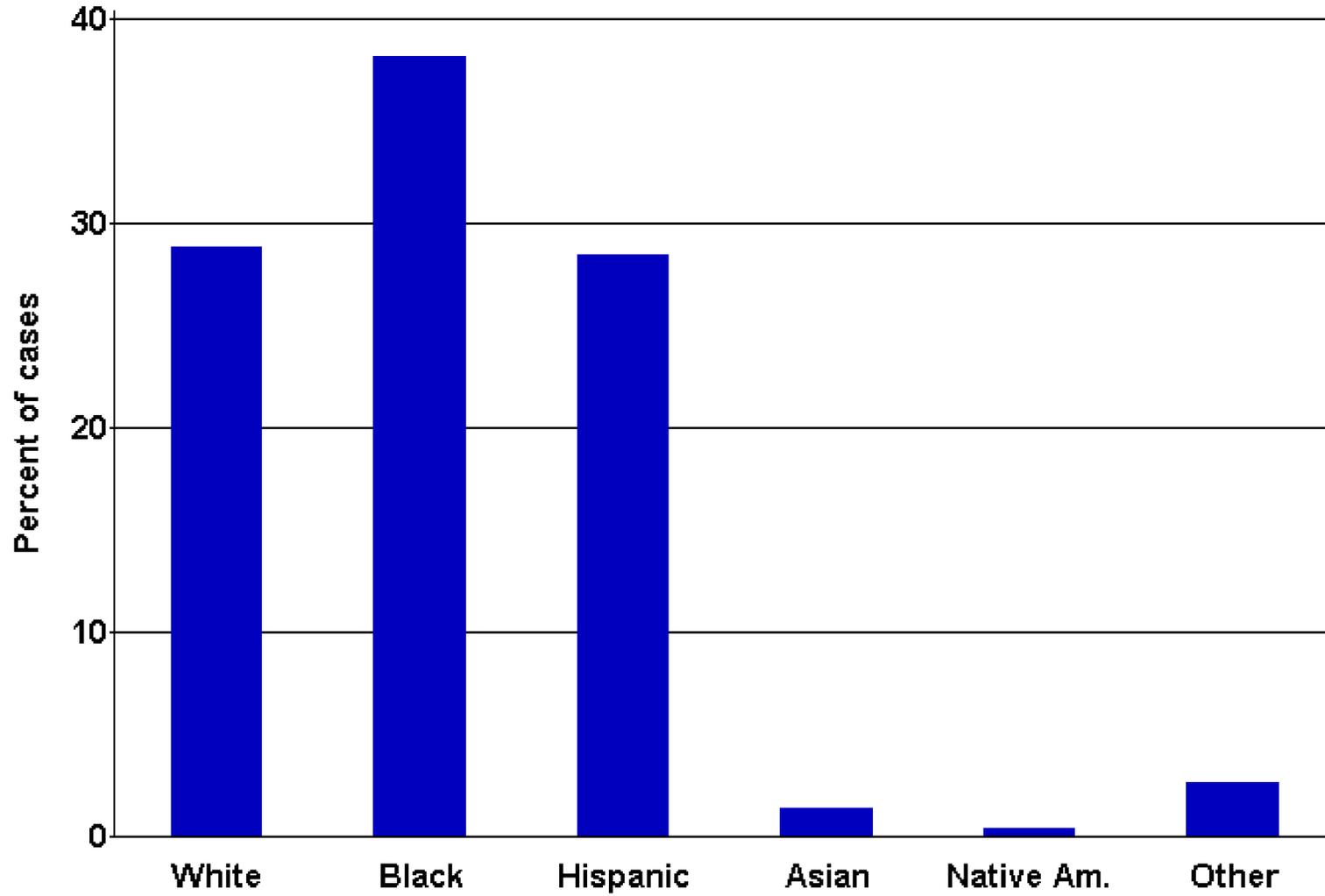
Phoenix, Arizona (N=227)

Figure A. Age of GISP participants, in years, 2009



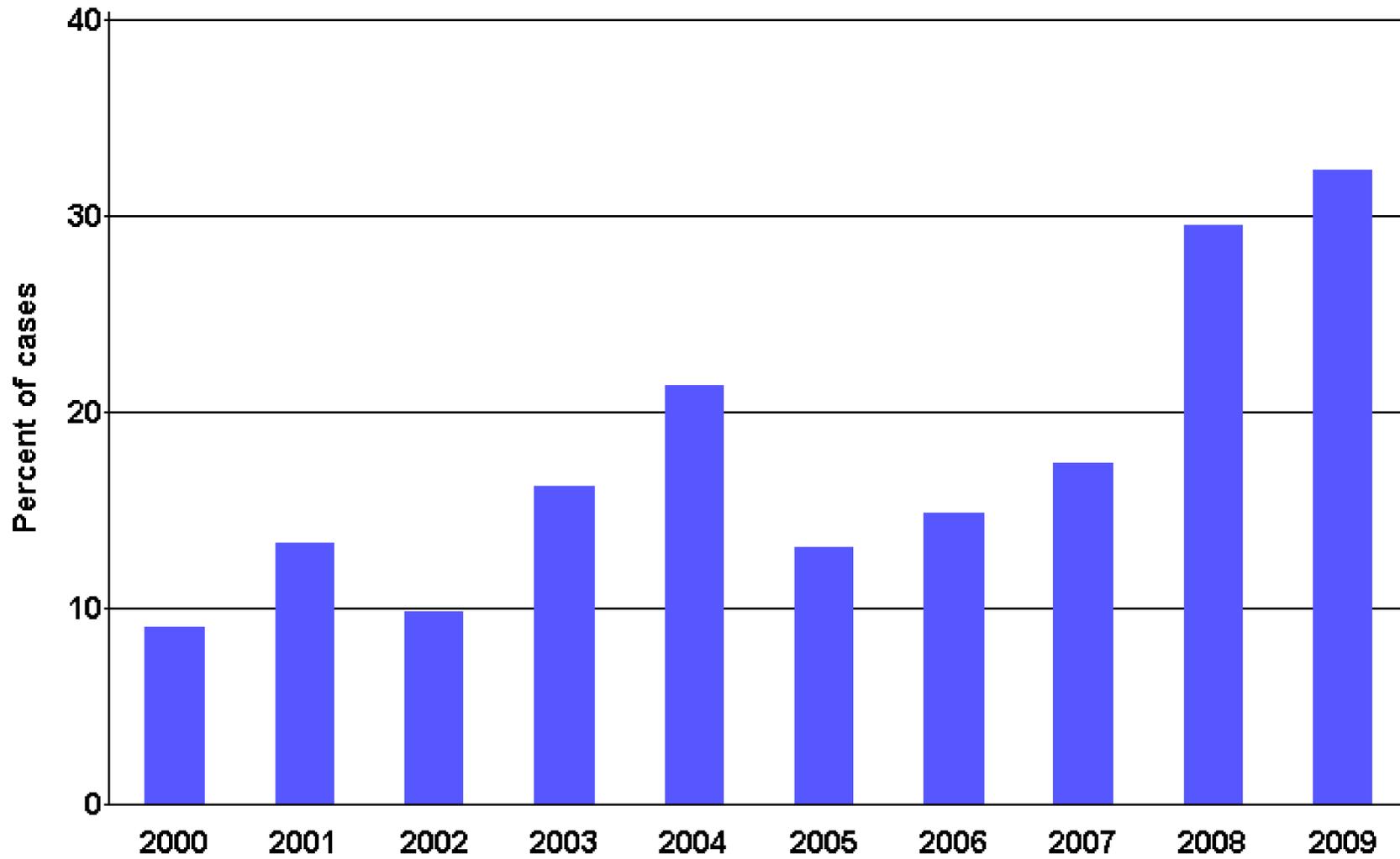
Phoenix, Arizona (N=227)

Figure B. Race/ethnicity of GISP participants, 2009



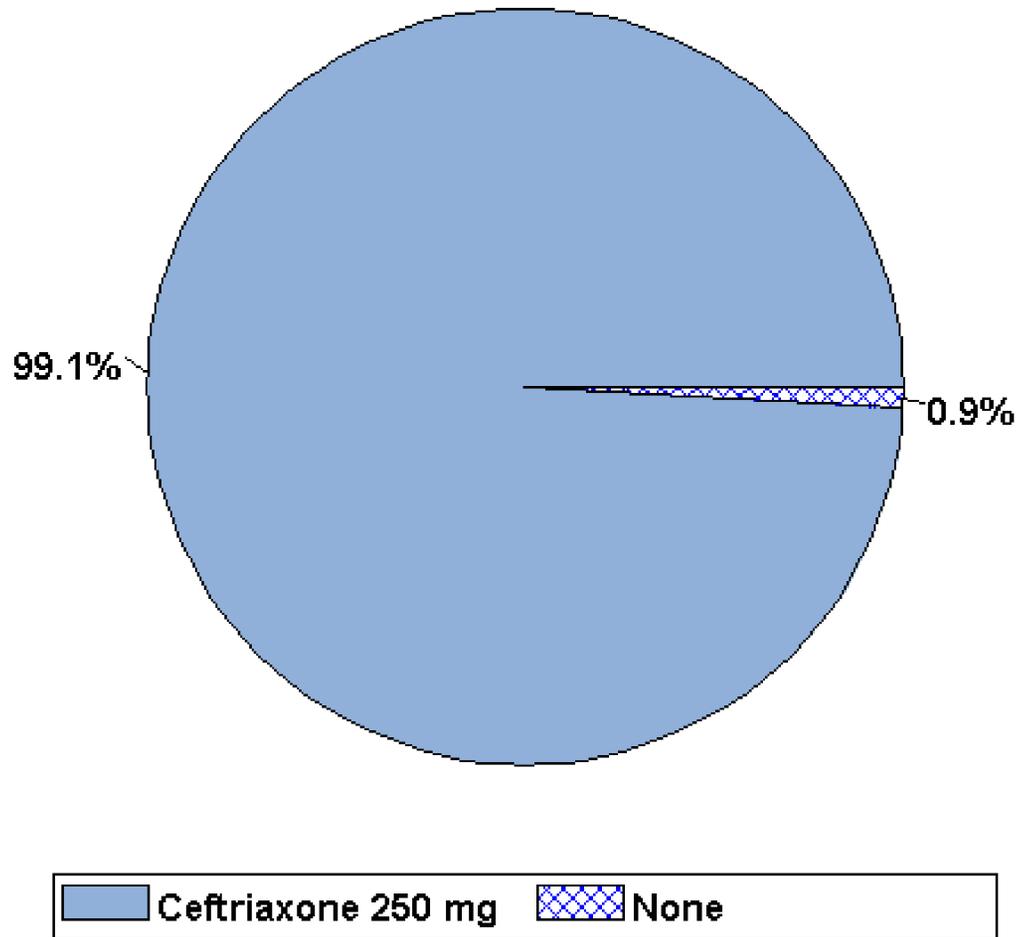
Phoenix, Arizona

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



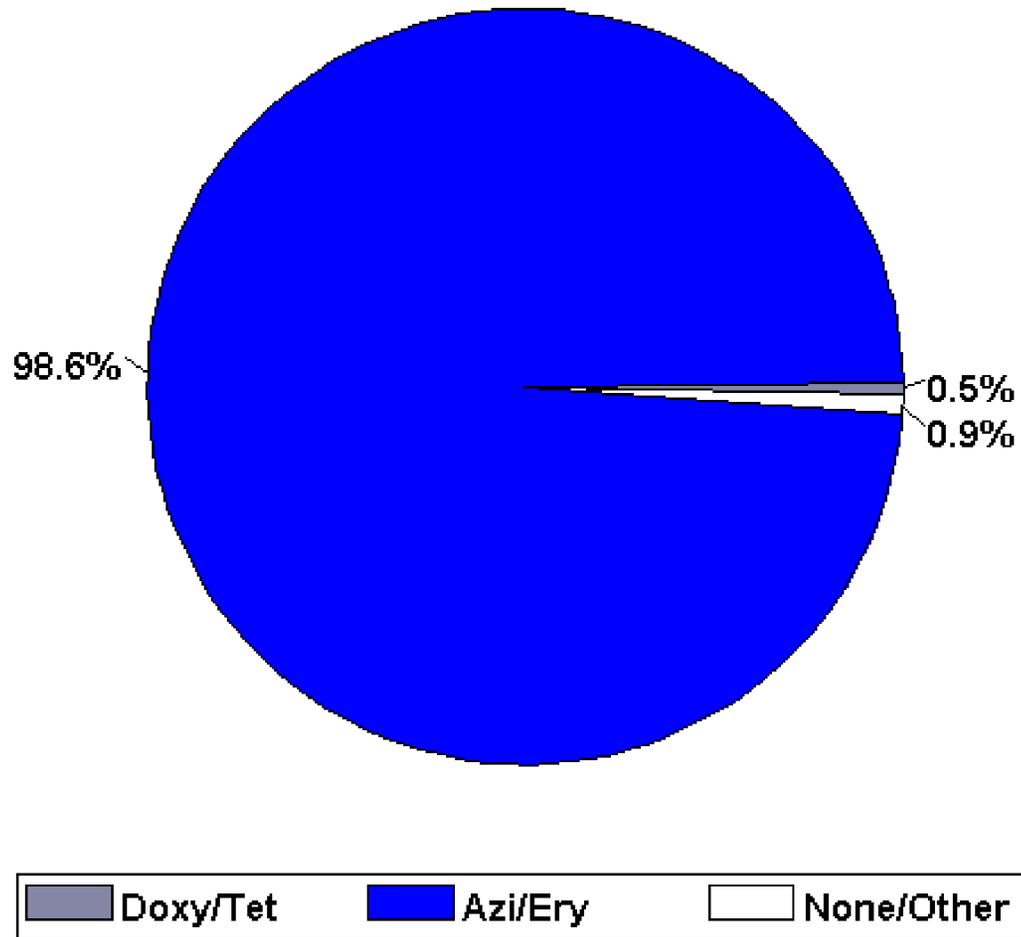
Phoenix, Arizona (N=227)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



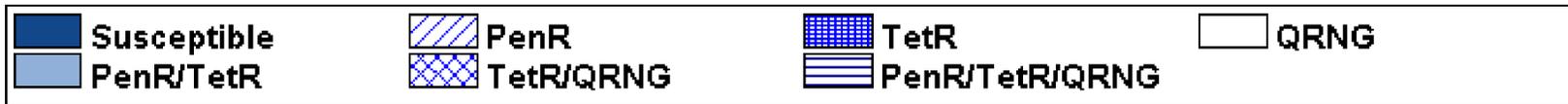
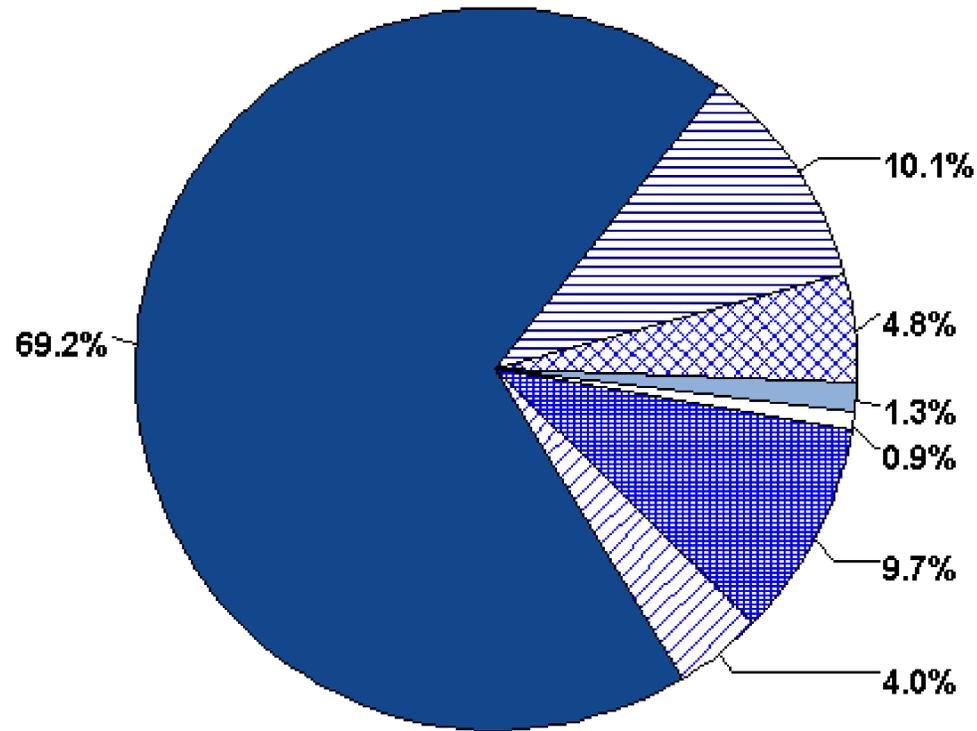
Phoenix, Arizona (N=227)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



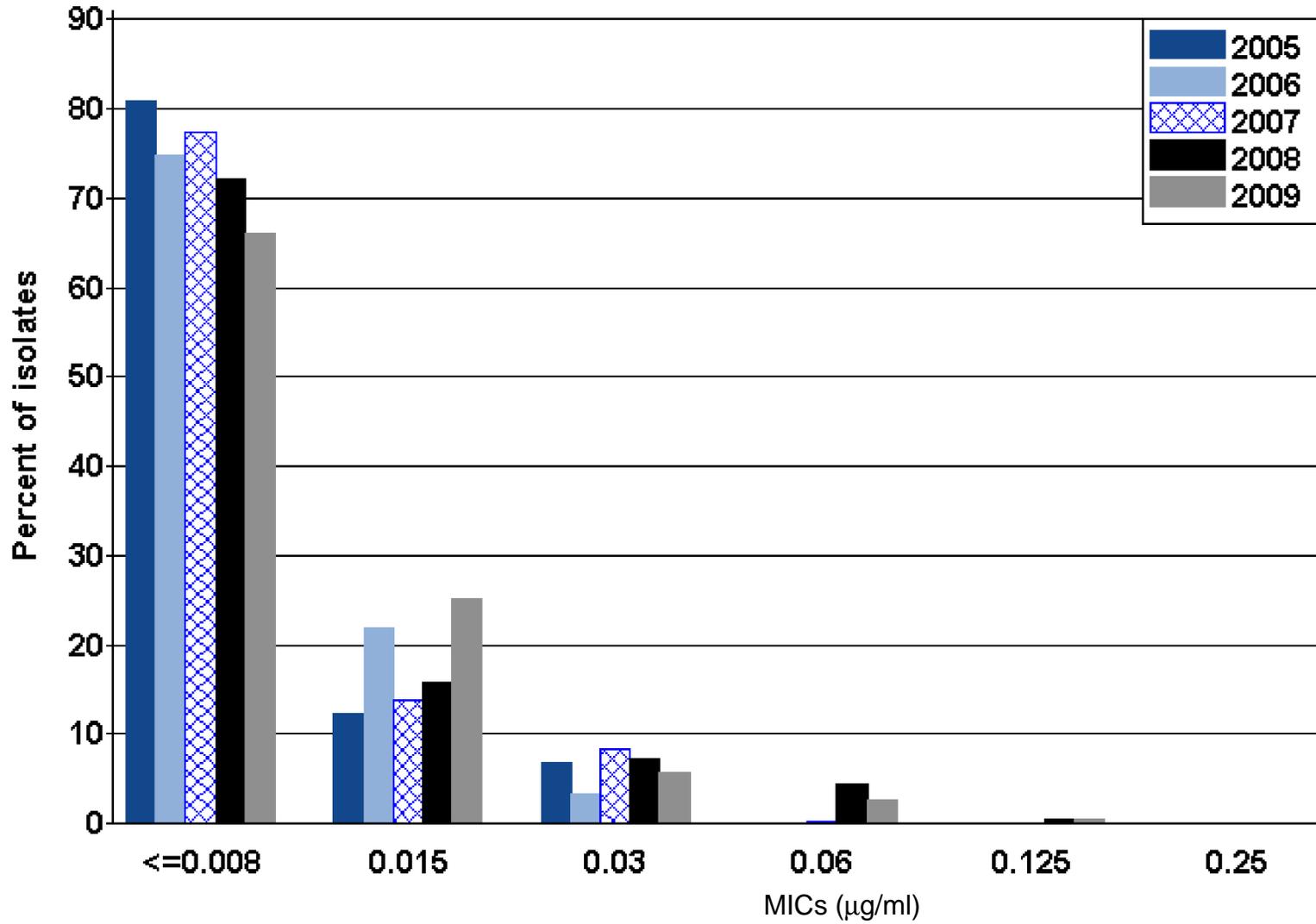
Phoenix, Arizona (N=227)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



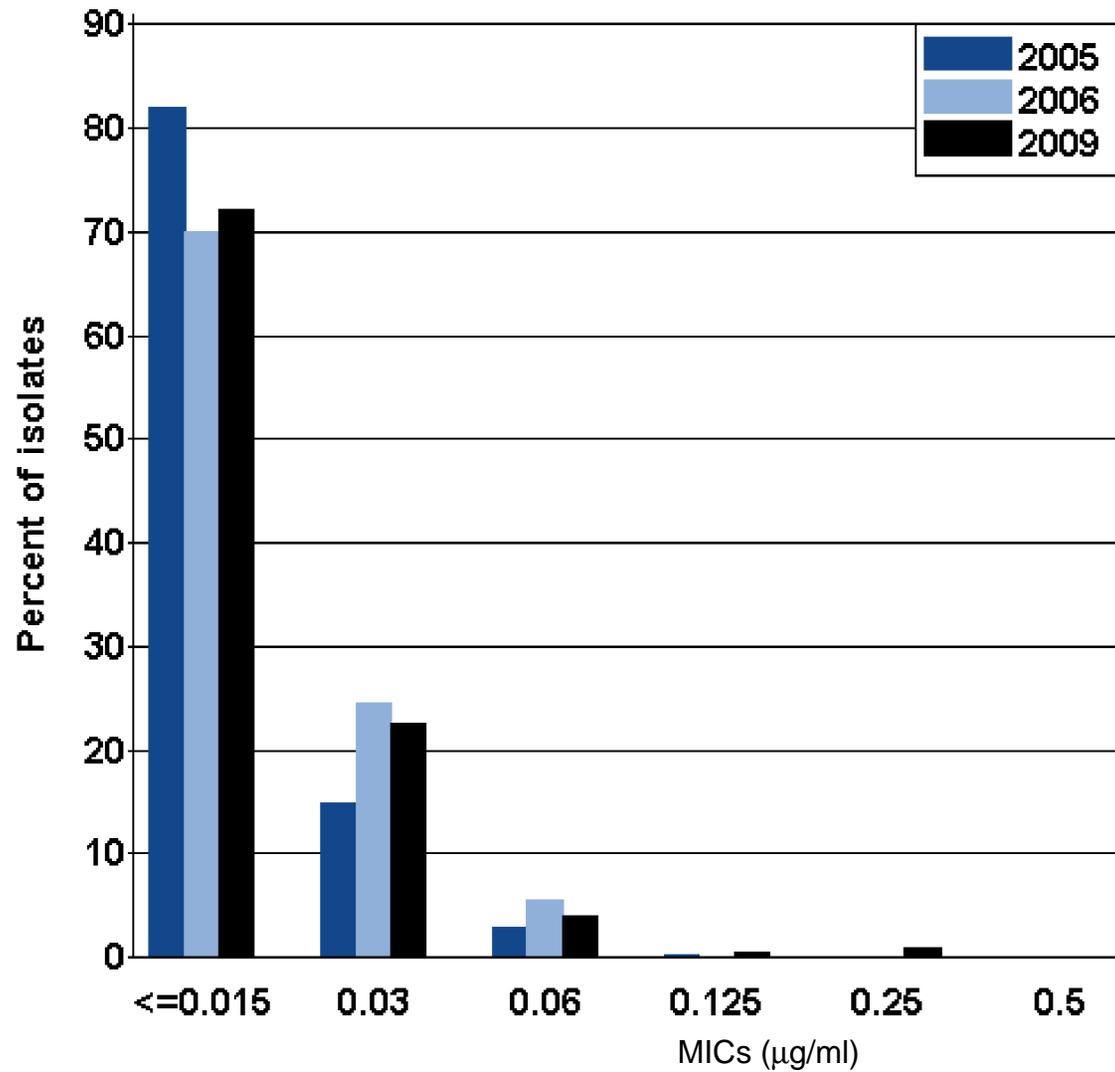
Phoenix, Arizona

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Phoenix, Arizona

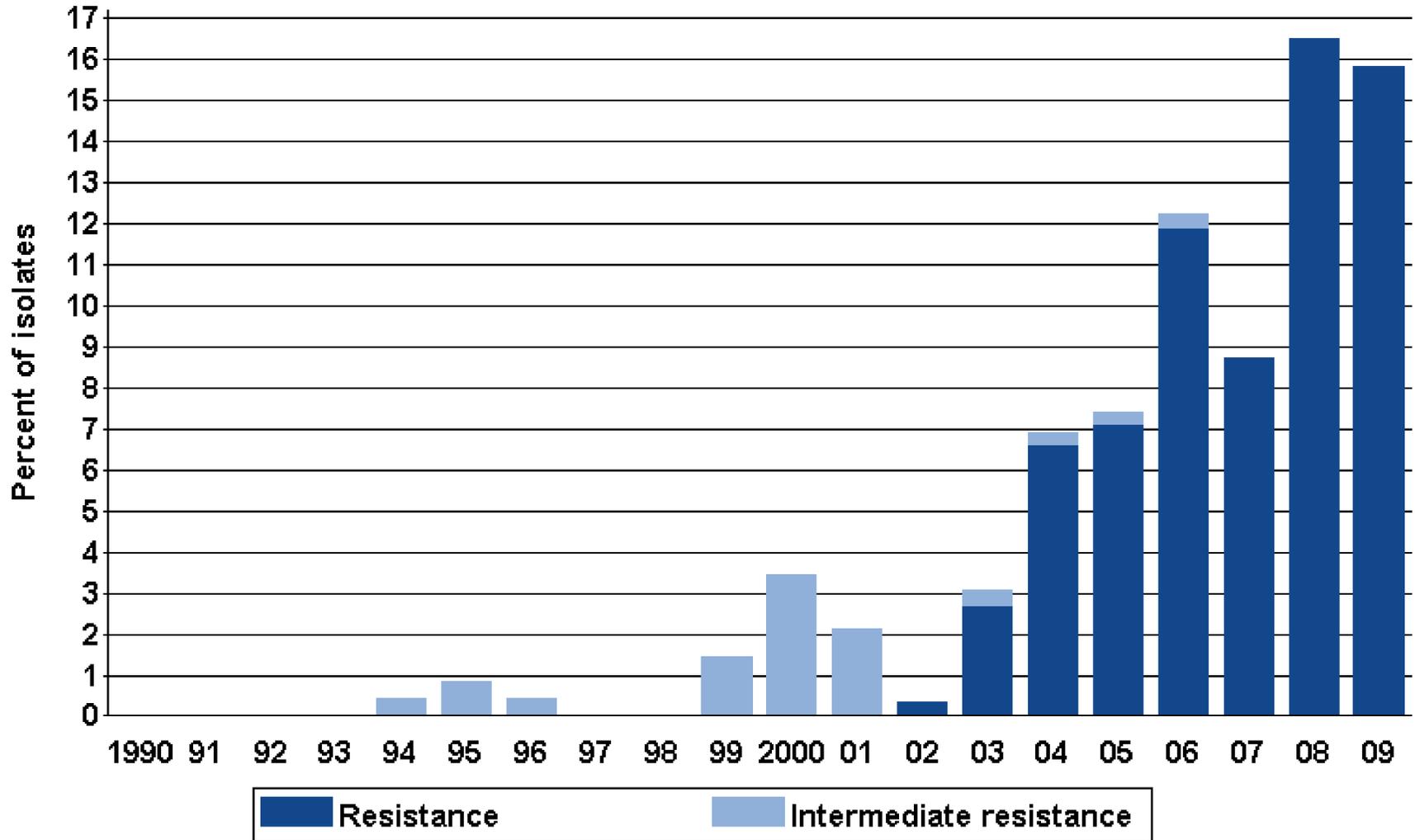
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Phoenix, Arizona

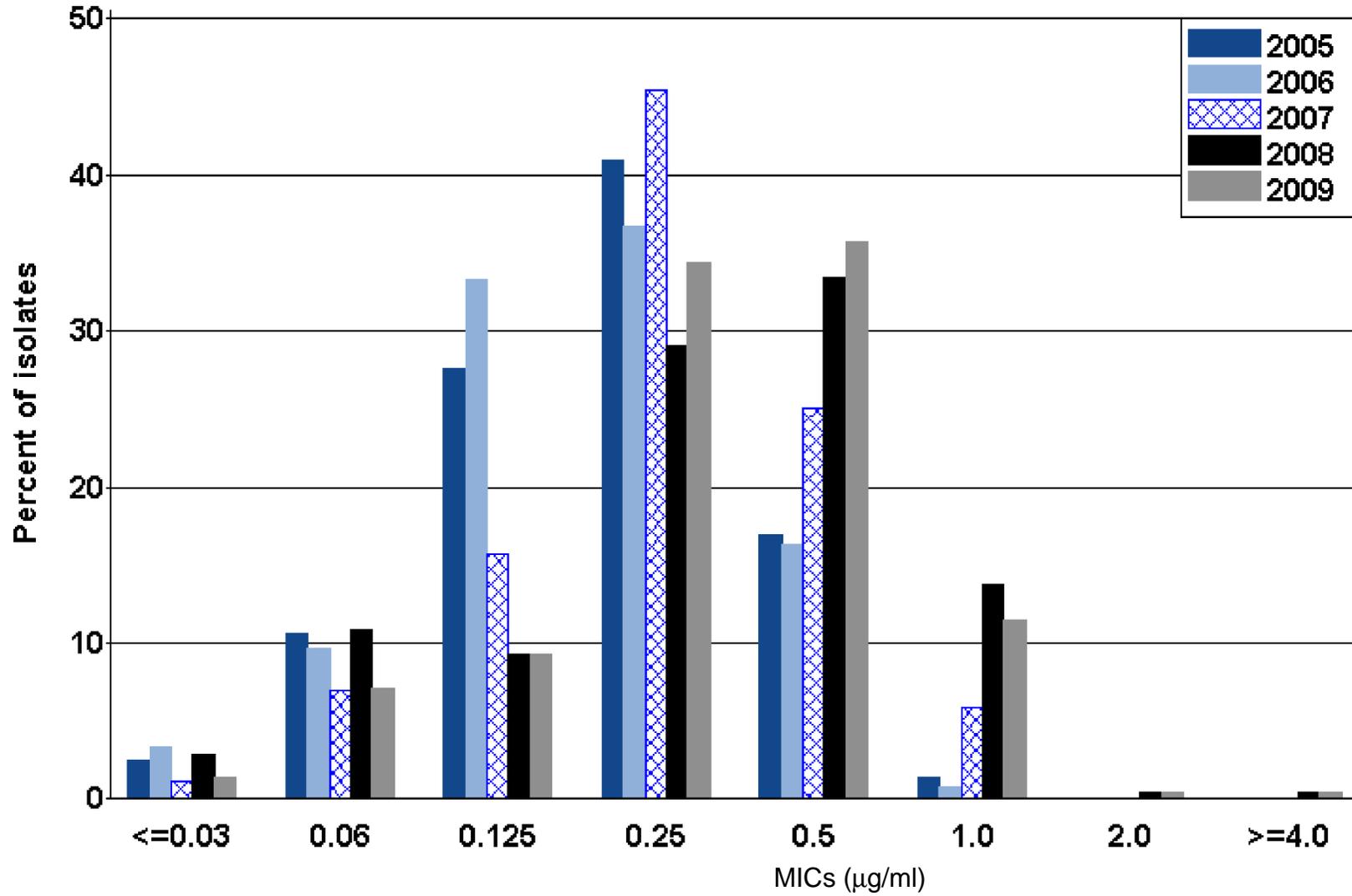
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

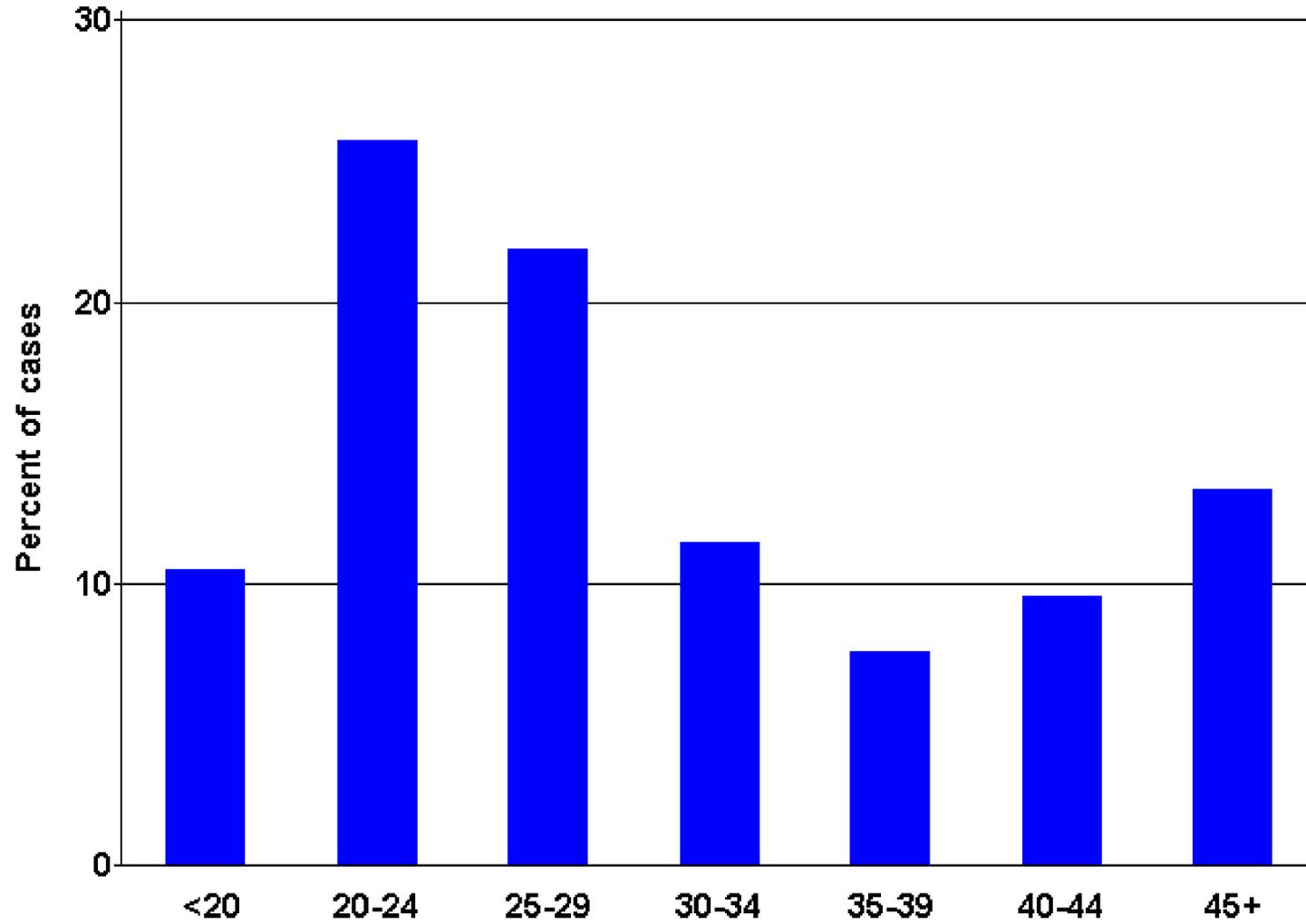
Phoenix, Arizona

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



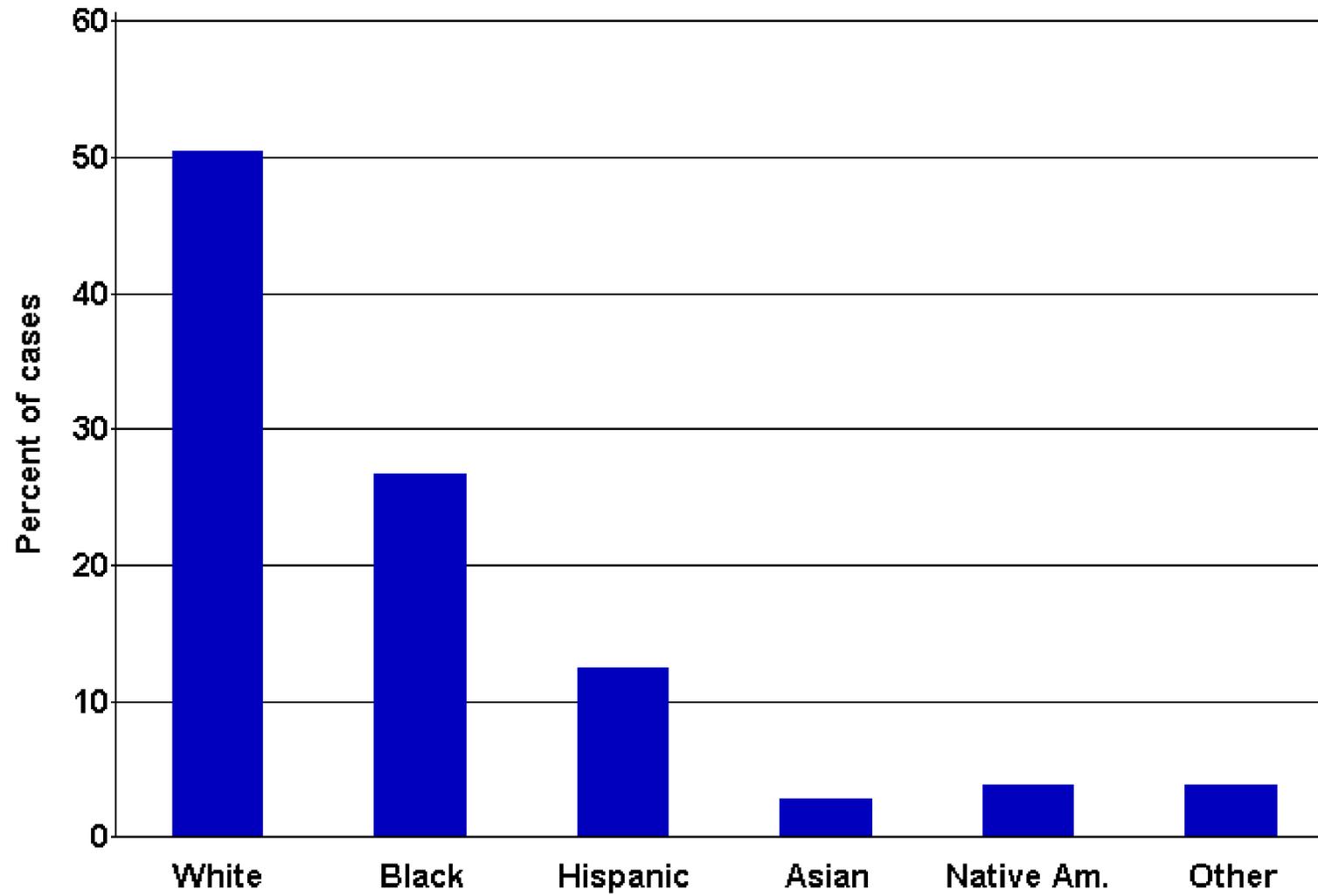
Portland, Oregon (N=105)

Figure A. Age of GISP participants, in years, 2009



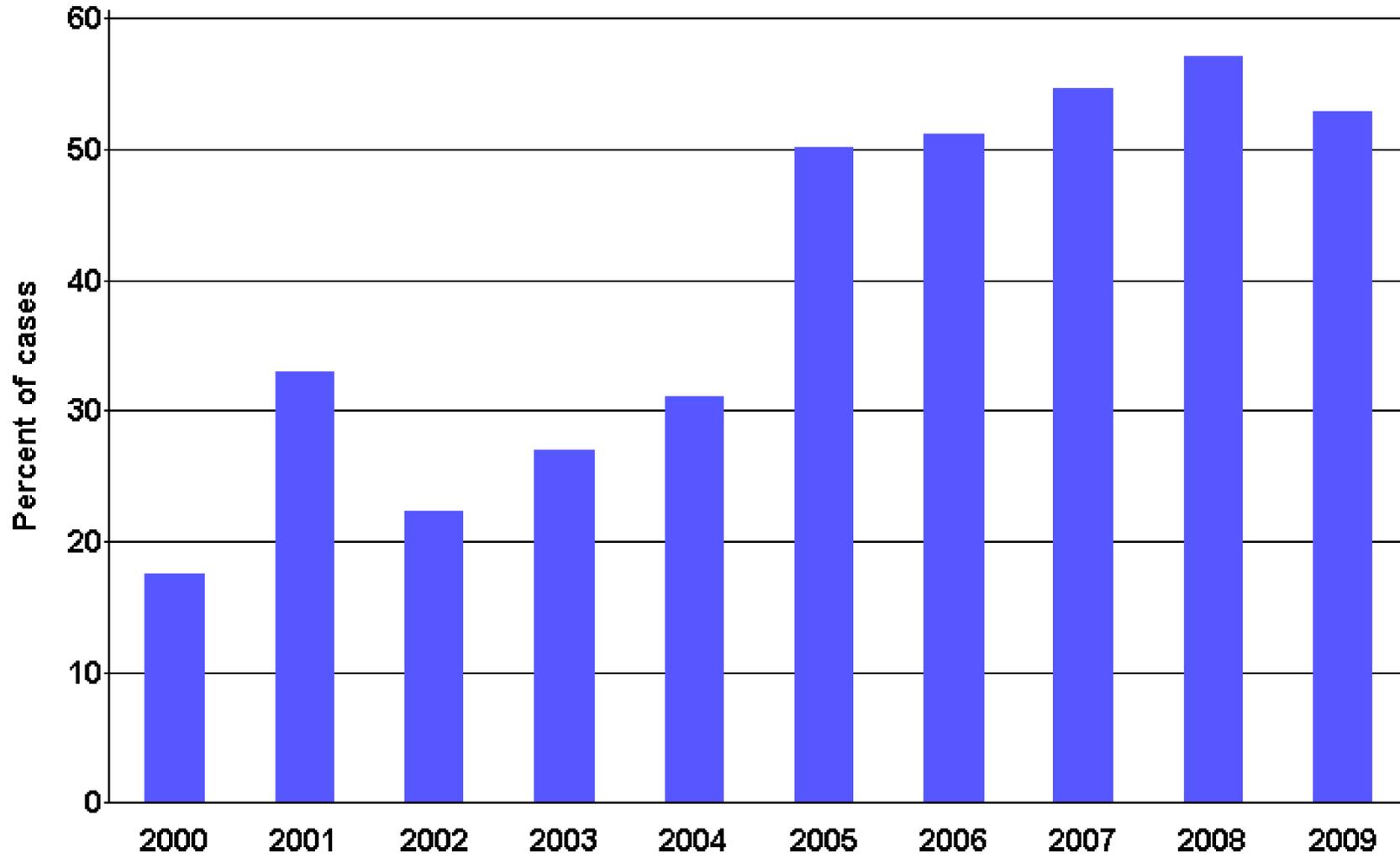
Portland, Oregon (N=105)

Figure B. Race/ethnicity of GISP participants, 2009



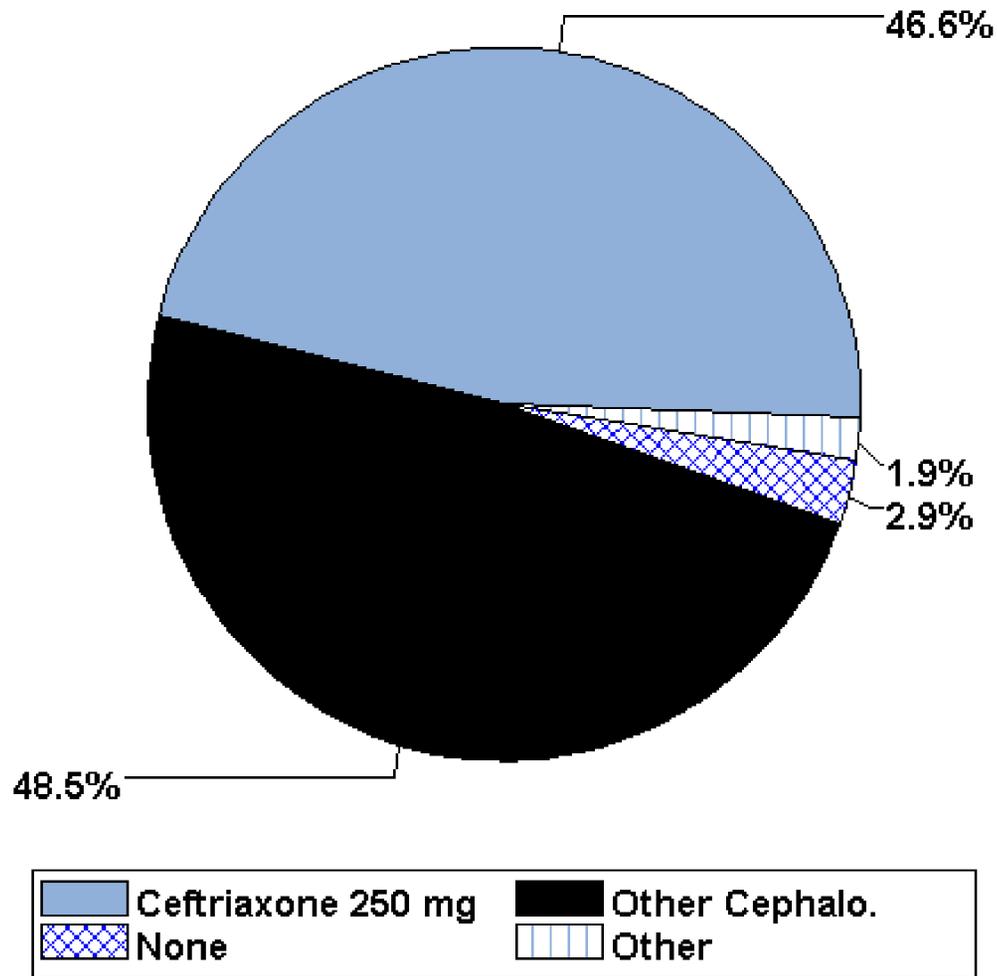
Portland, Oregon

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



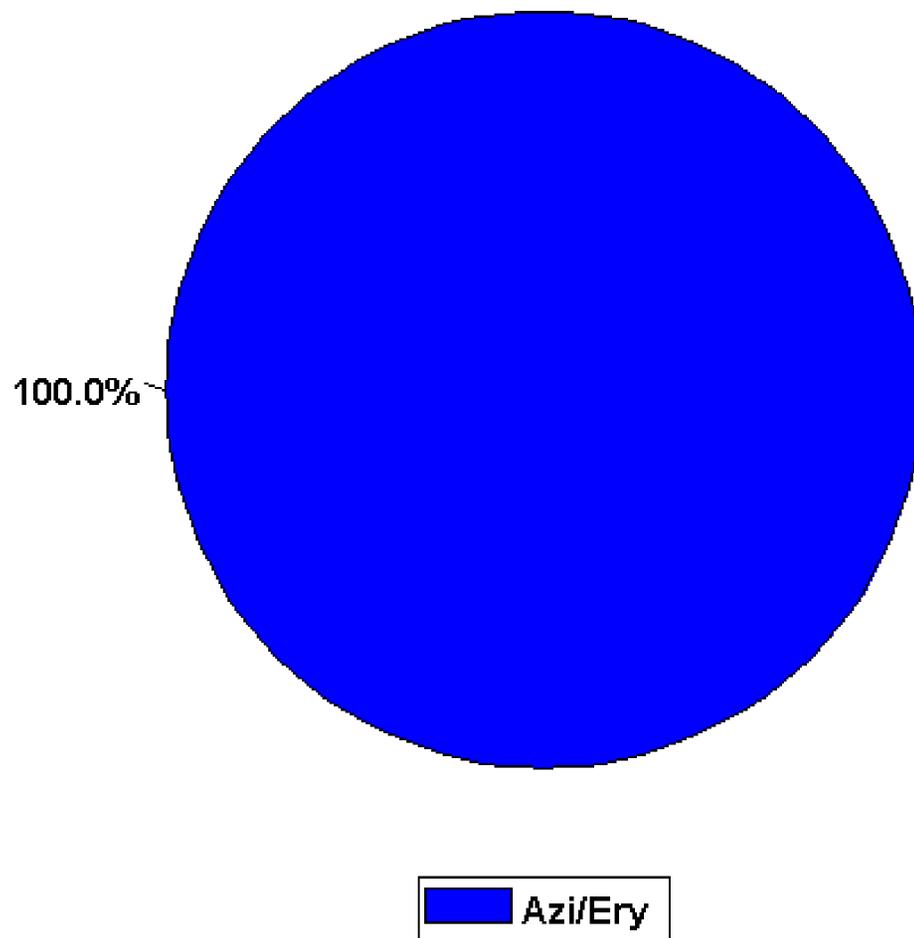
Portland, Oregon (N=105)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



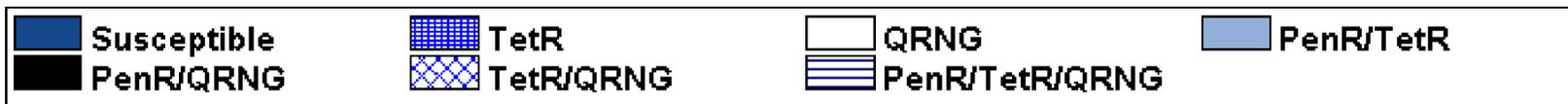
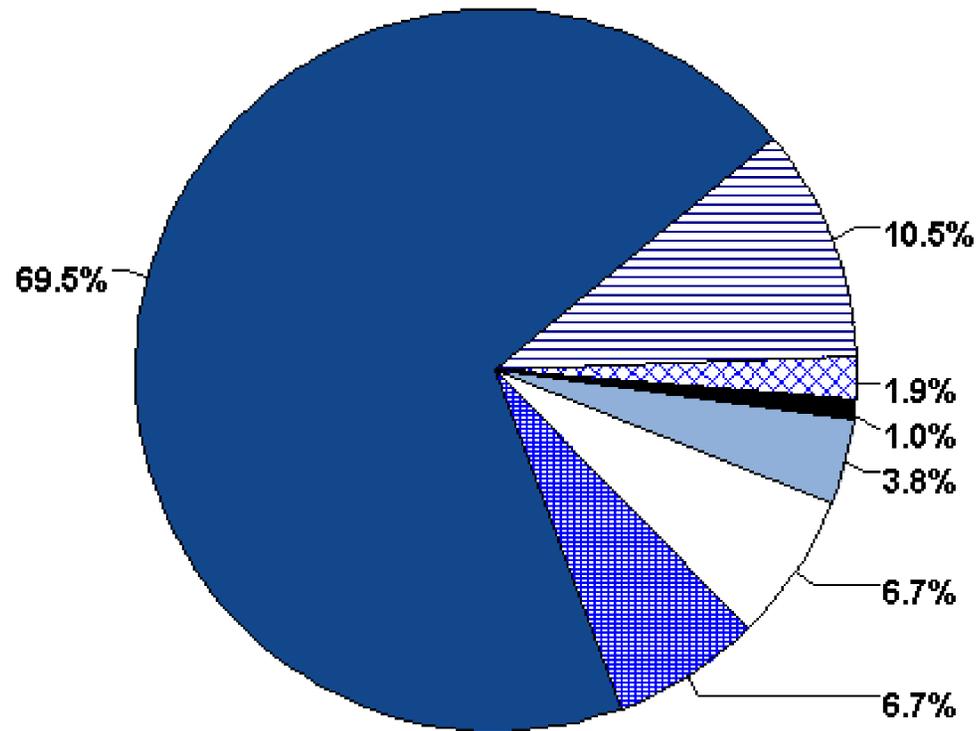
Portland, Oregon (N=105)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



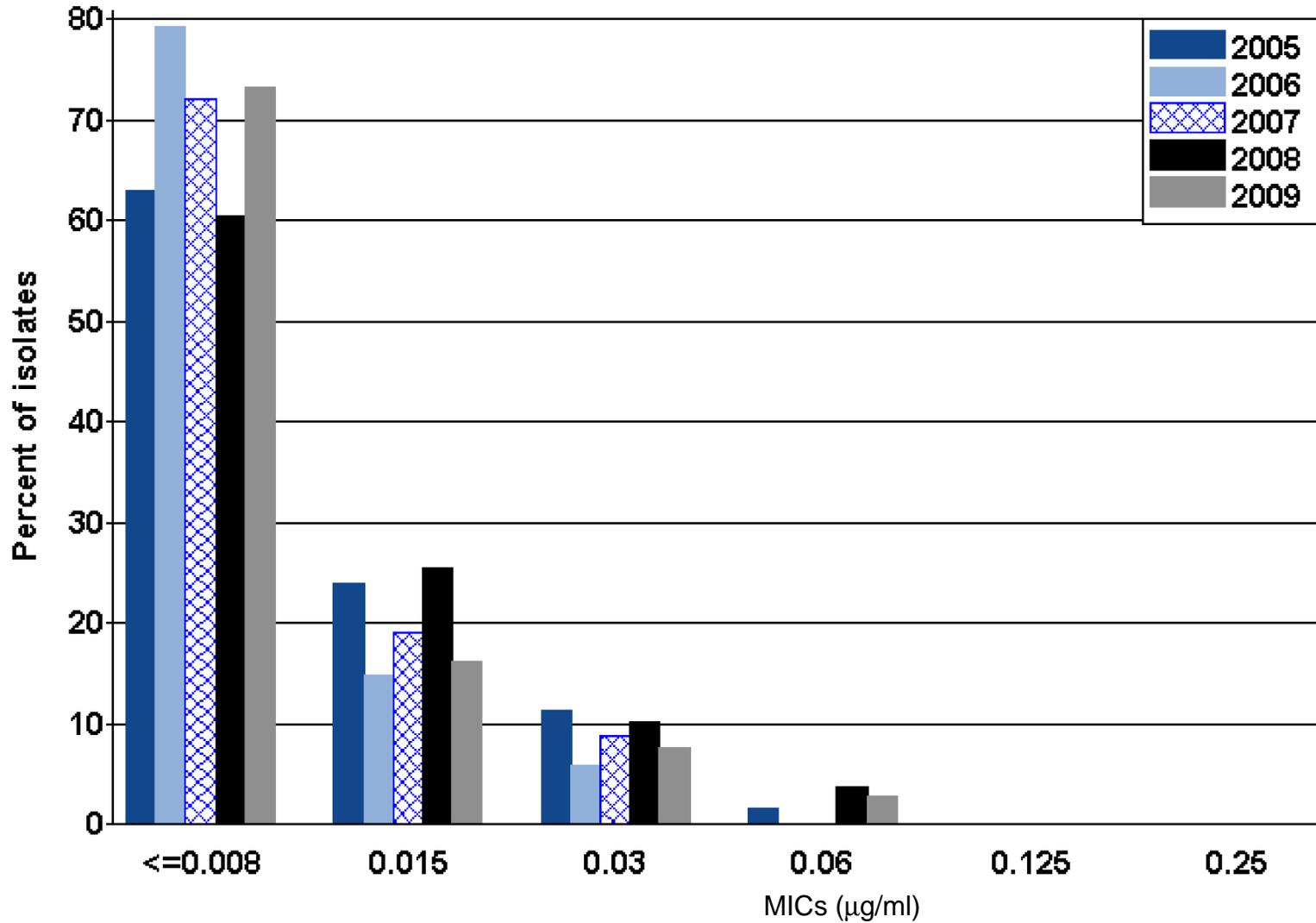
Portland, Oregon (N=105)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



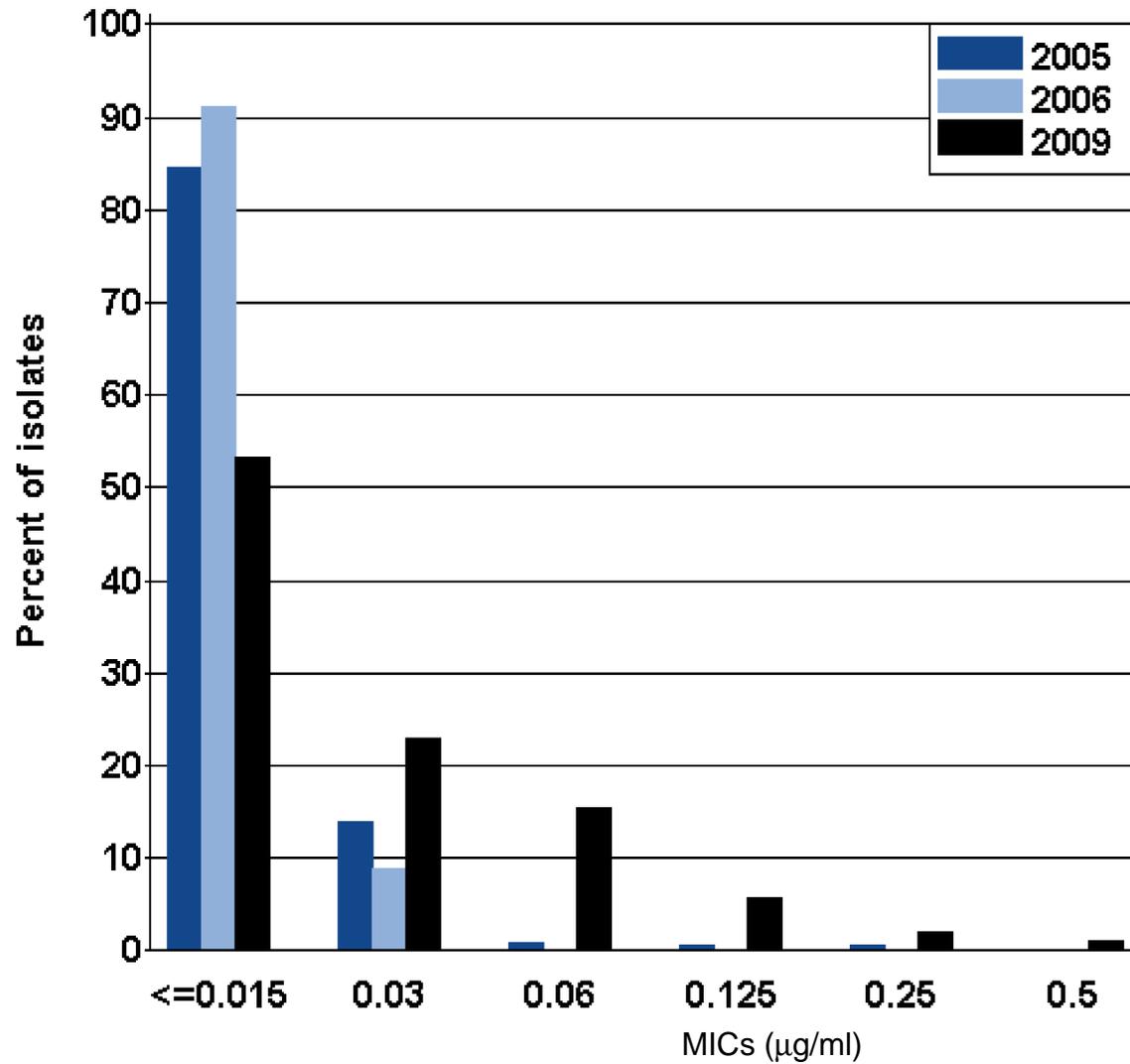
Portland, Oregon

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Portland, Oregon

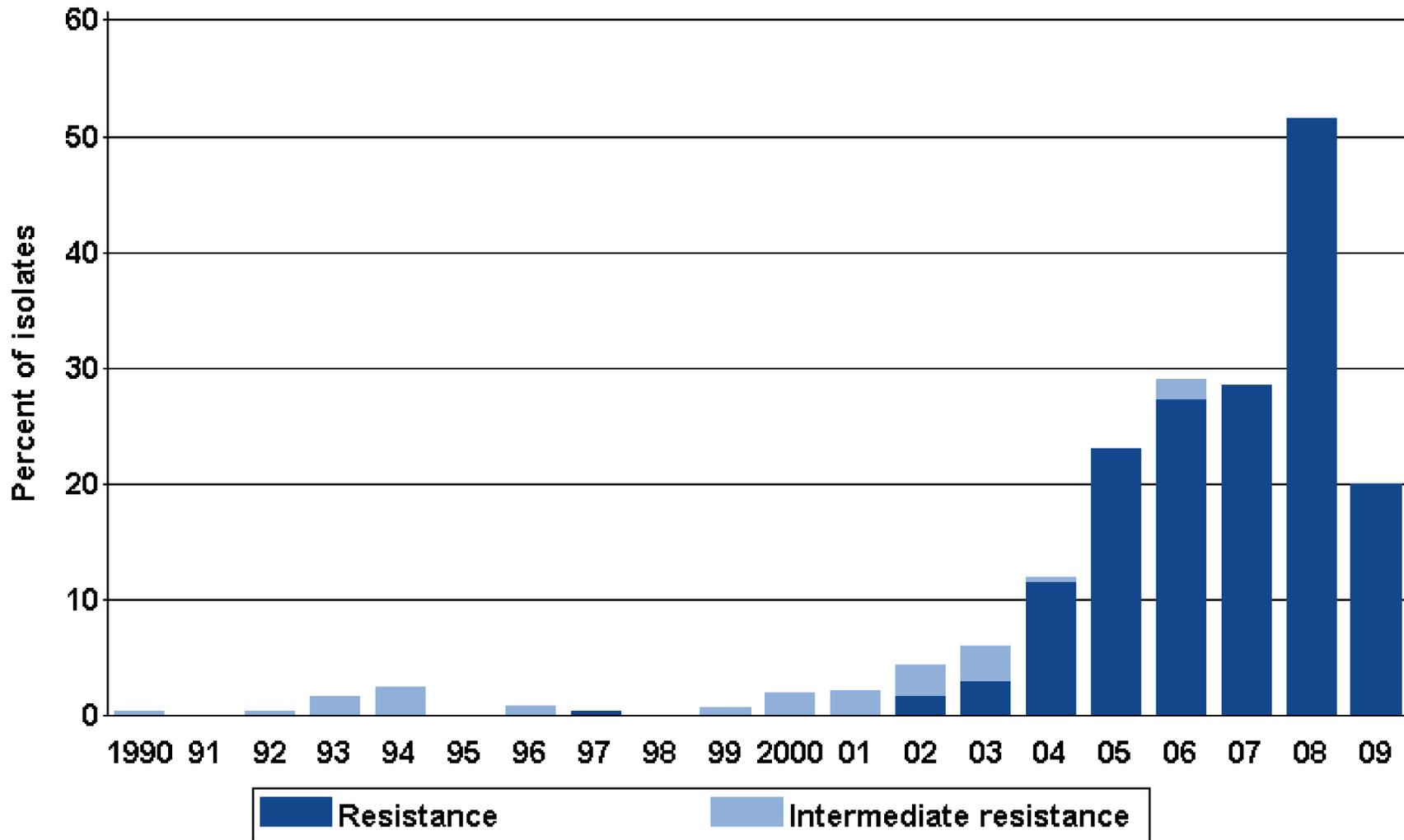
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Portland, Oregon

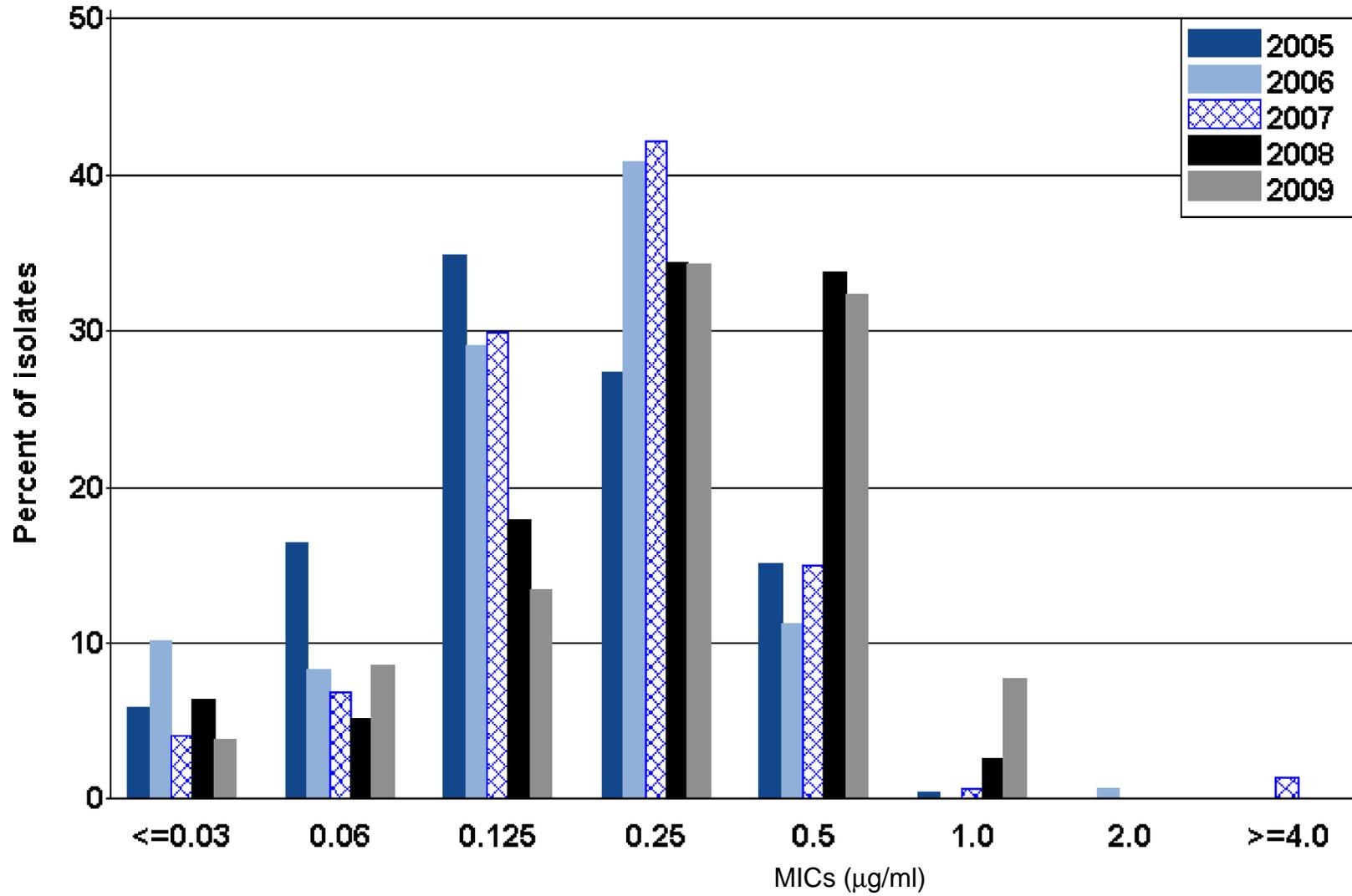
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

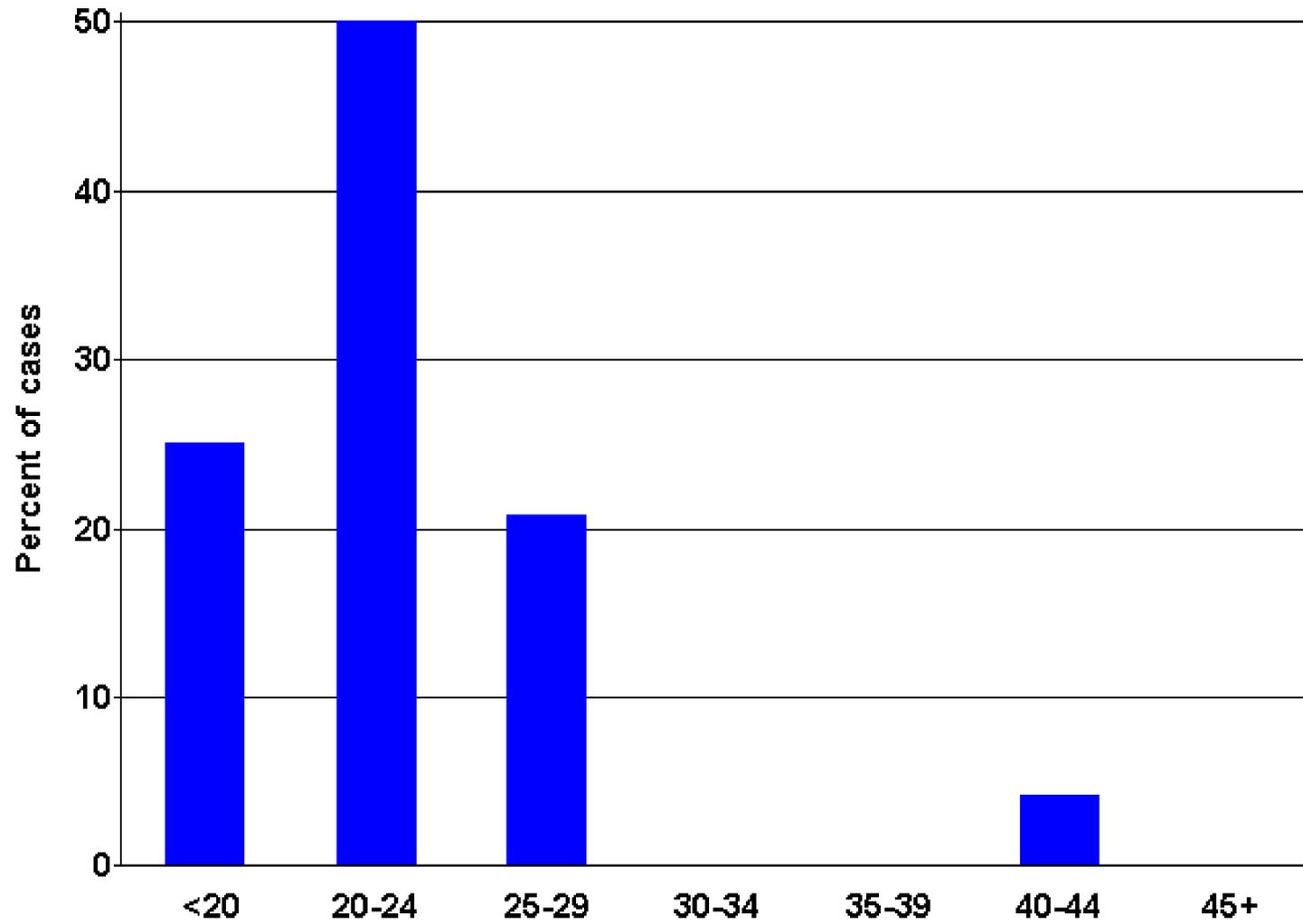
Portland, Oregon

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



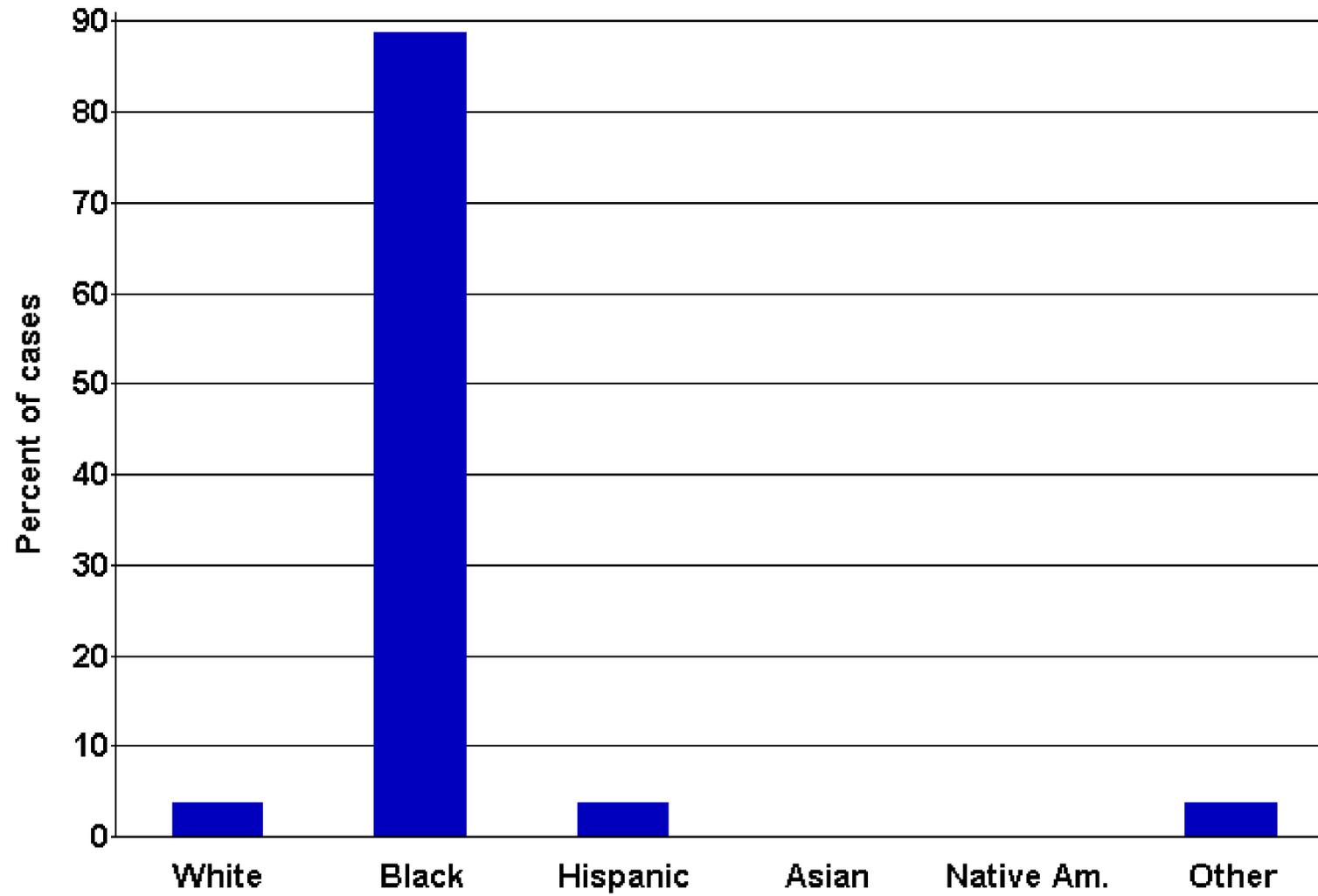
Richmond, Virginia (N=31)

Figure A. Age of GISP participants, in years, 2009



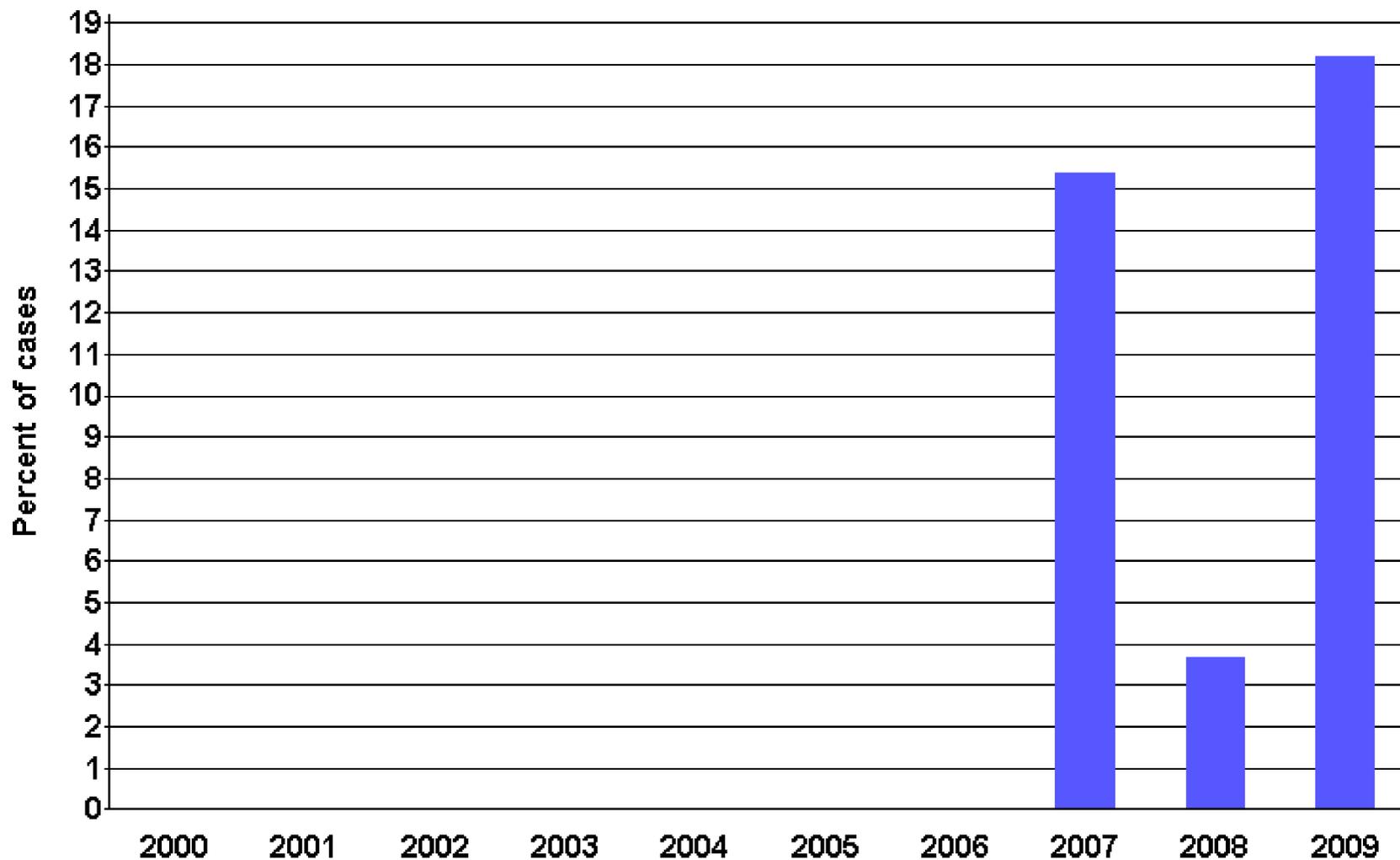
Richmond, Virginia (N=31)

Figure B. Race/ethnicity of GISP participants, 2009



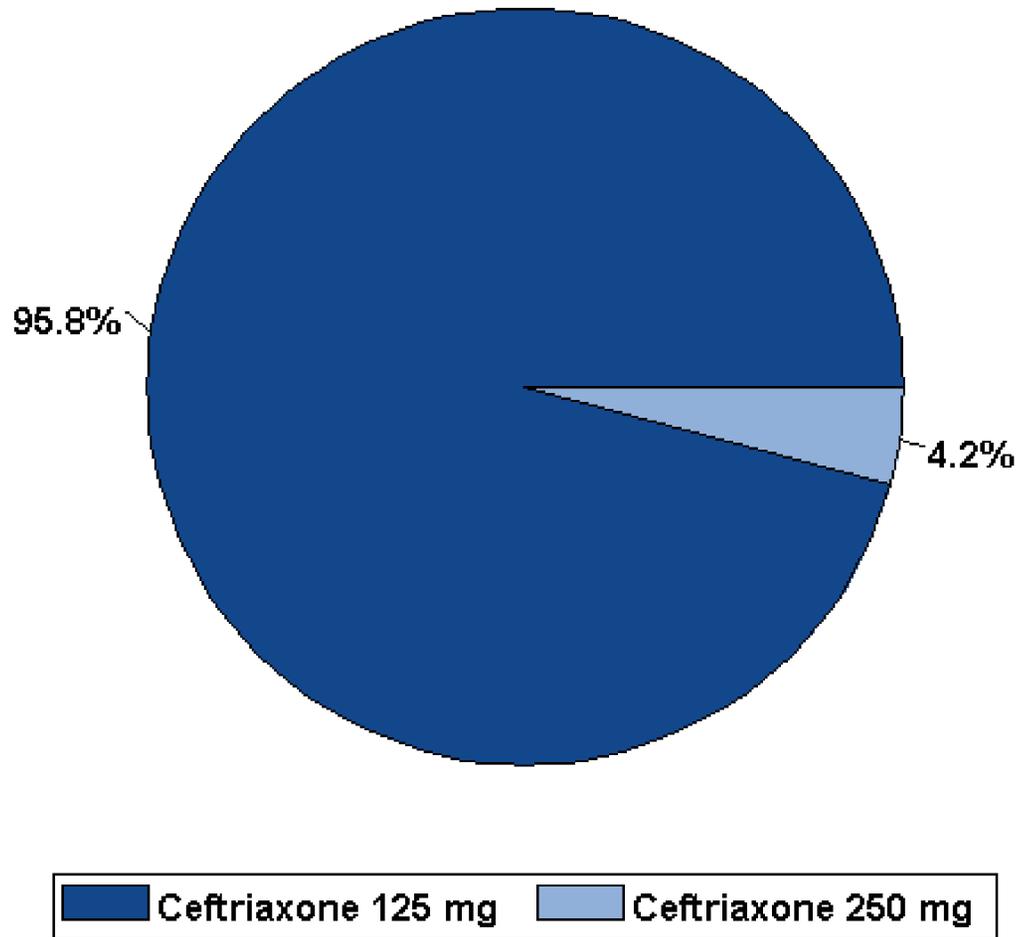
Richmond, Virginia

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



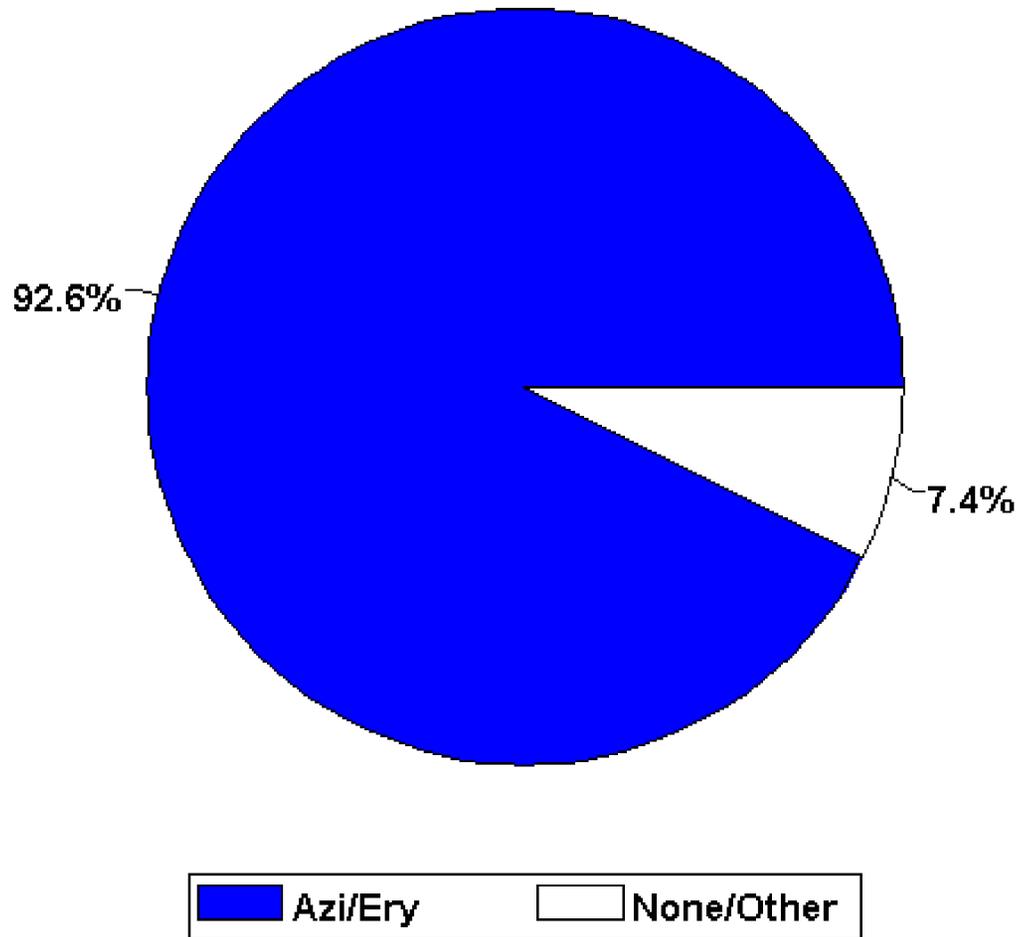
Richmond, Virginia (N=31)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



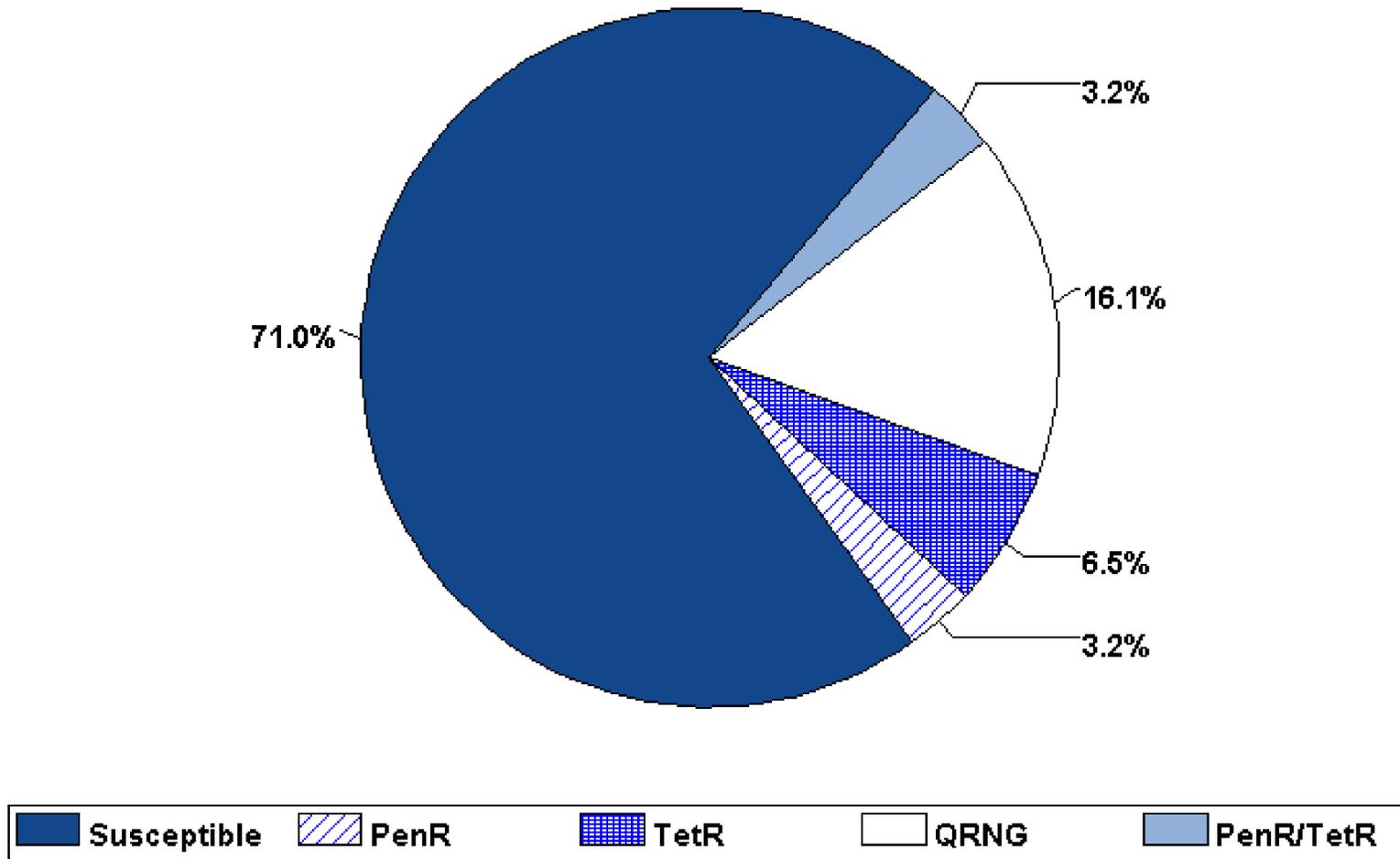
Richmond, Virginia (N=31)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



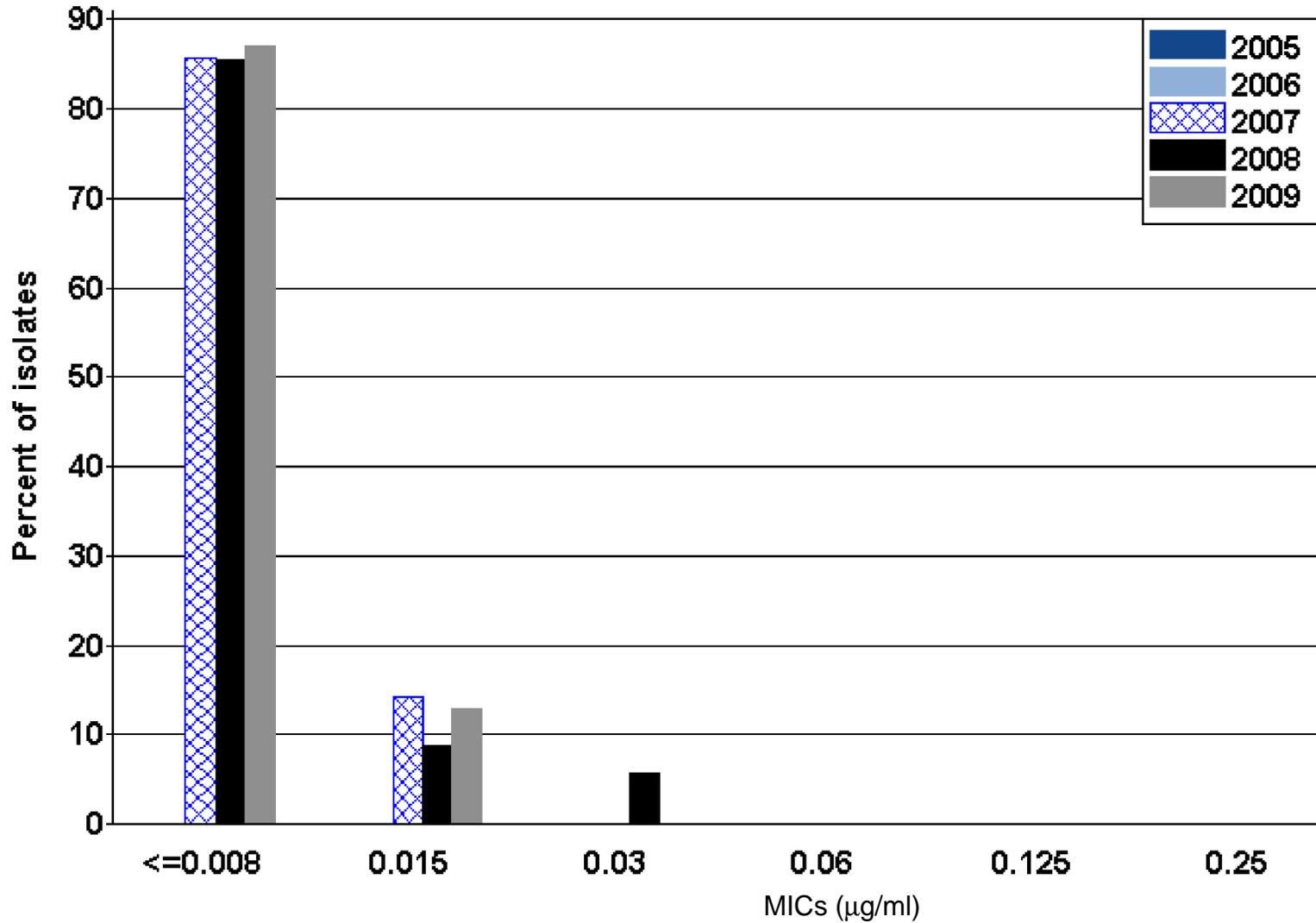
Richmond, Virginia (N=31)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



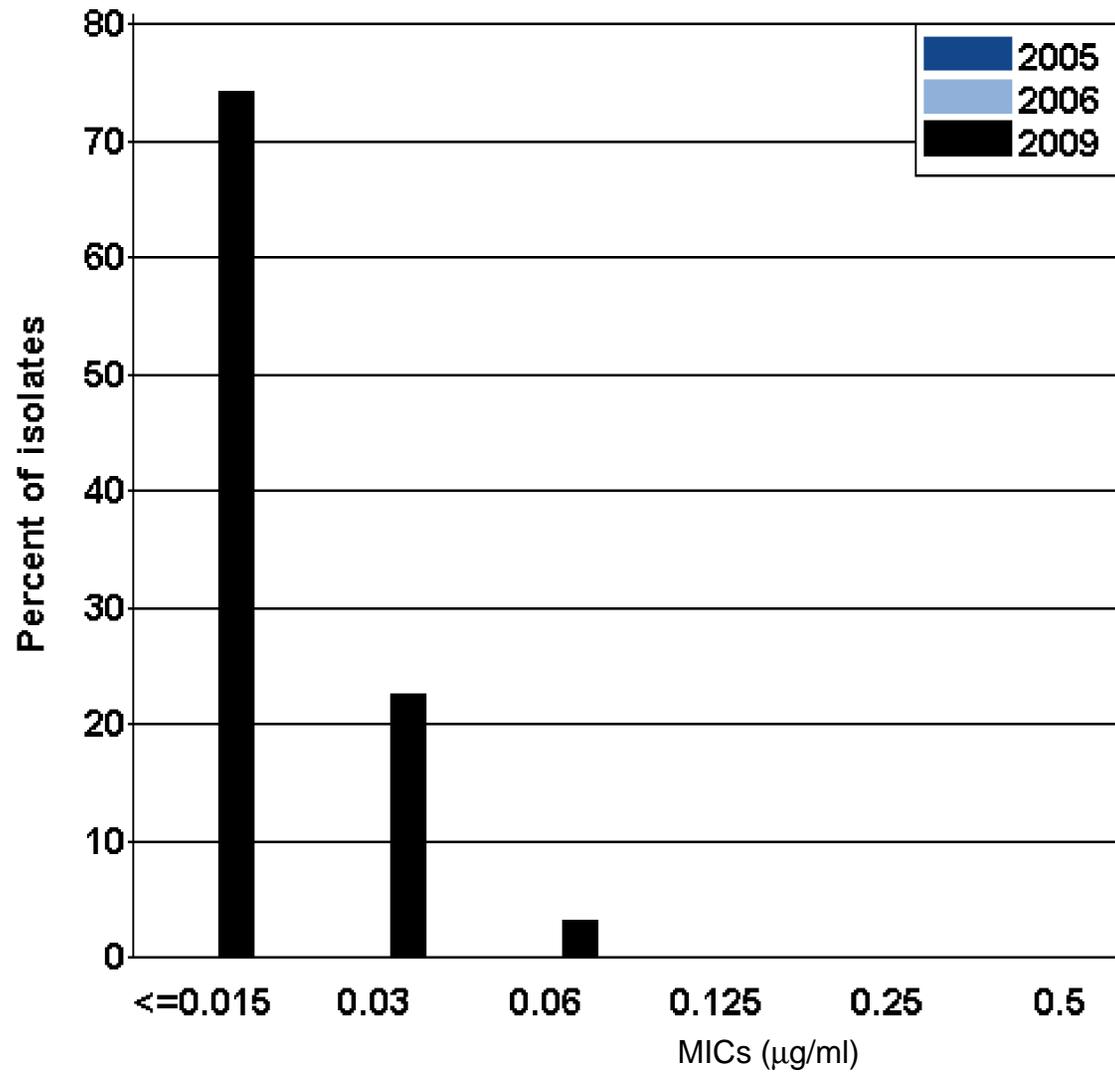
Richmond, Virginia

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Richmond, Virginia

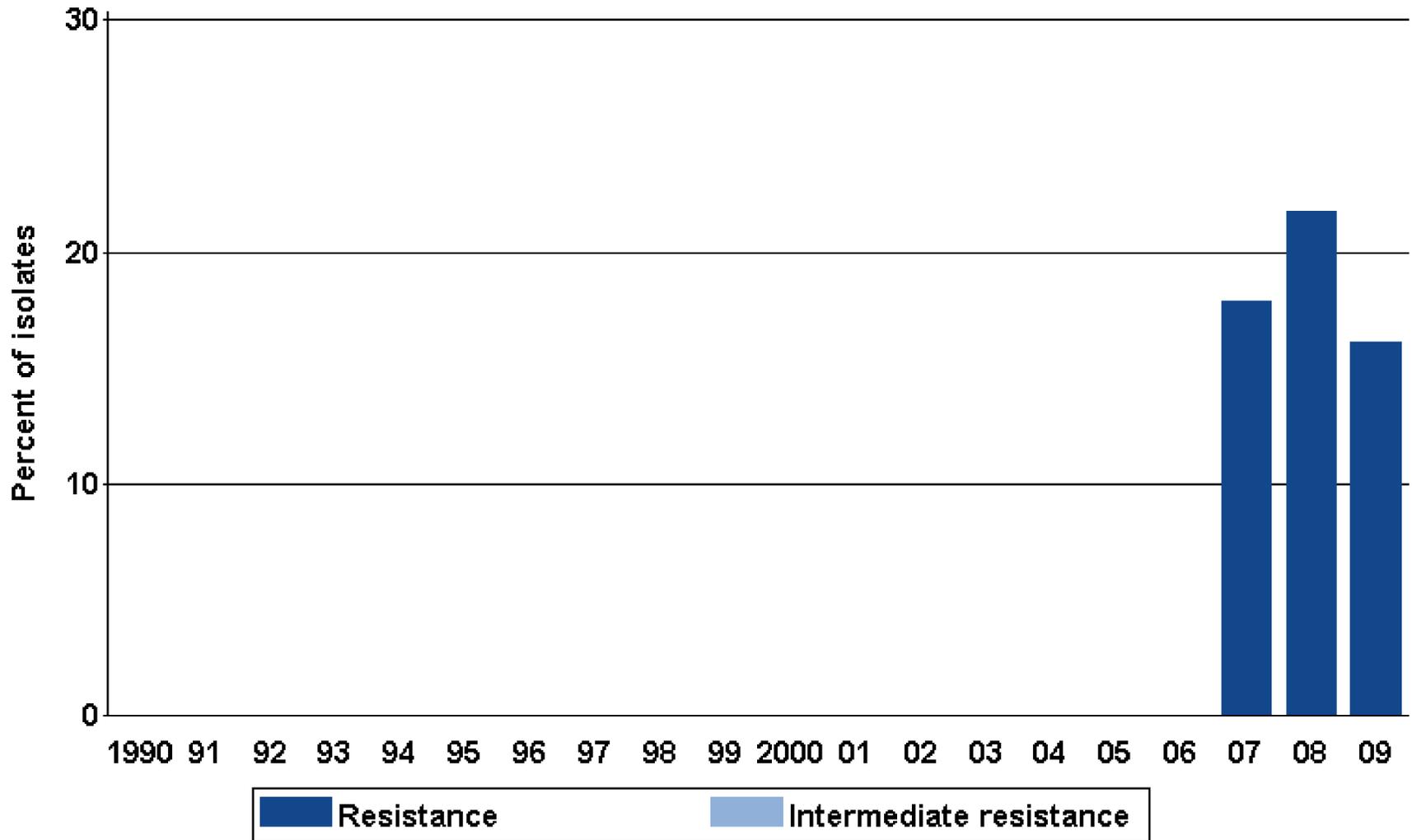
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Richmond, Virginia

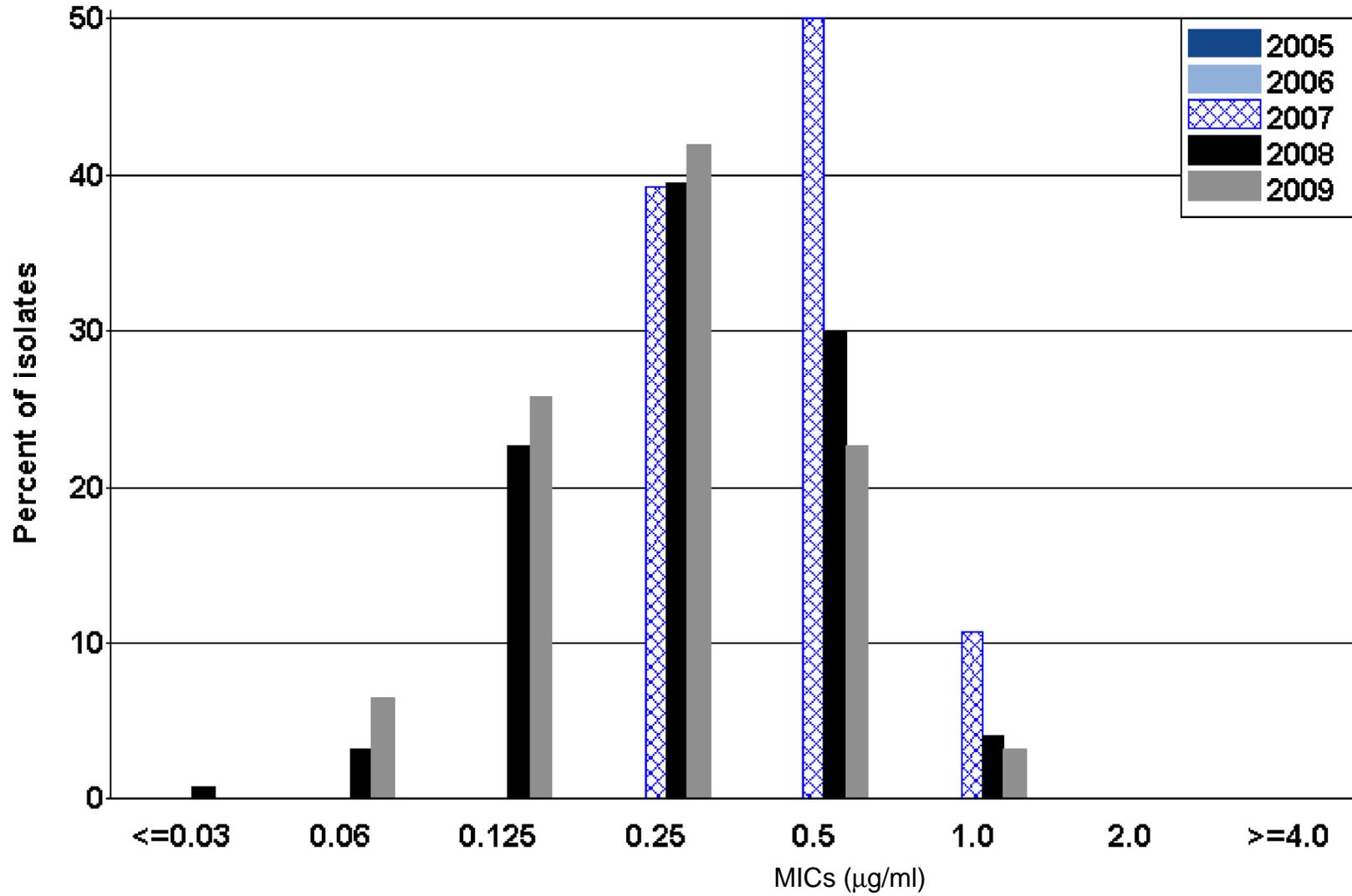
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

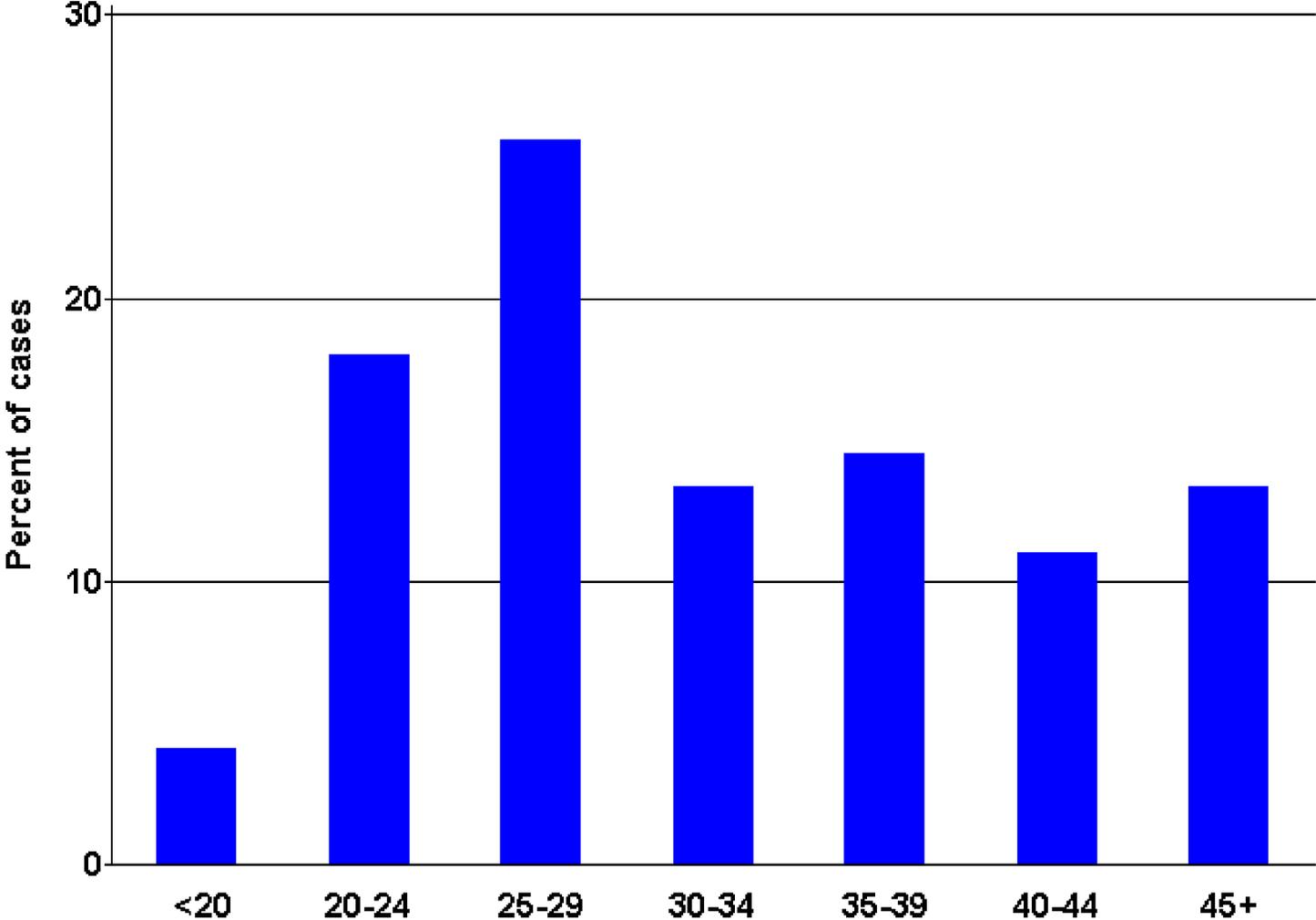
Richmond, Virginia

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



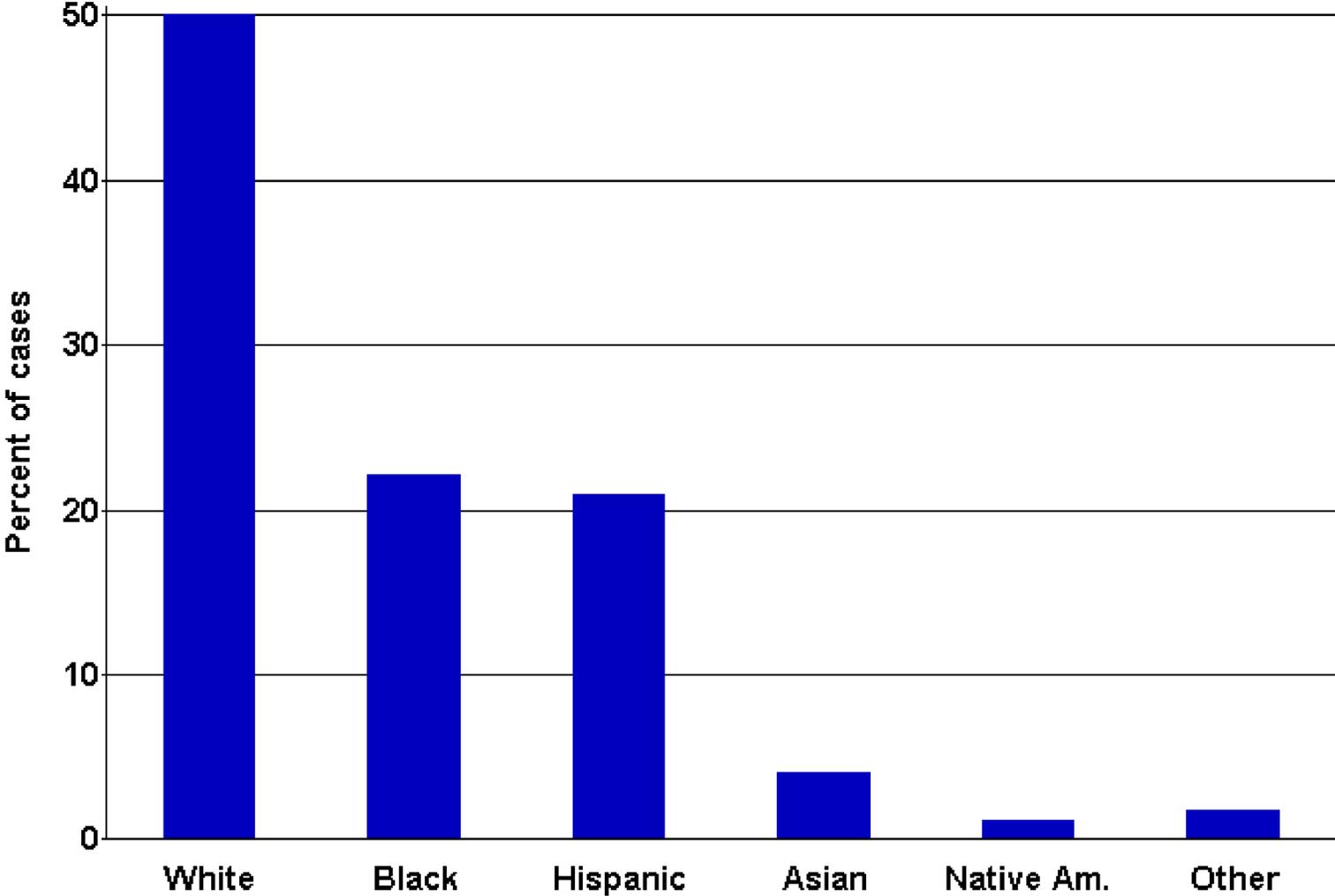
San Diego, California (N=172)

Figure A. Age of GISP participants, in years, 2009



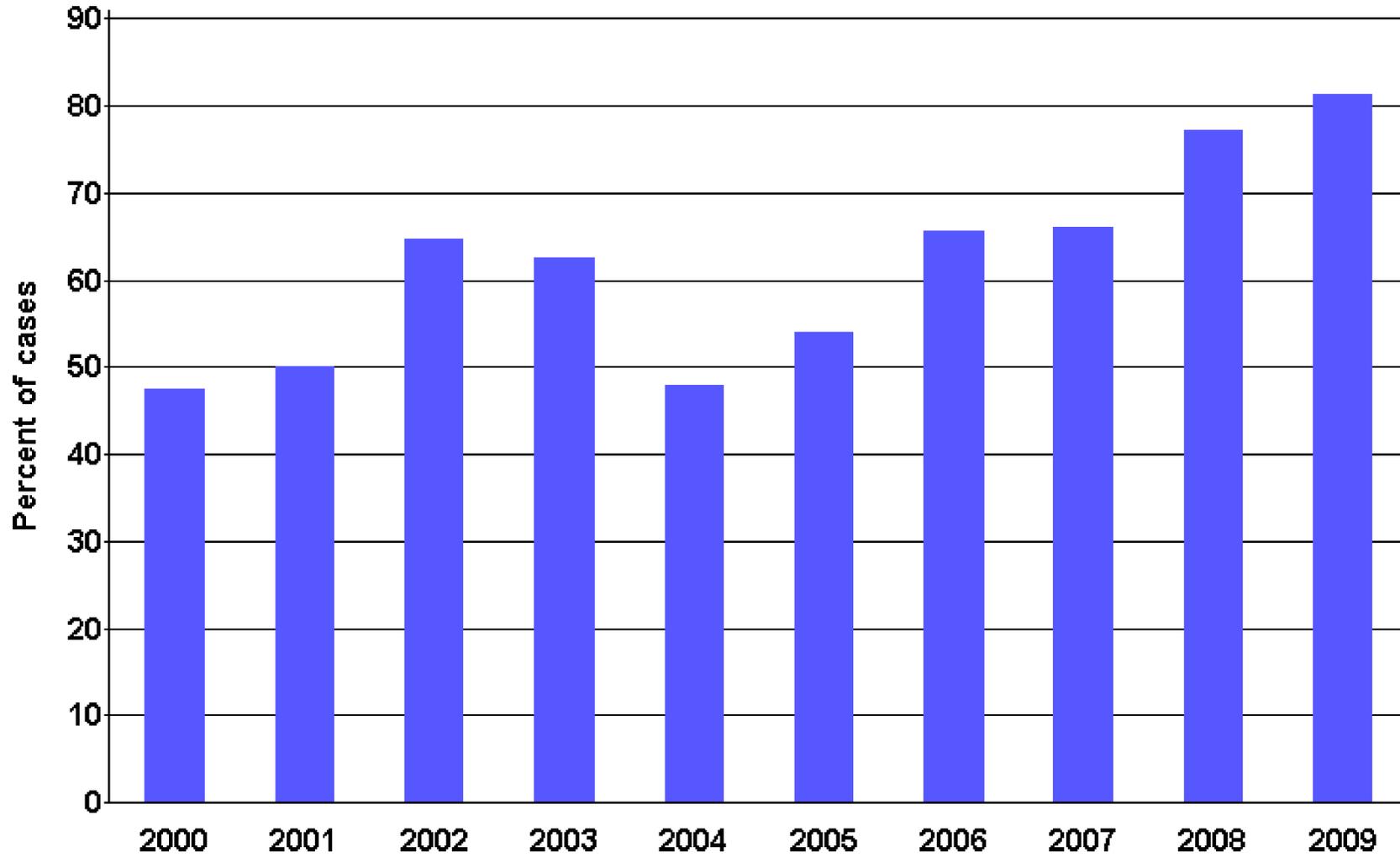
San Diego, California (N=172)

Figure B. Race/ethnicity of GISP participants, 2009



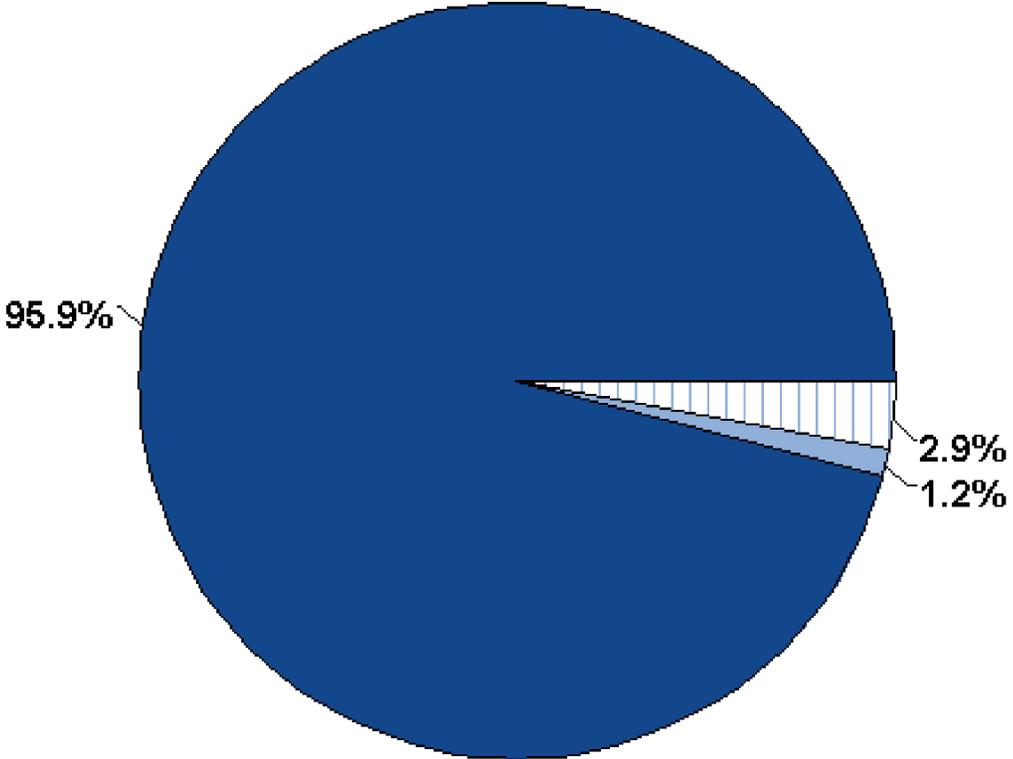
San Diego, California

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



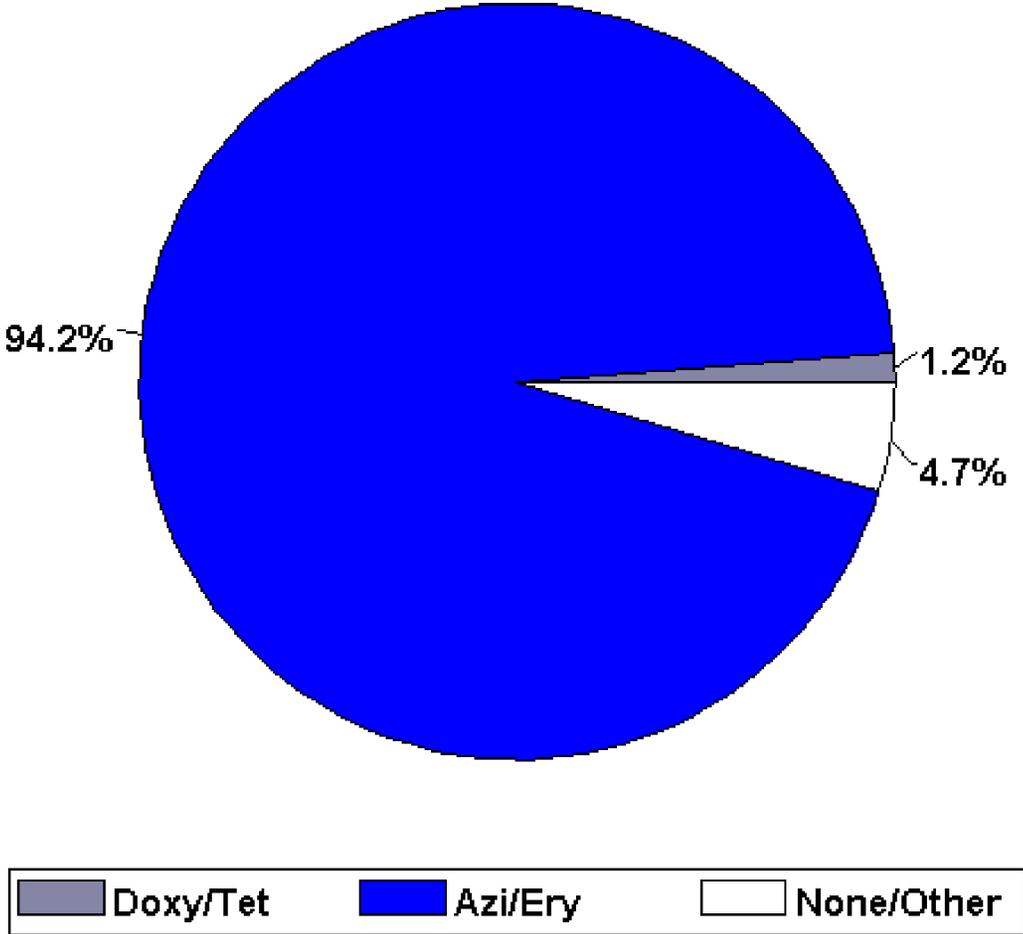
San Diego, California (N=172)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



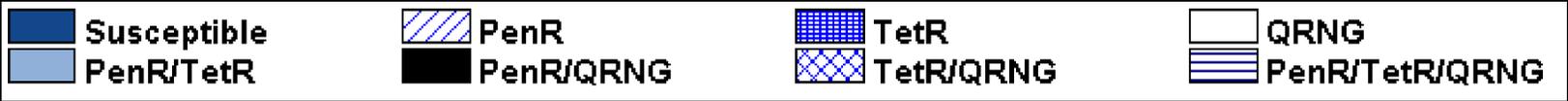
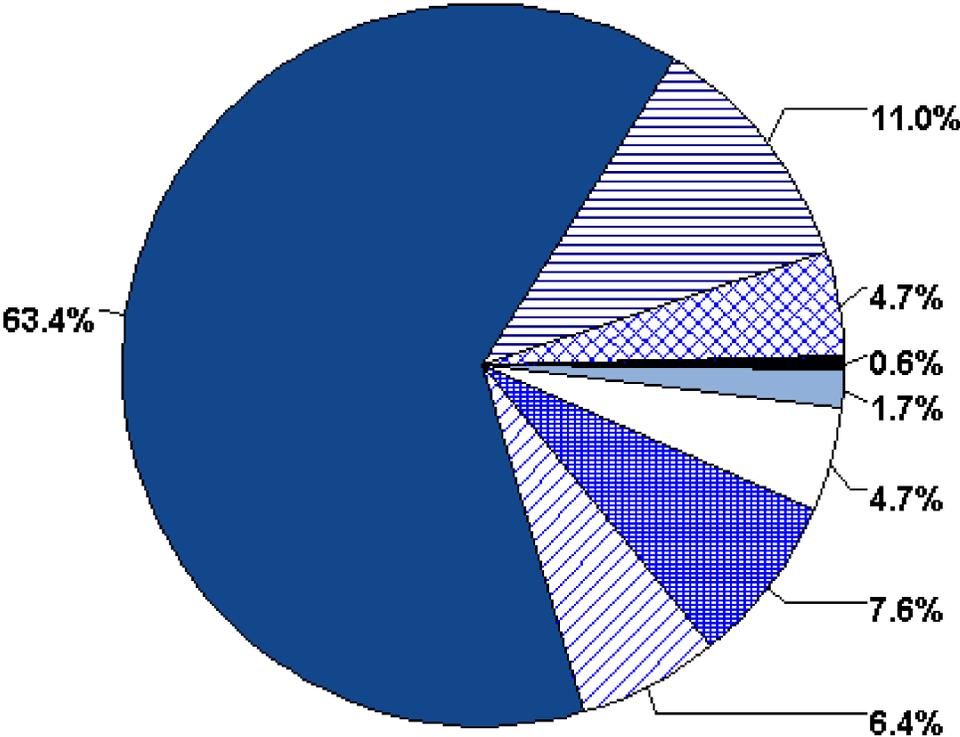
San Diego, California (N=172)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



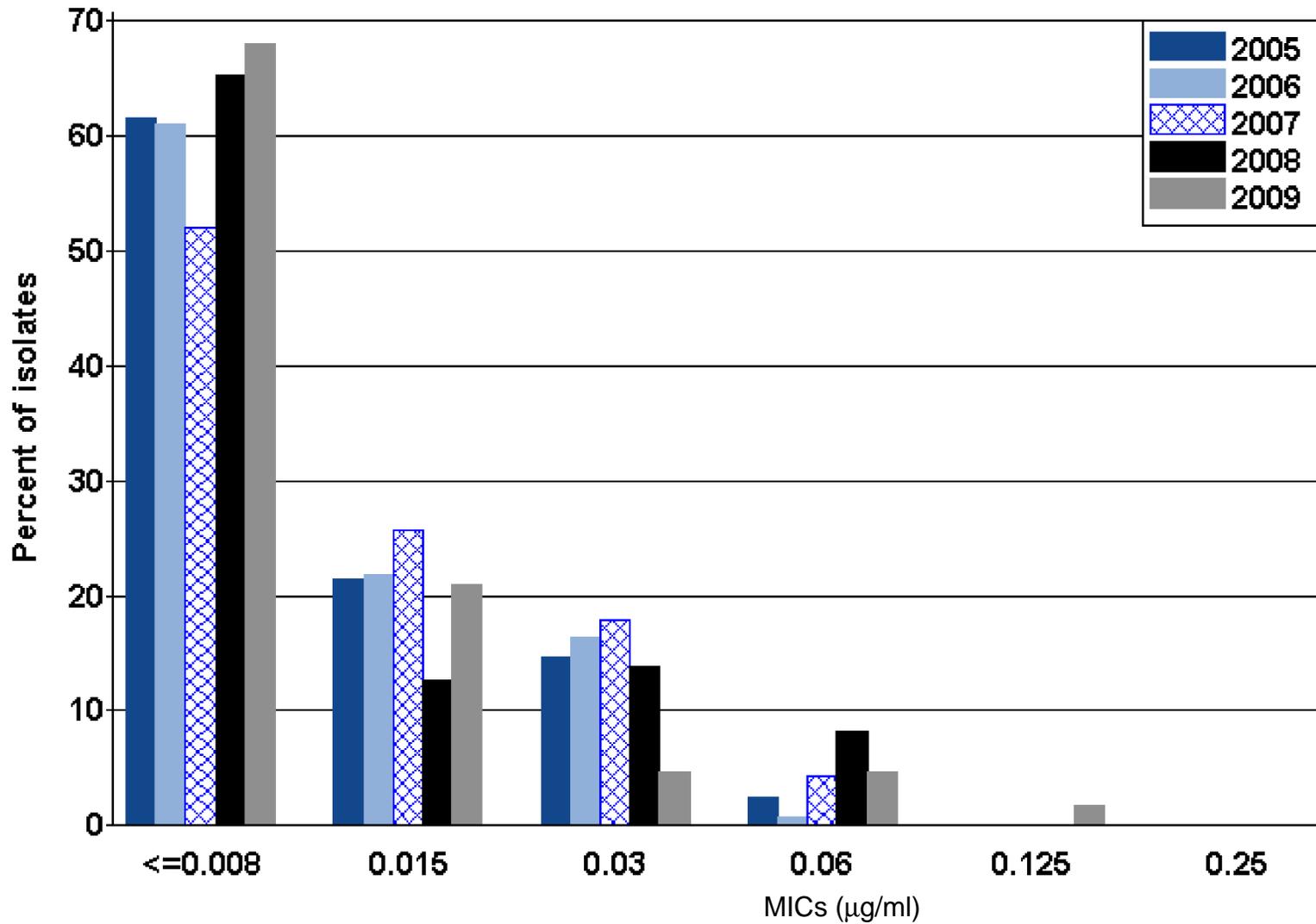
San Diego, California (N=172)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



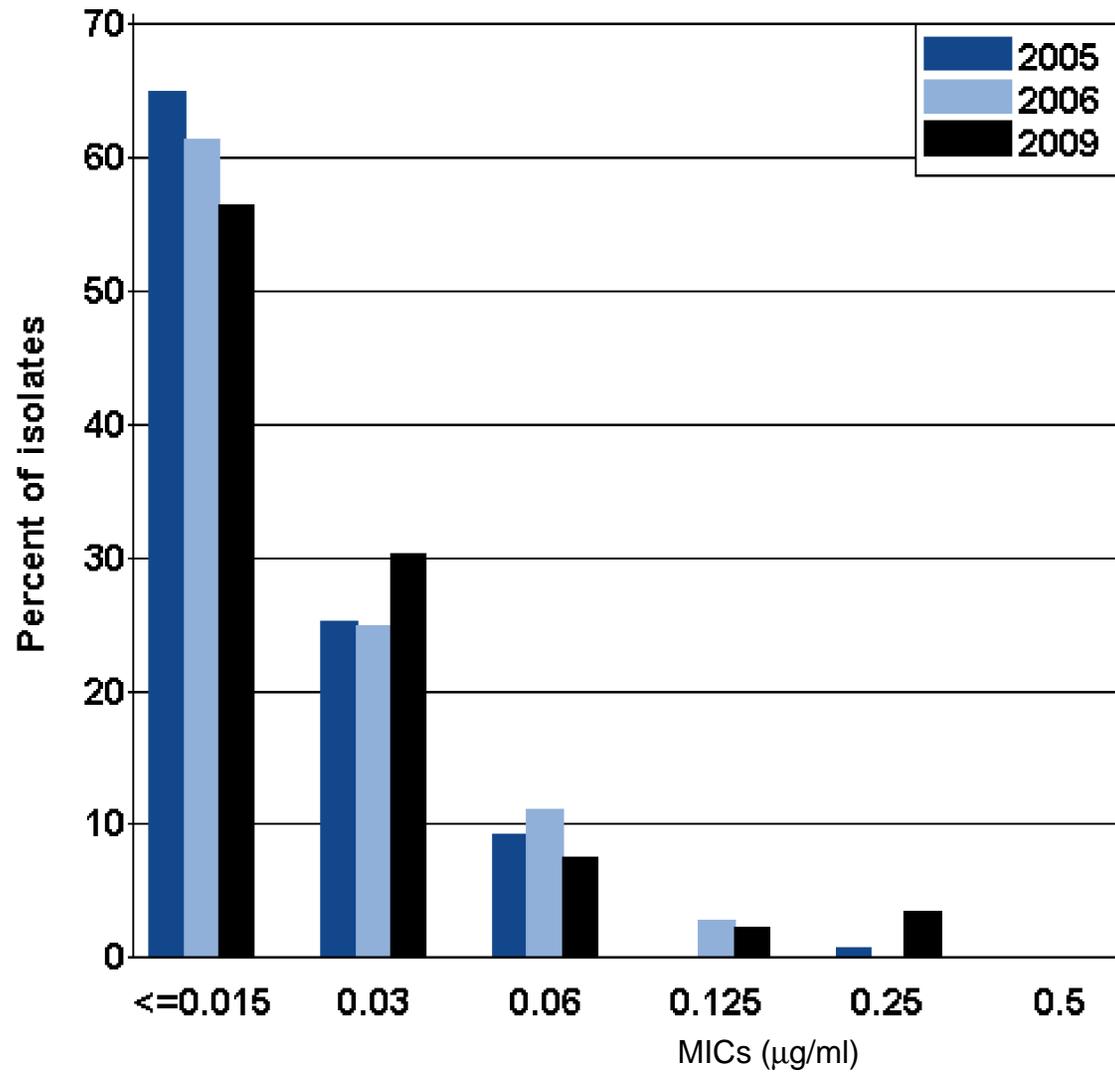
San Diego, California

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



San Diego, California

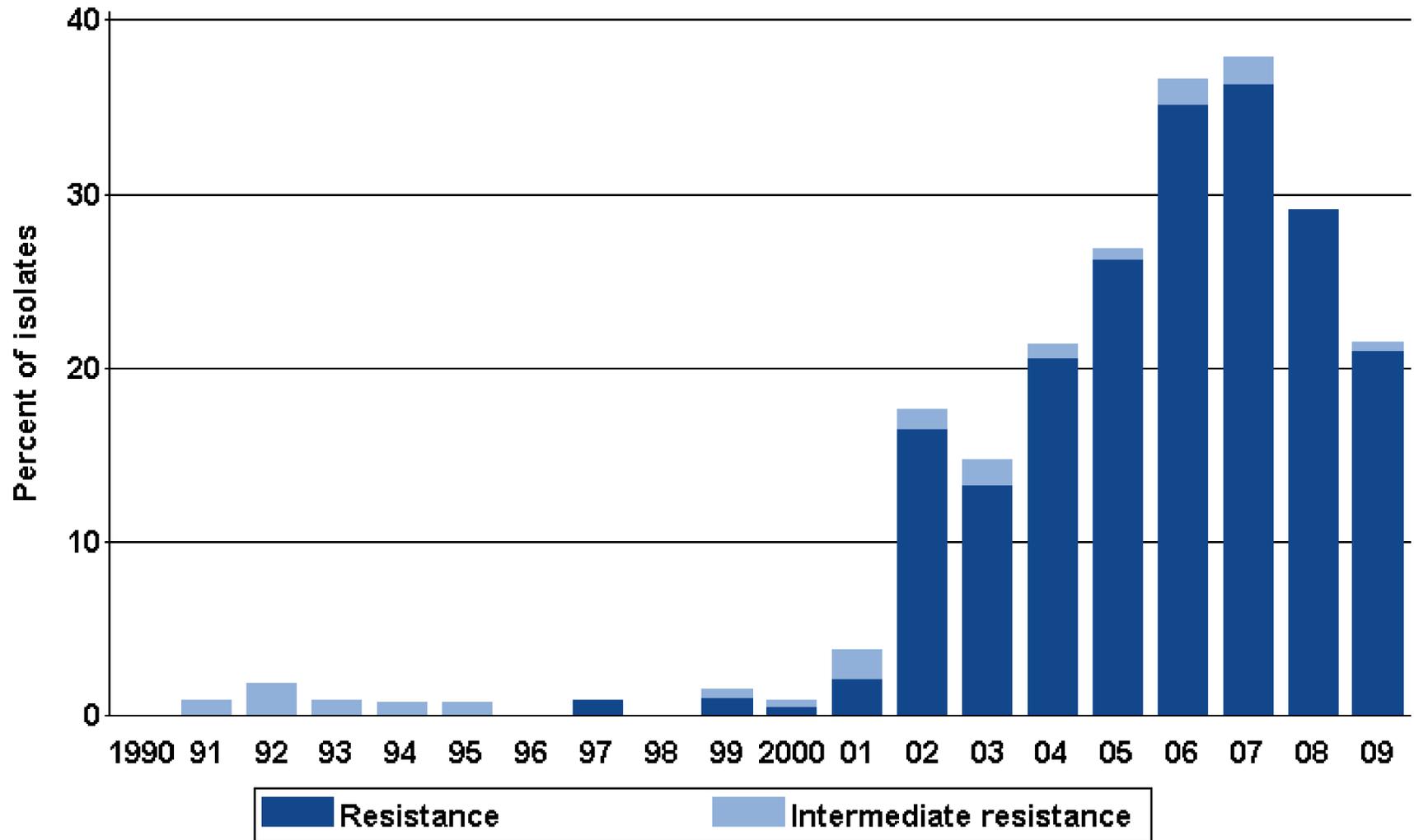
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

San Diego, California

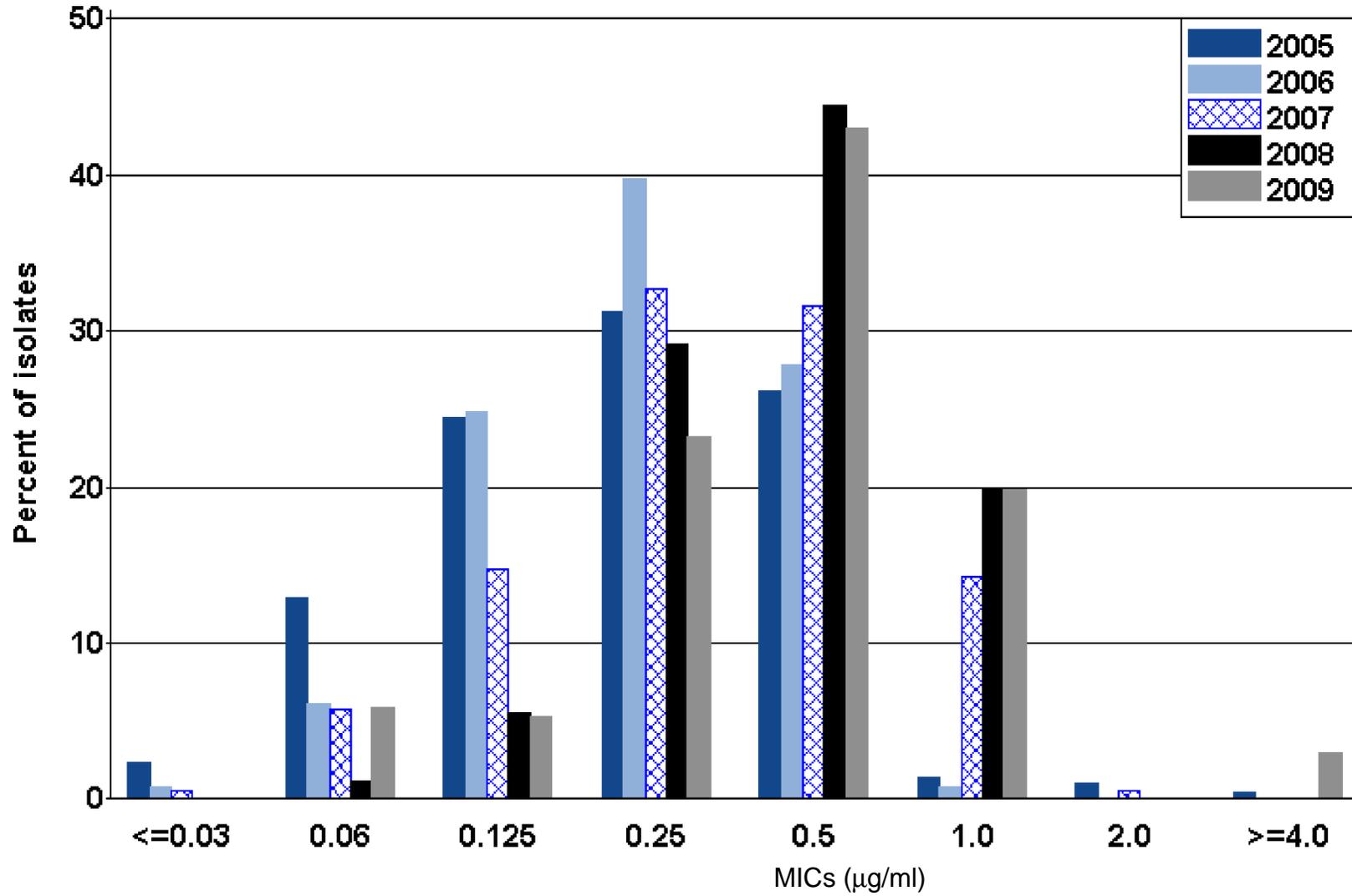
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

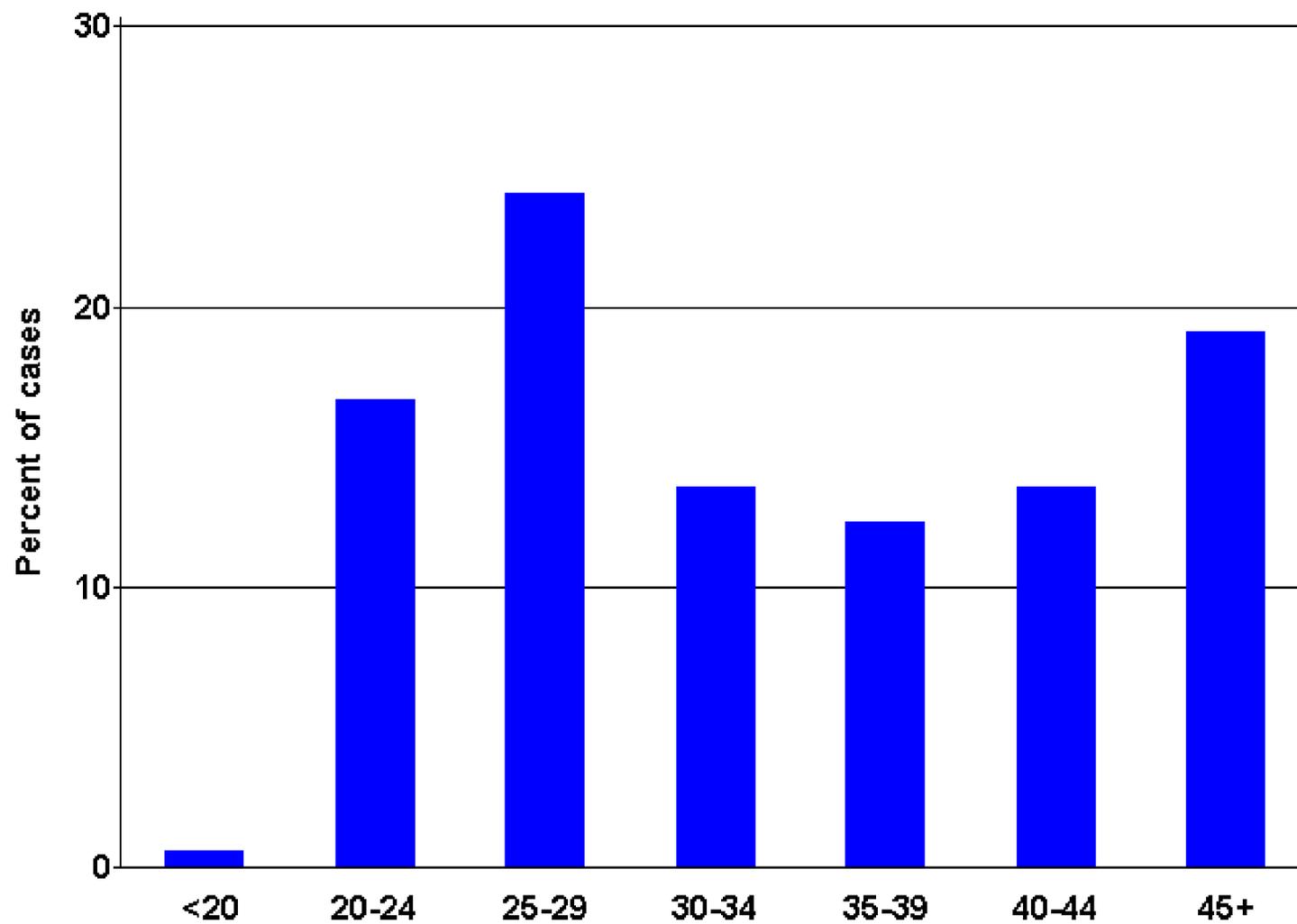
San Diego, California

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



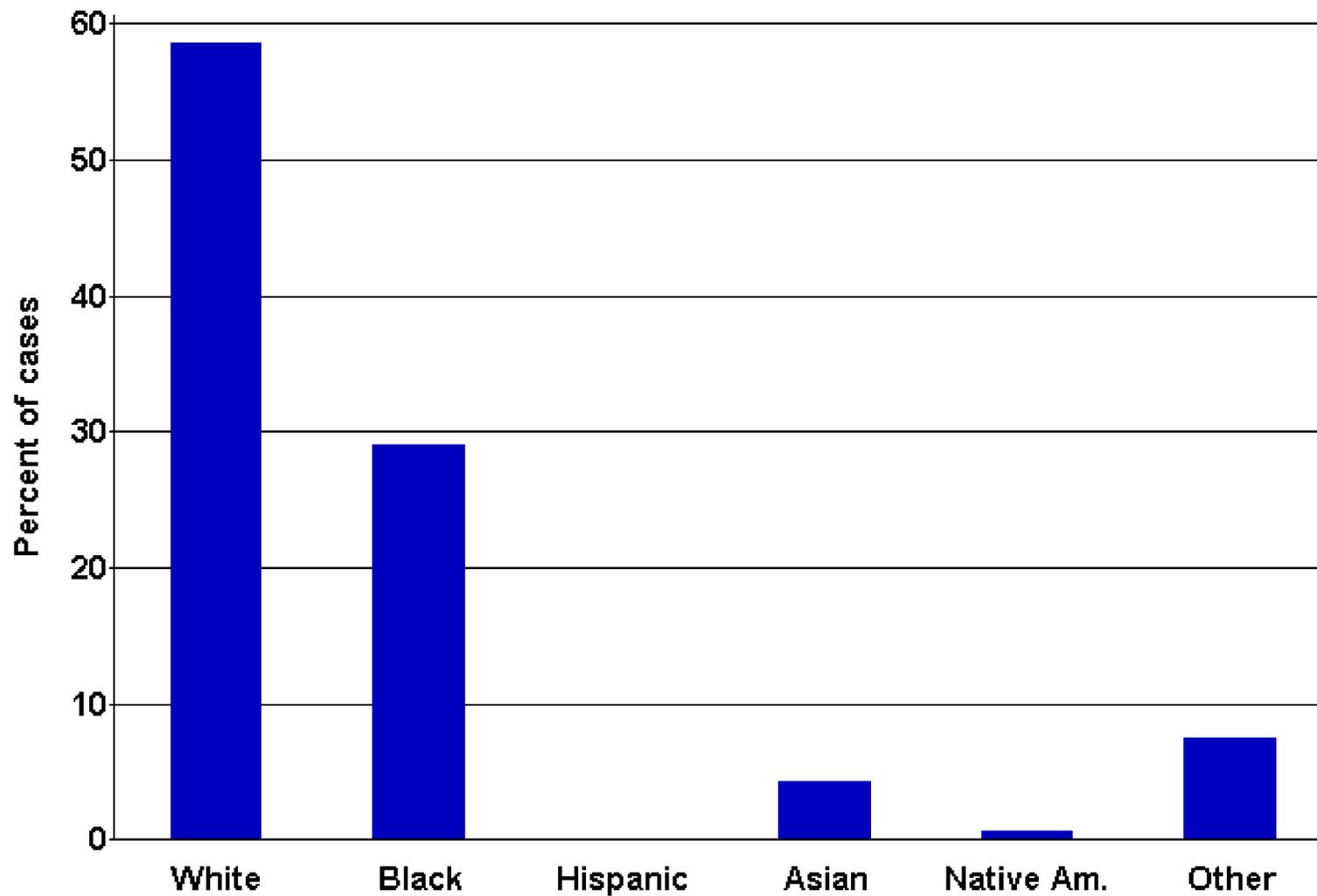
Seattle, Washington (N=162)

Figure A. Age of GISP participants, in years, 2009



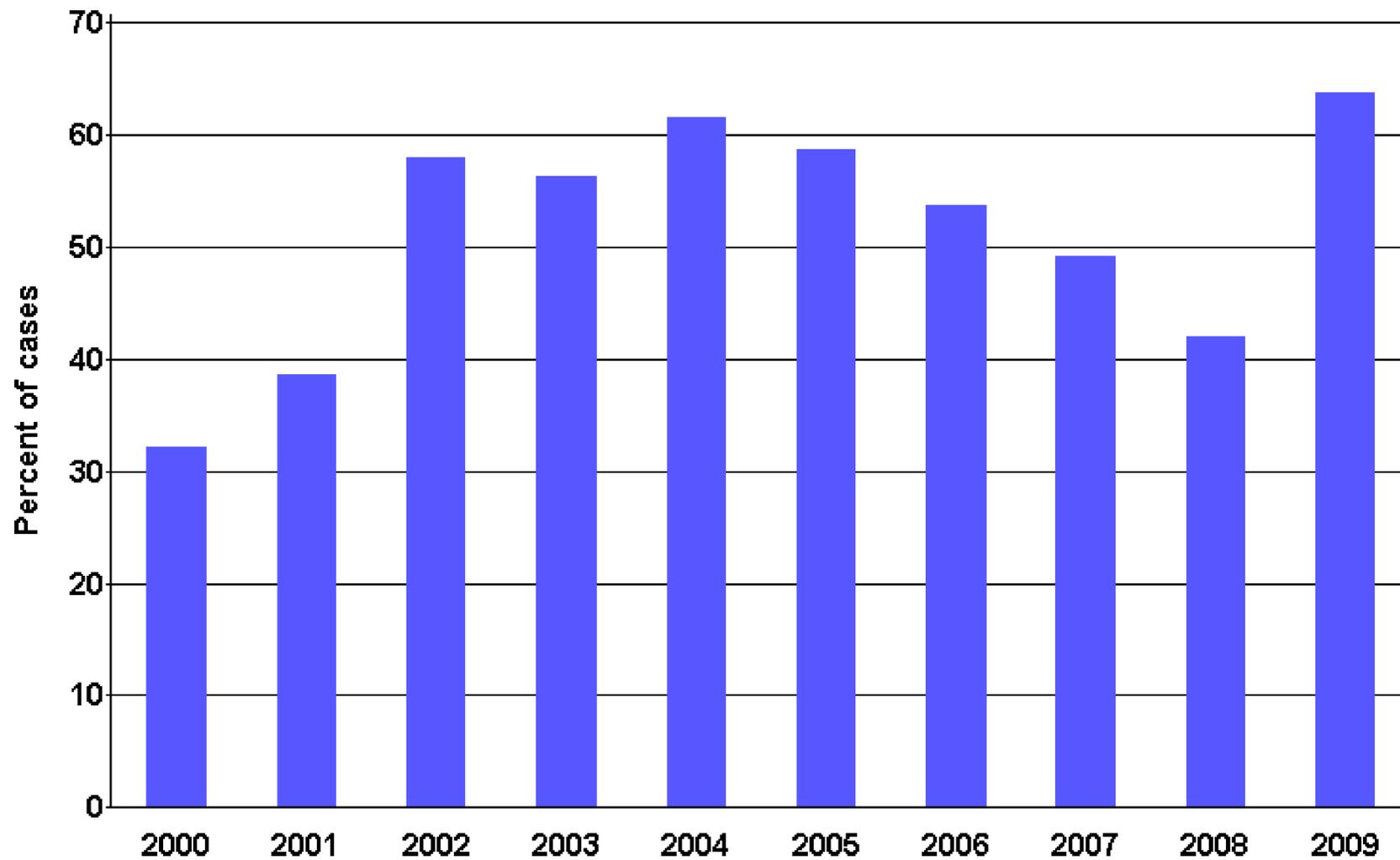
Seattle, Washington (N=162)

Figure B. Race/ethnicity of GISP participants, 2009



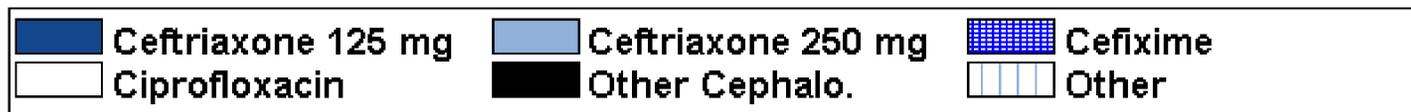
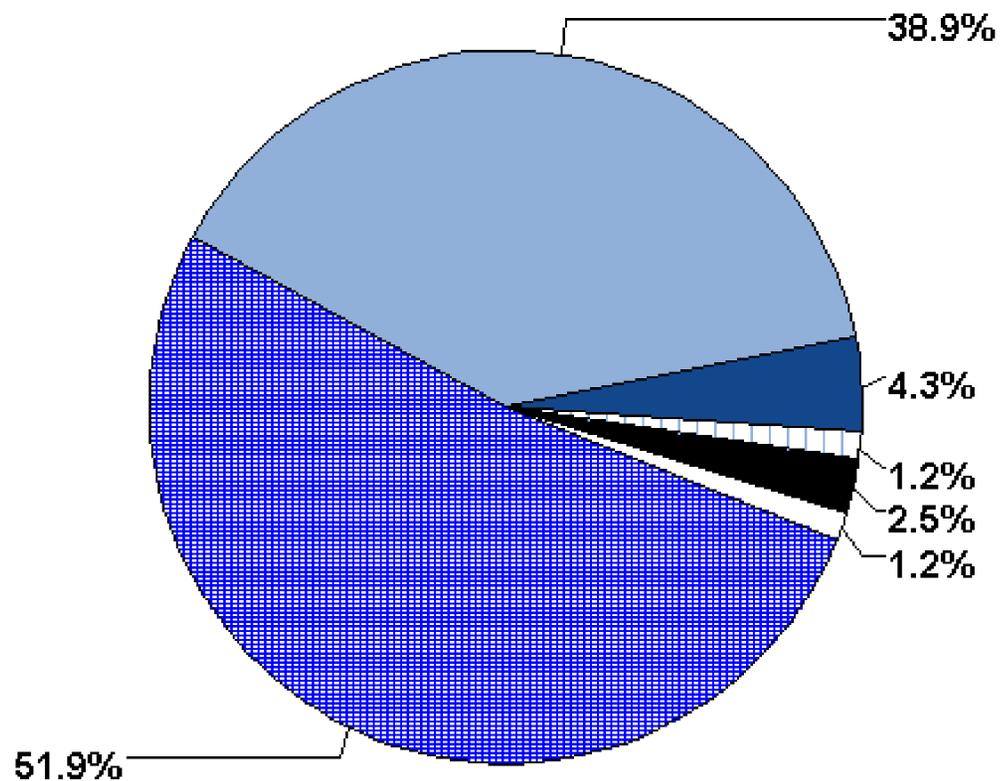
Seattle, Washington

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



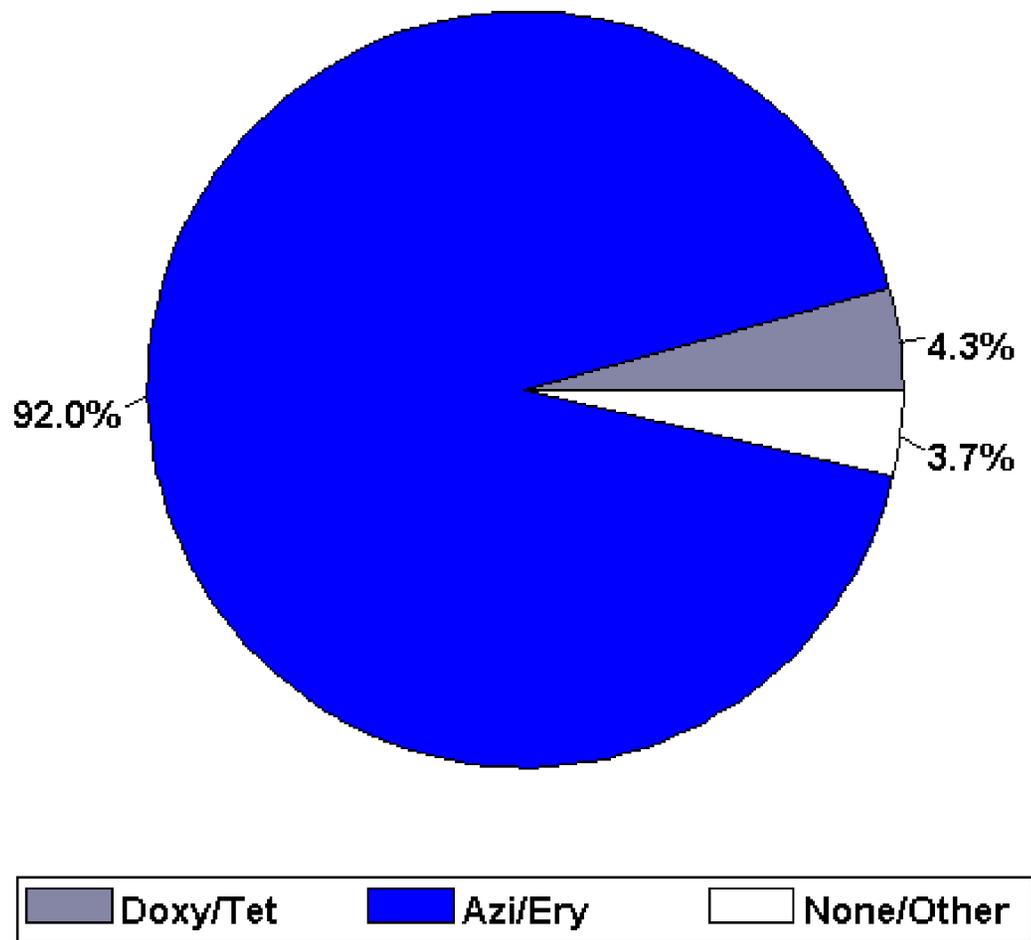
Seattle, Washington (N=162)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



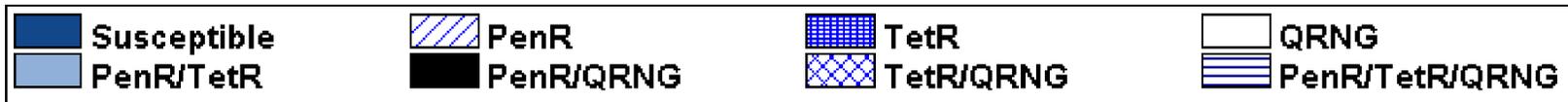
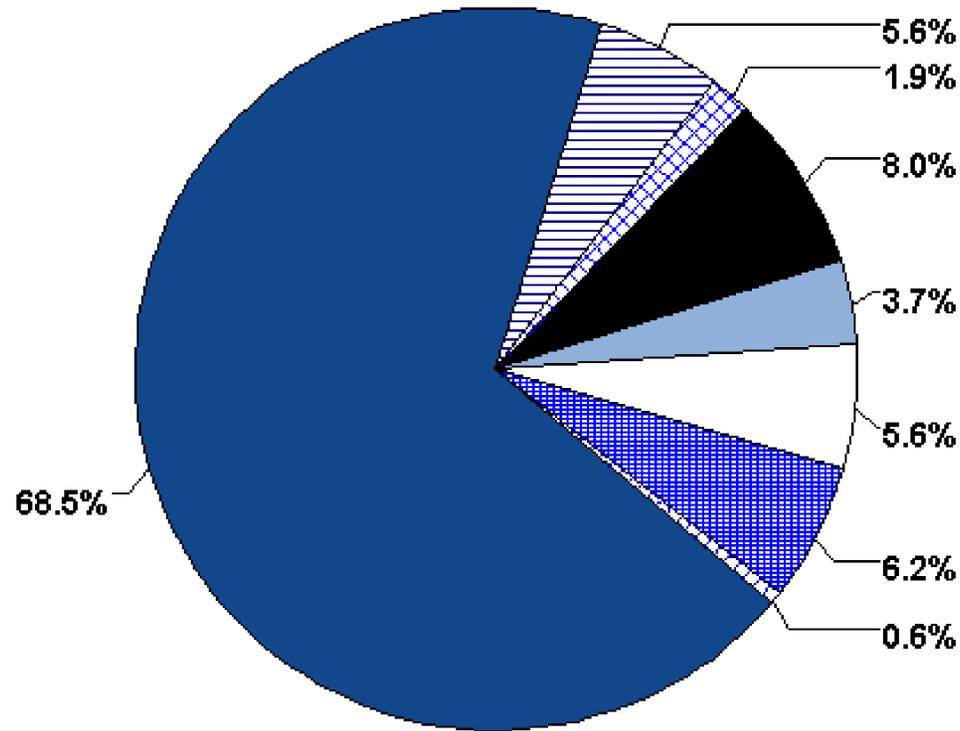
Seattle, Washington (N=162)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



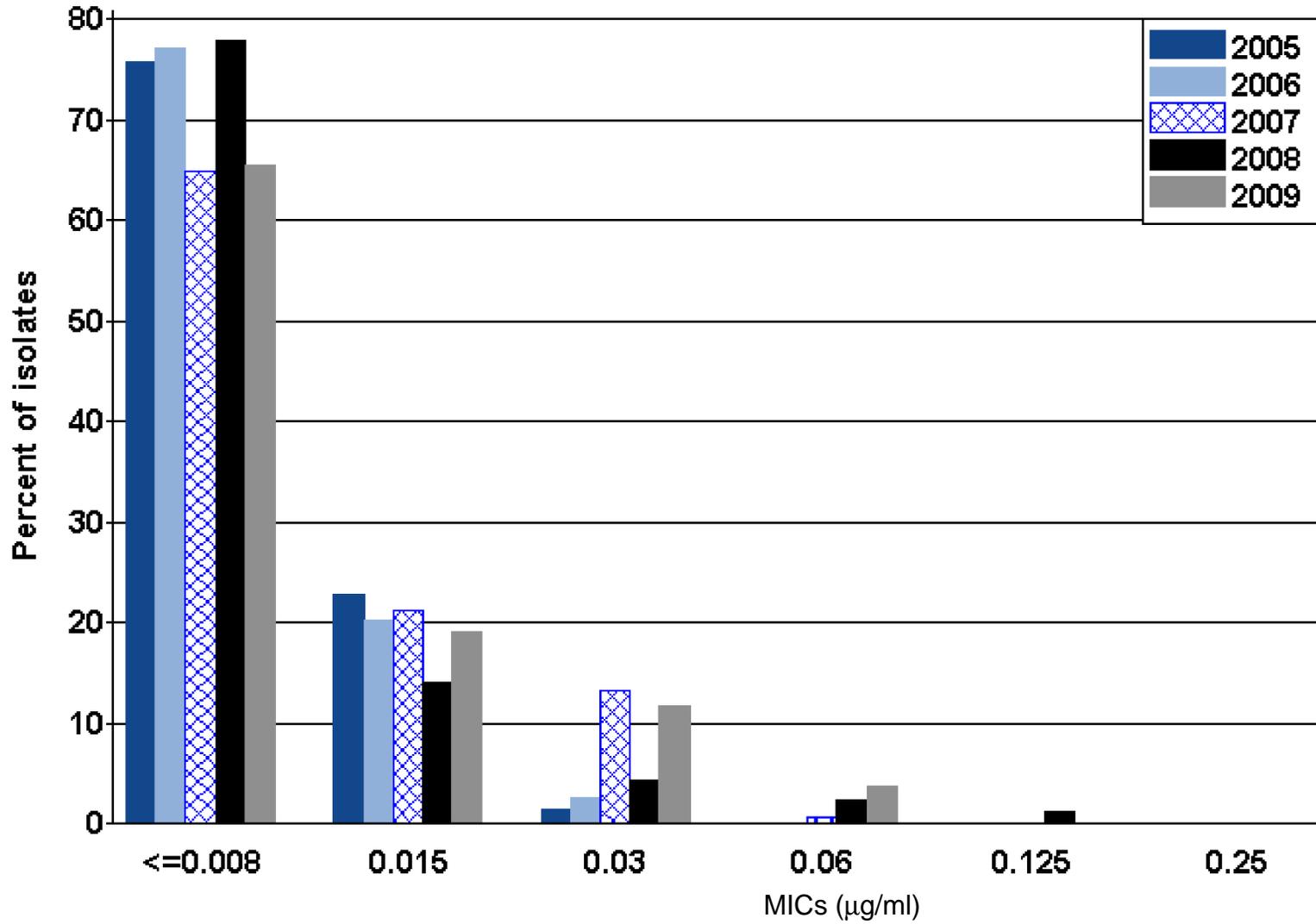
Seattle, Washington (N=162)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



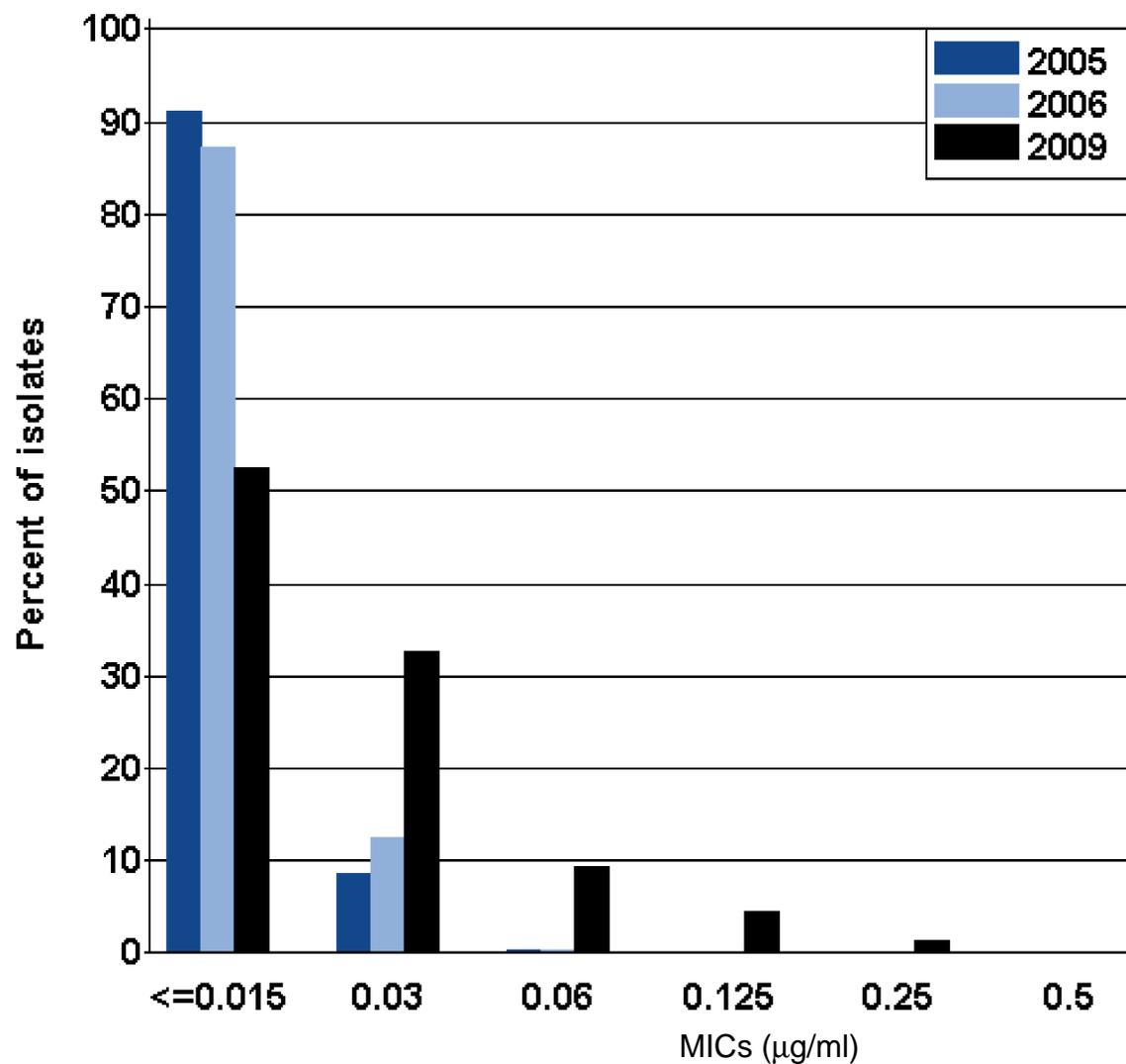
Seattle, Washington

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Seattle, Washington

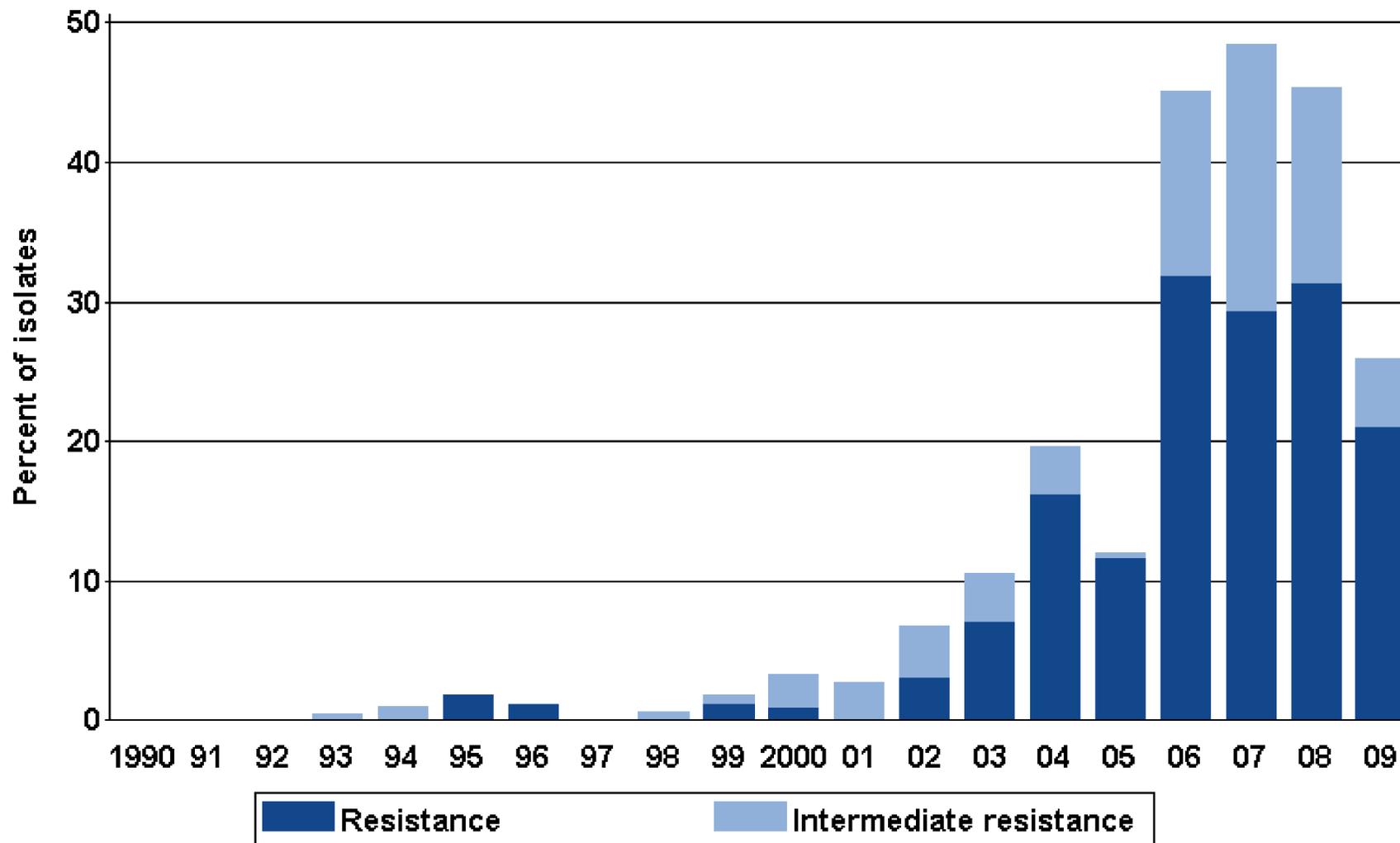
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Seattle, Washington

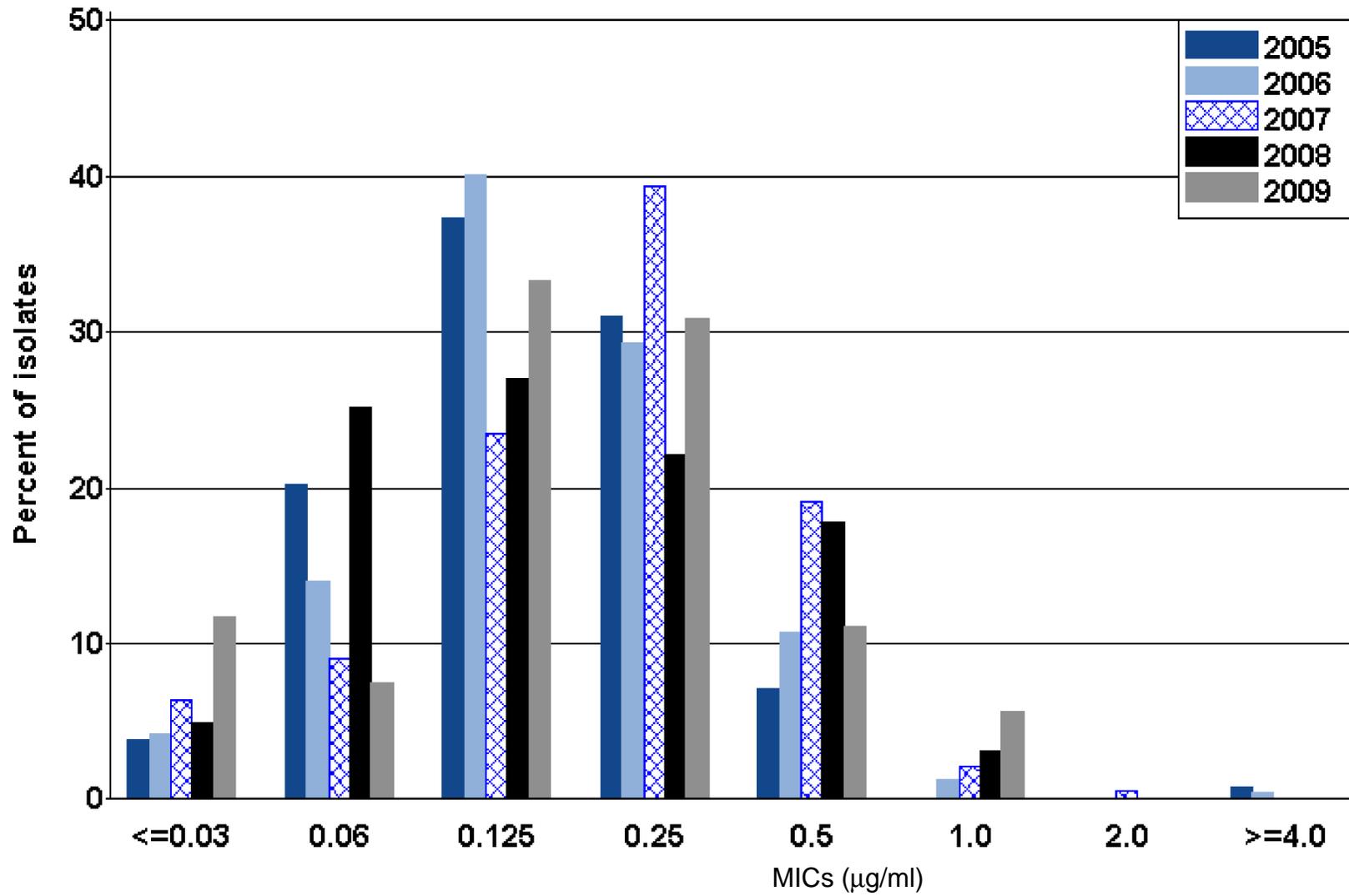
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

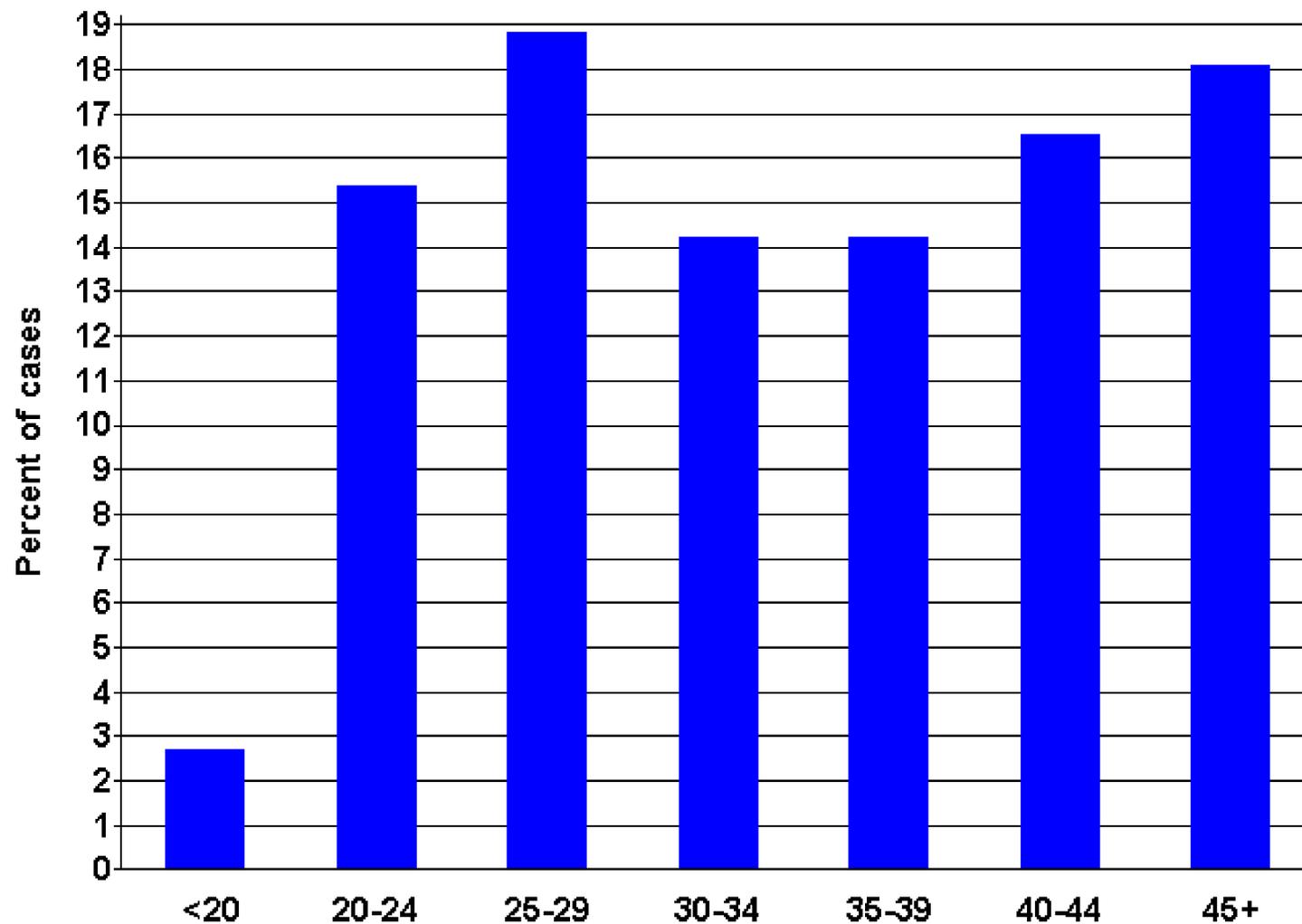
Seattle, Washington

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



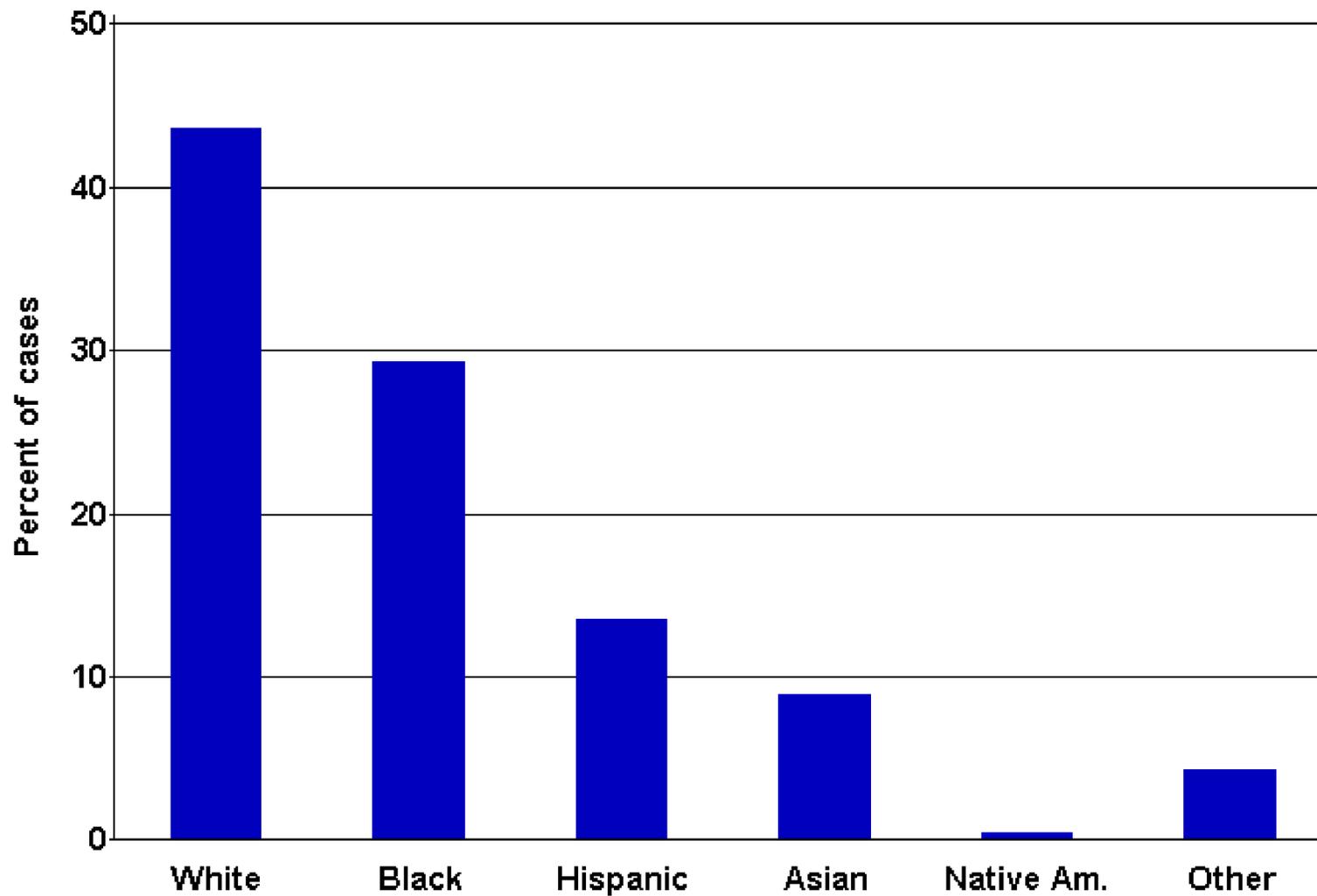
San Francisco, California (N=260)

Figure A. Age of GISP participants, in years, 2009



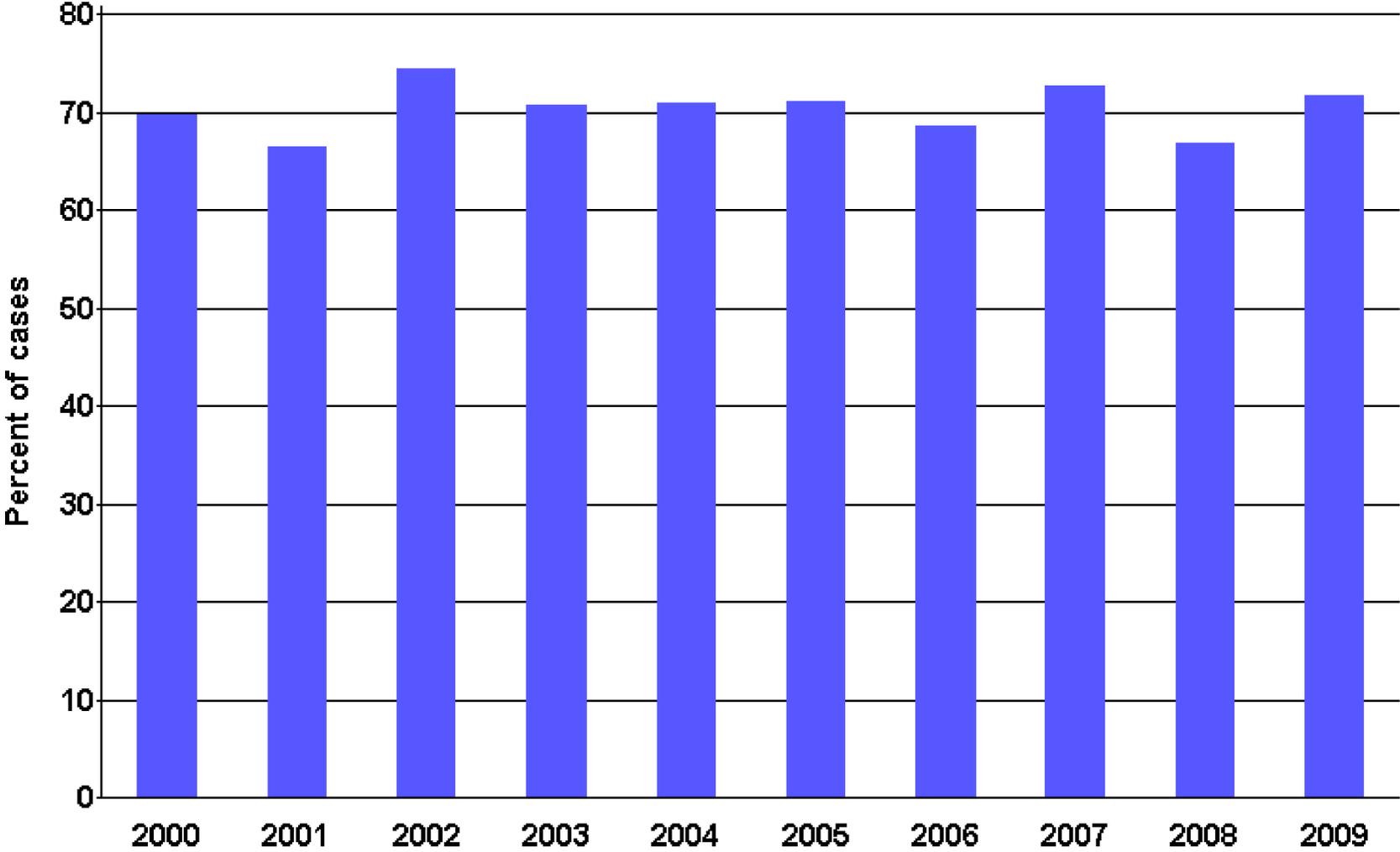
San Francisco, California (N=260)

Figure B. Race/ethnicity of GISP participants, 2009



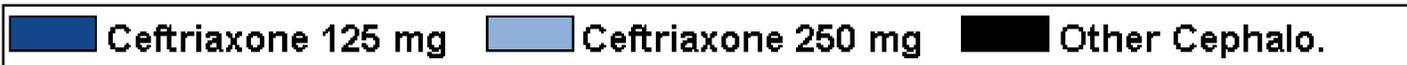
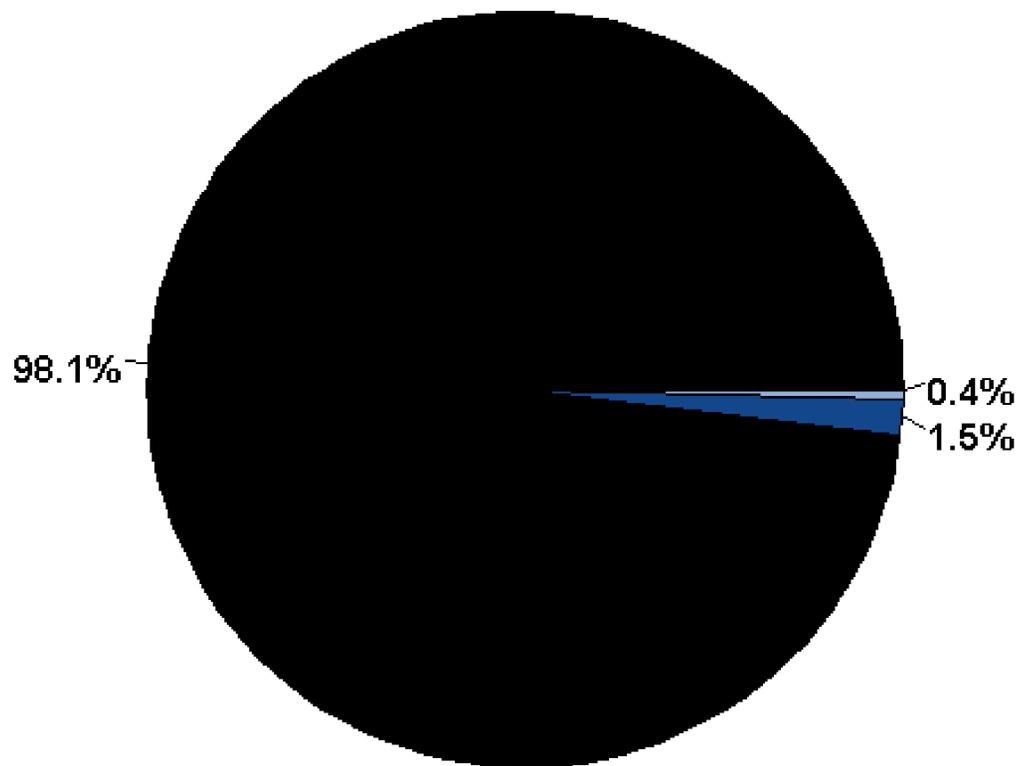
San Francisco, California

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009



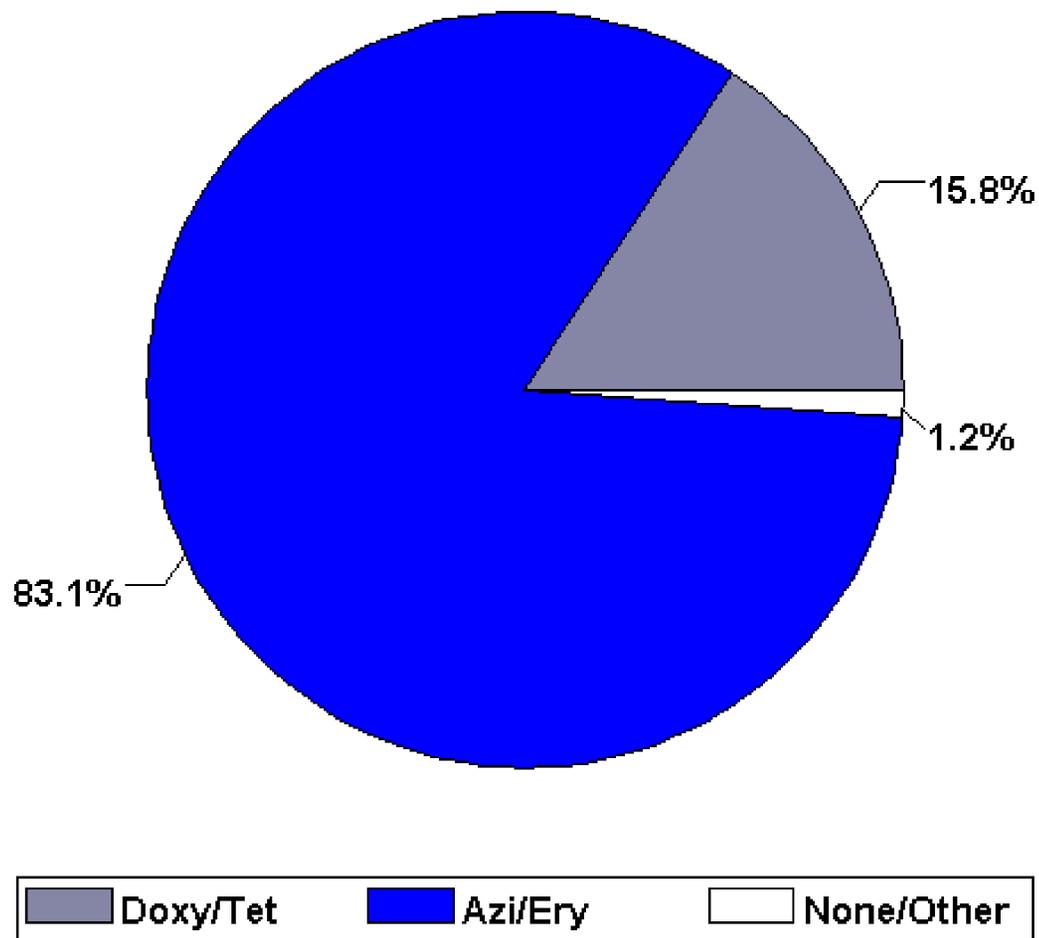
San Francisco, California (N=260)

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



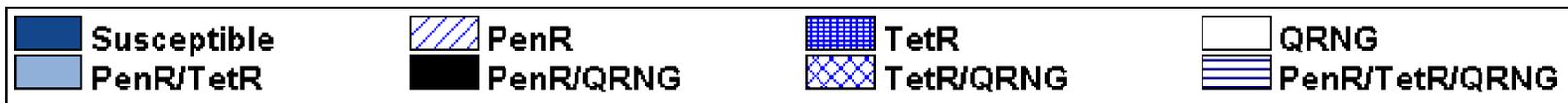
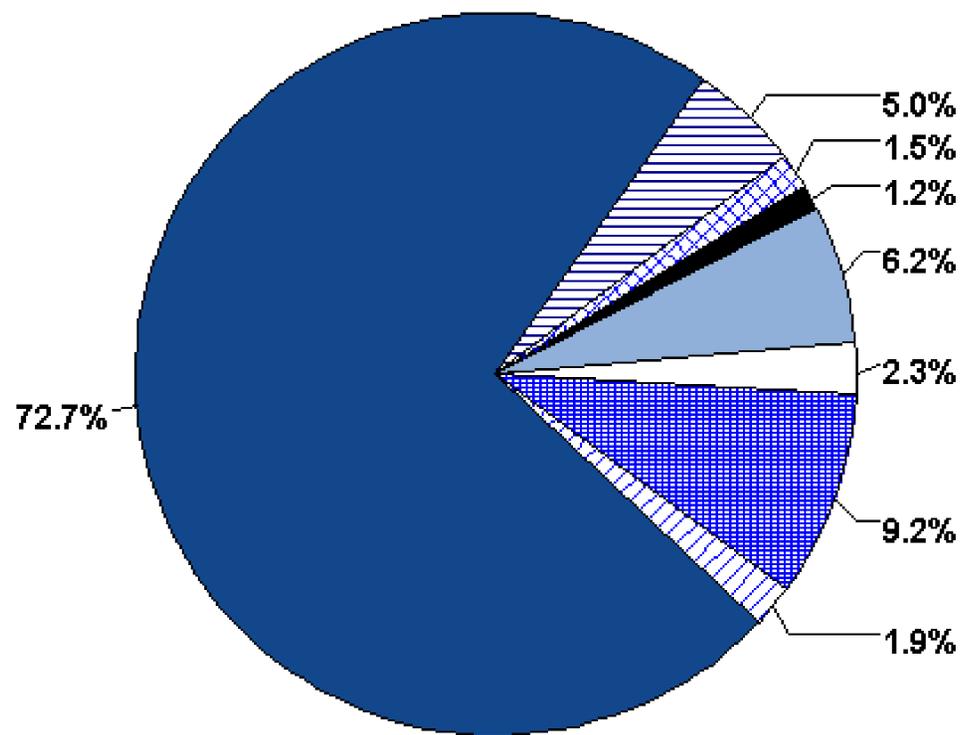
San Francisco, California (N=260)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



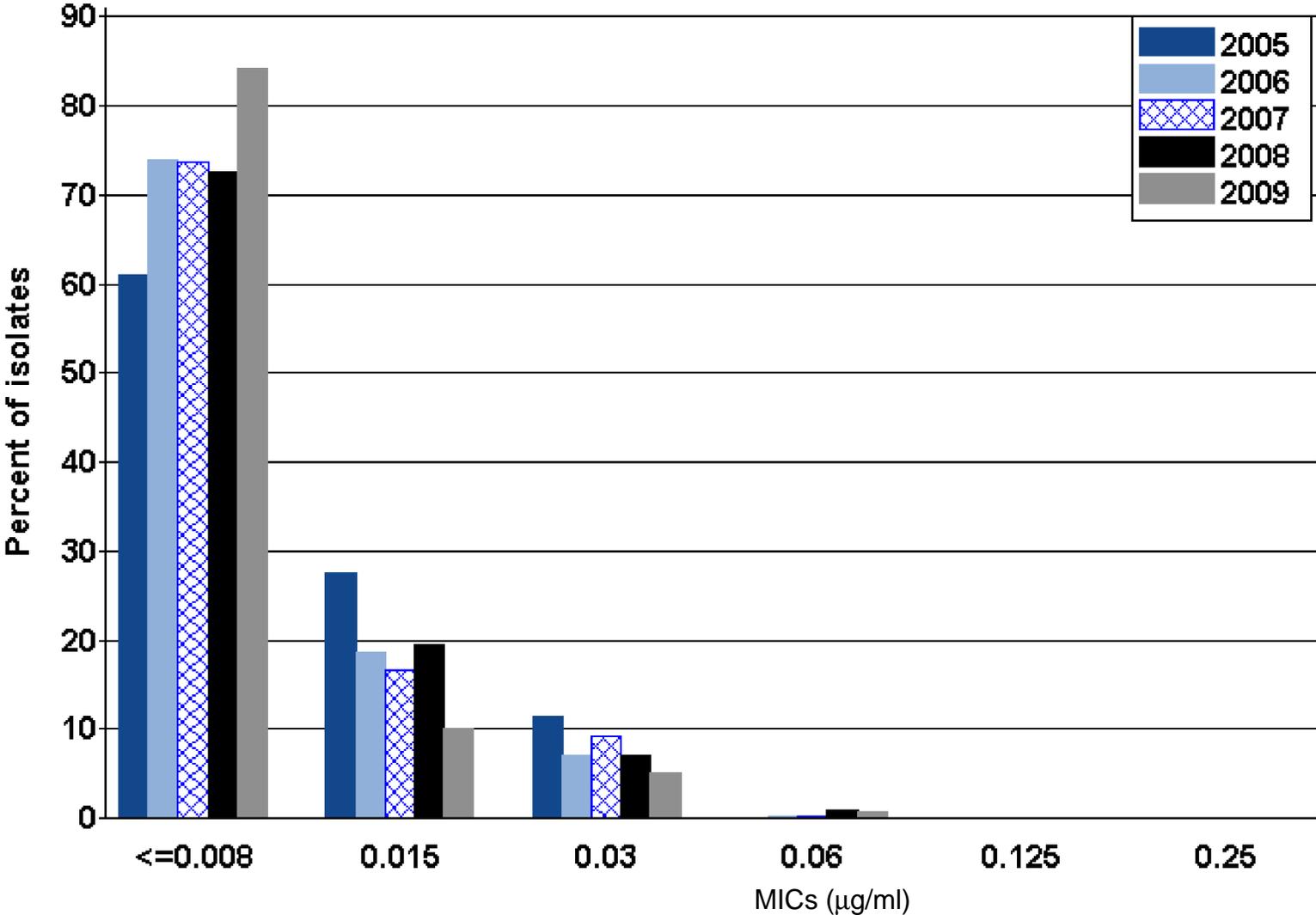
San Francisco, California (N=260)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



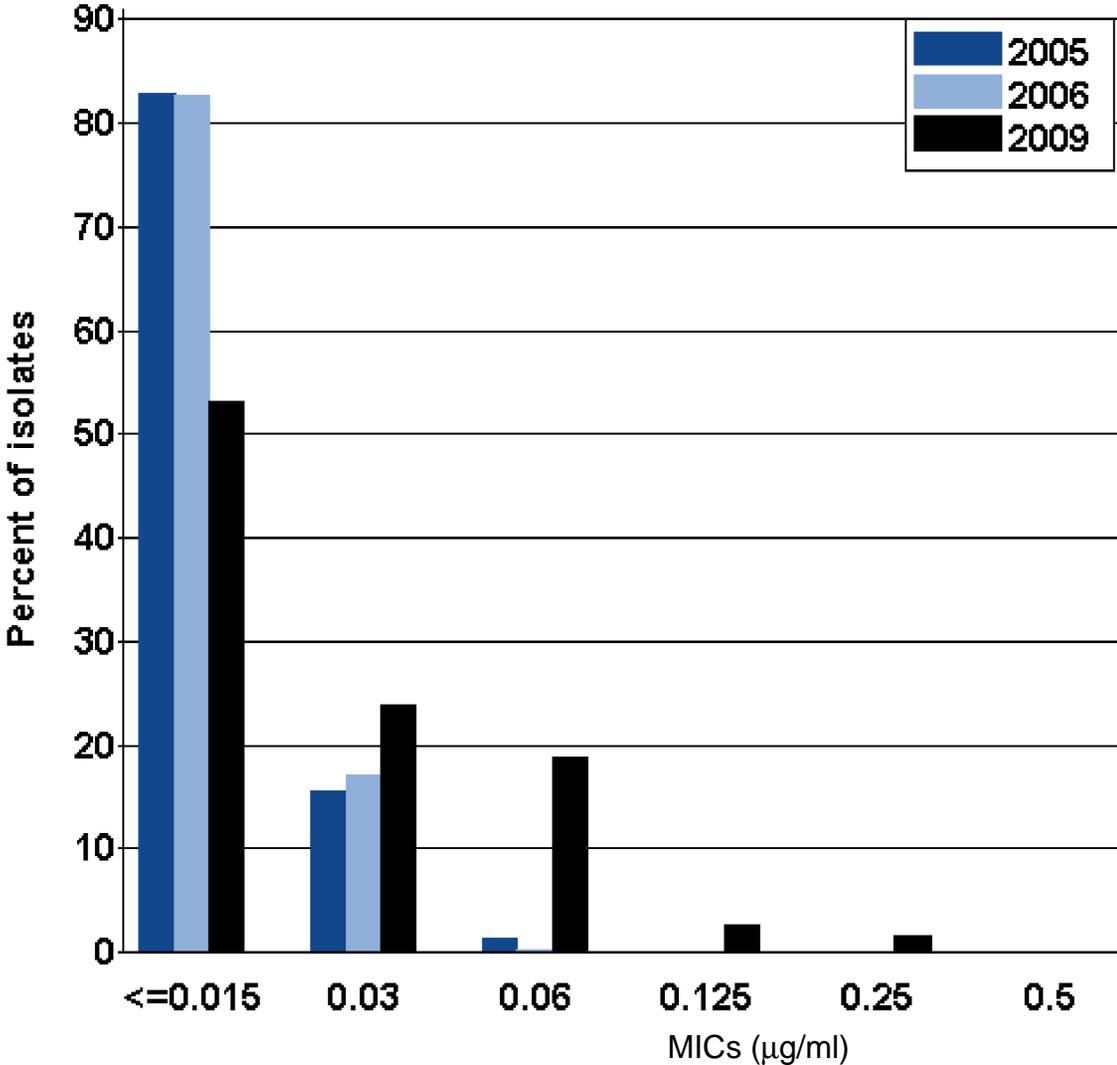
San Francisco, California

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



San Francisco, California

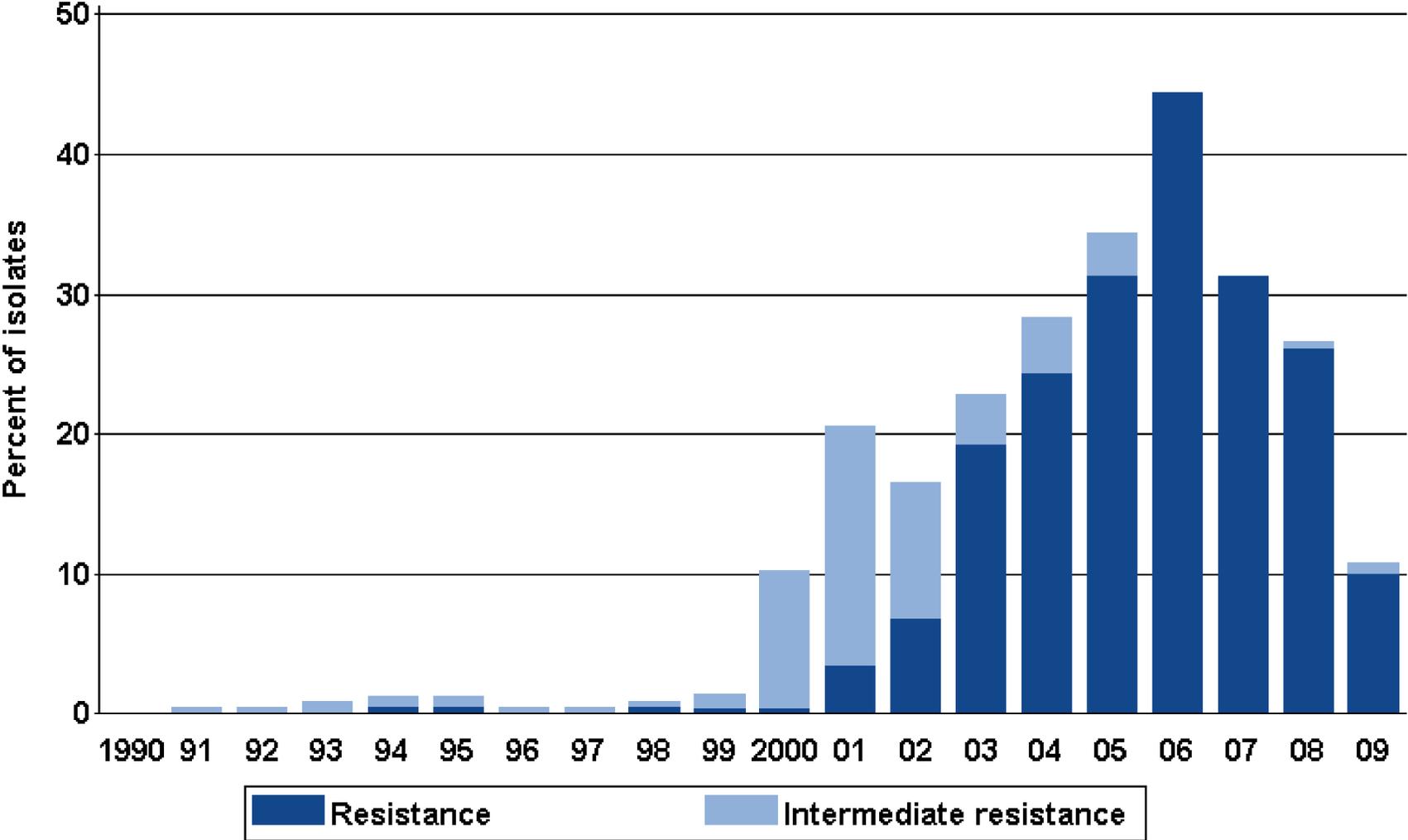
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

San Francisco, California

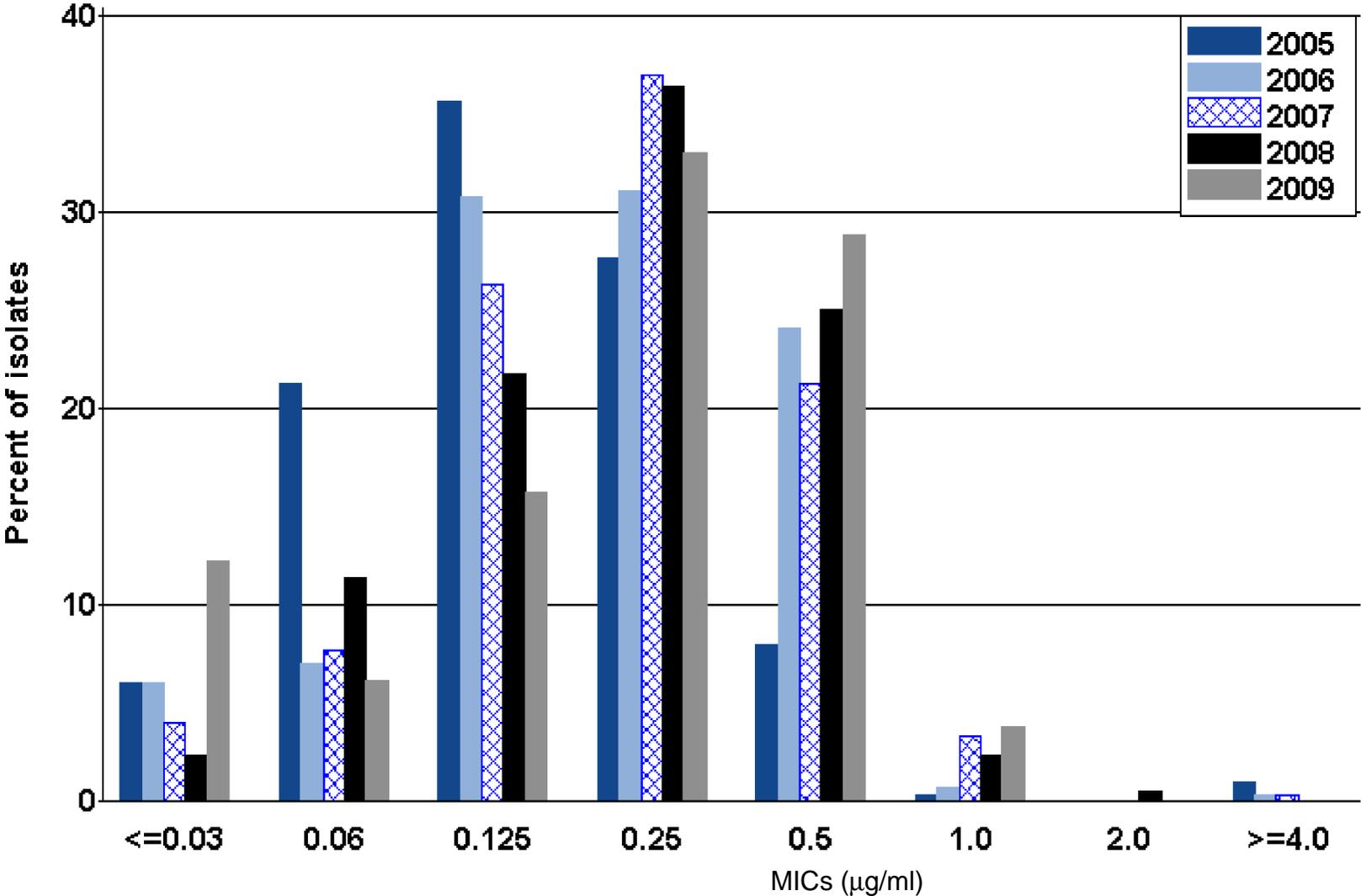
Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

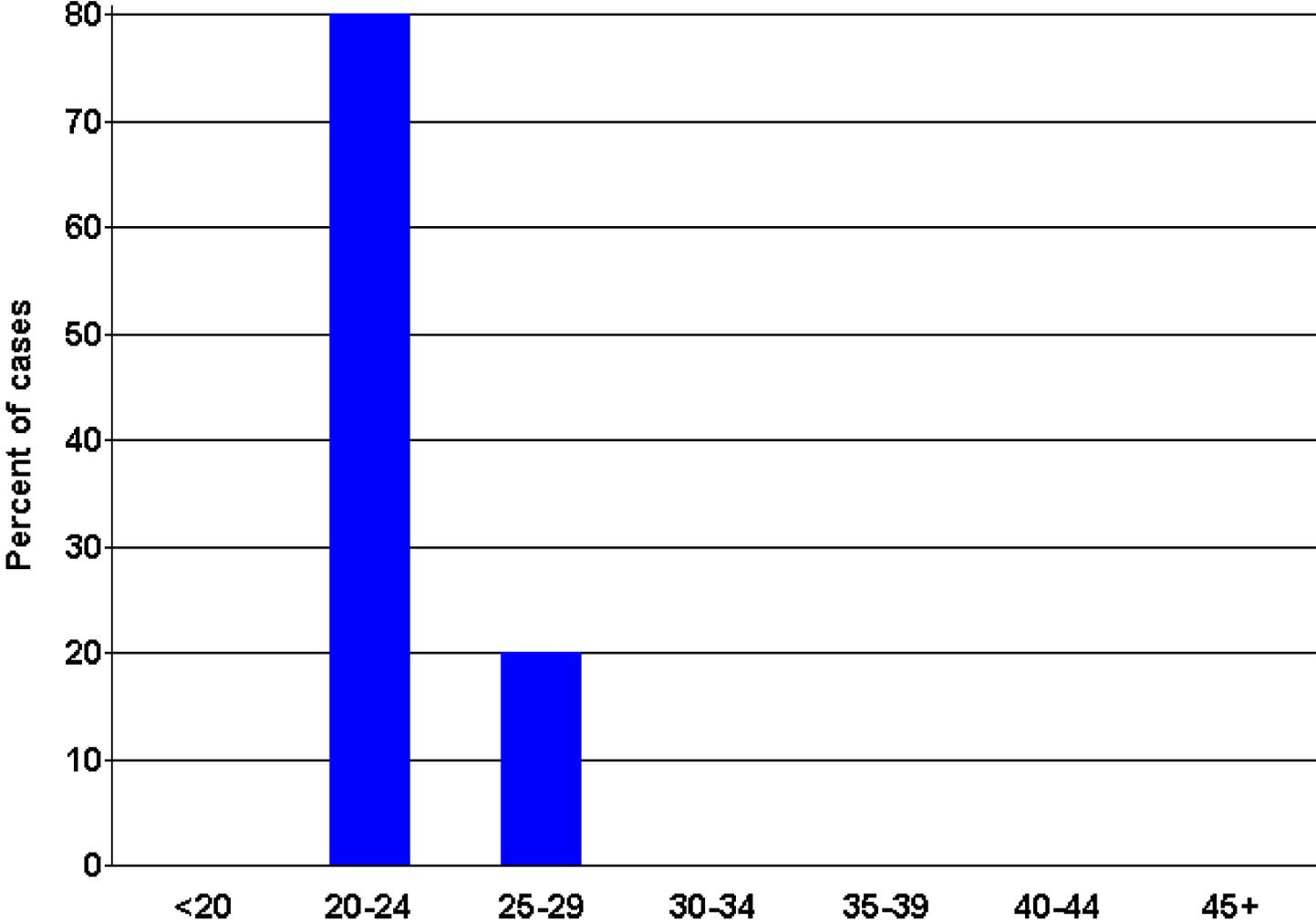
San Francisco, California

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009



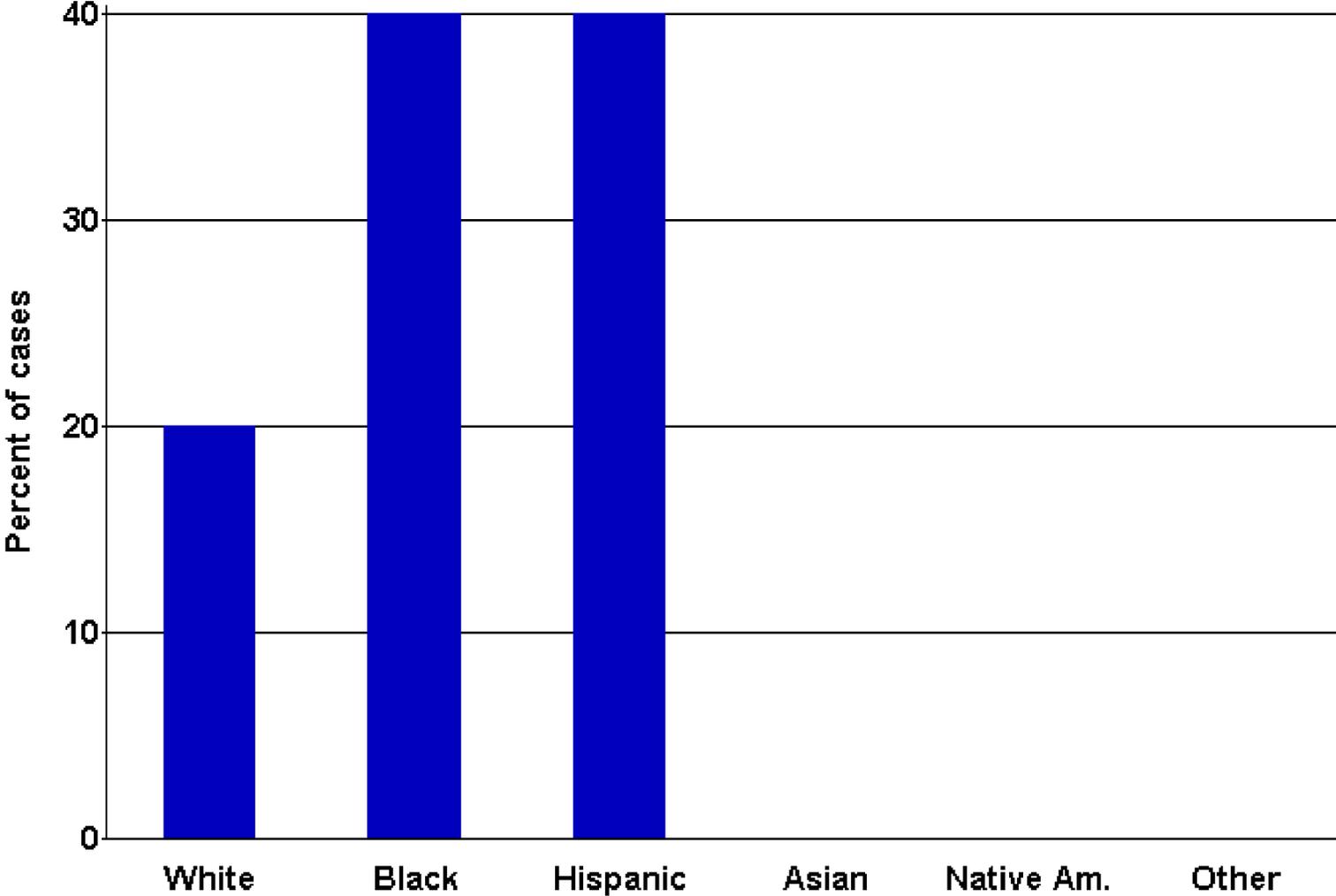
Tripler Army Medical Center, Hawaii (N=6)

Figure A. Age of GISP participants, in years, 2009



Tripler Army Medical Center, Hawaii (N=6)

Figure B. Race/ethnicity of GISP participants, 2009

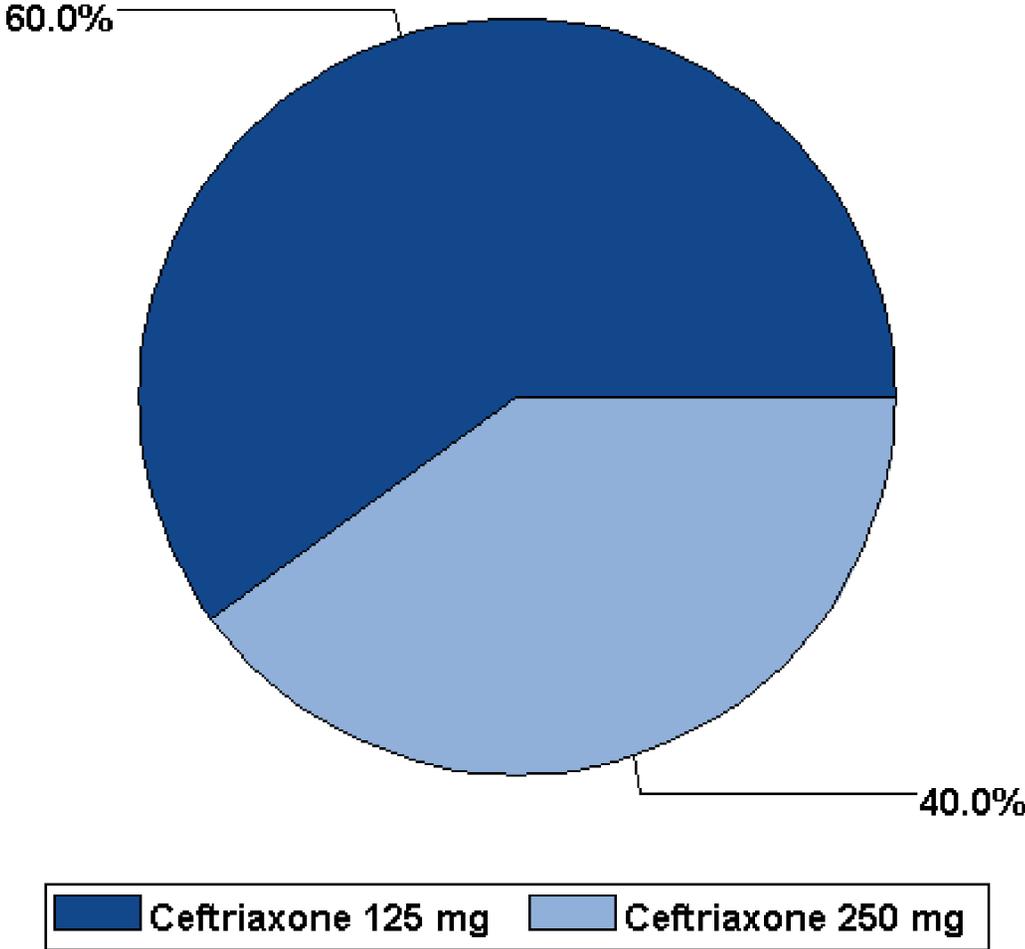


Tripler Army Medical Center, Hawaii

Figure C. Percentage of GISP participants identifying as men who have sex with men, 2000-2009

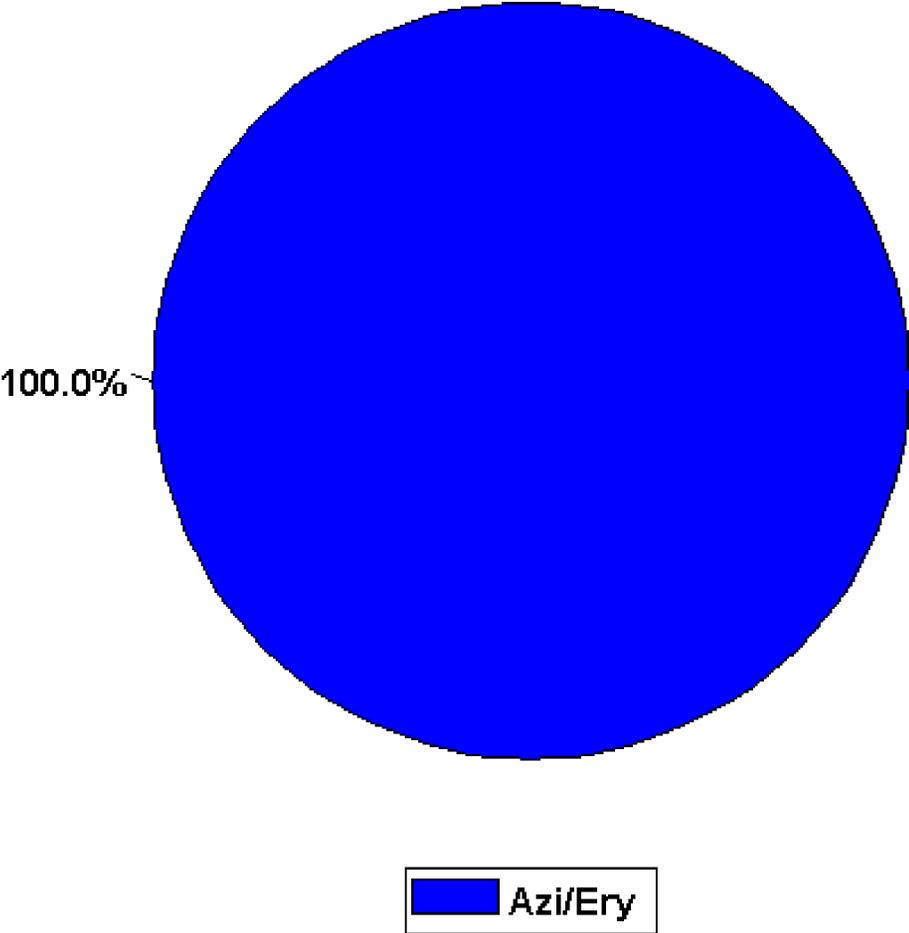
Data not collected

Figure D. Drugs used to treat gonorrhea among GISP participants, 2009



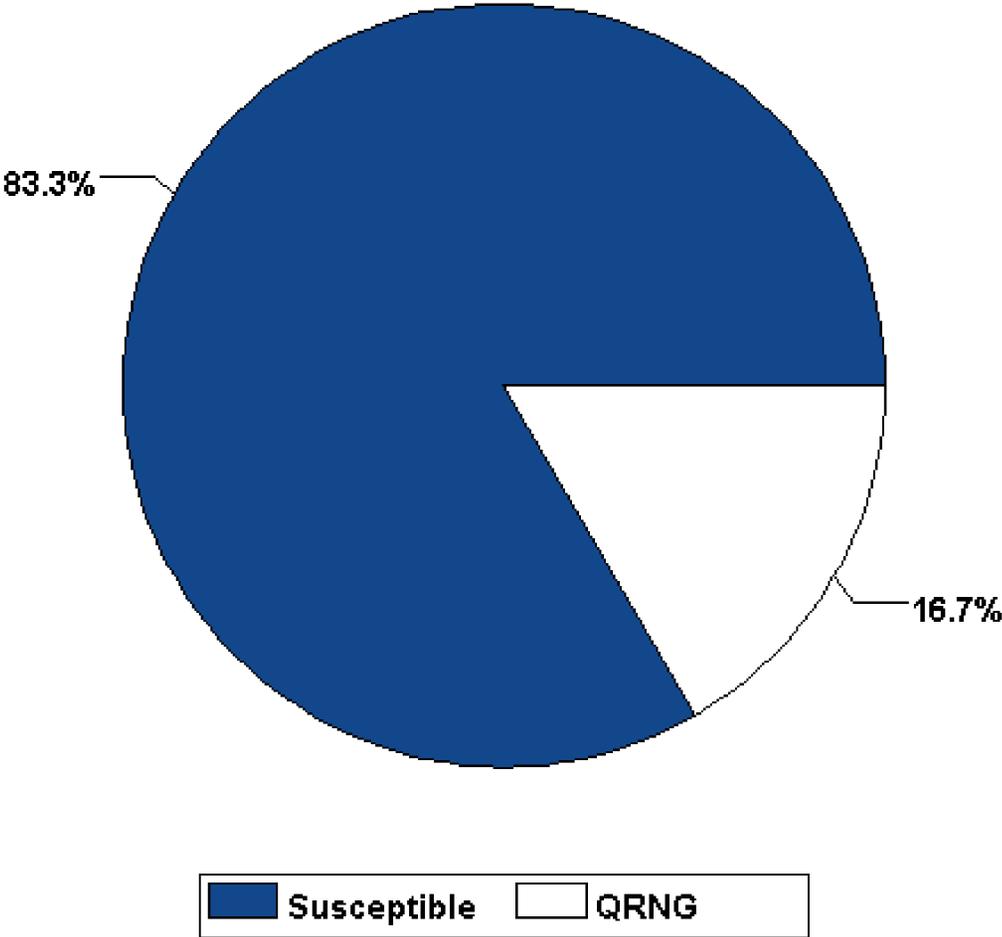
Tripler Army Medical Center, Hawaii (N=6)

Figure E. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2009



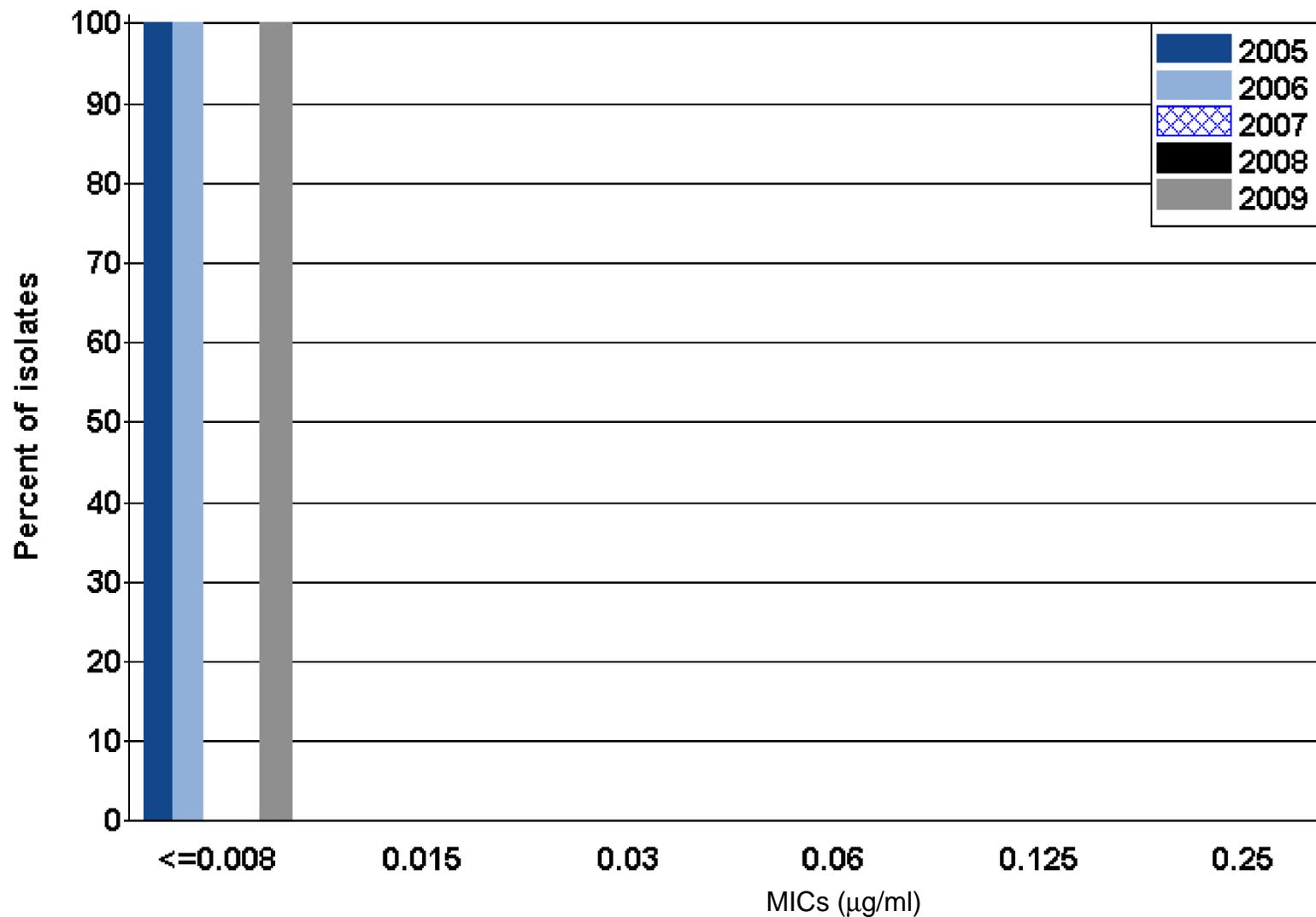
Tripler Army Medical Center, Hawaii (N=6)

Figure F. Resistance to penicillin, tetracycline, and ciprofloxacin among GISP isolates, 2009



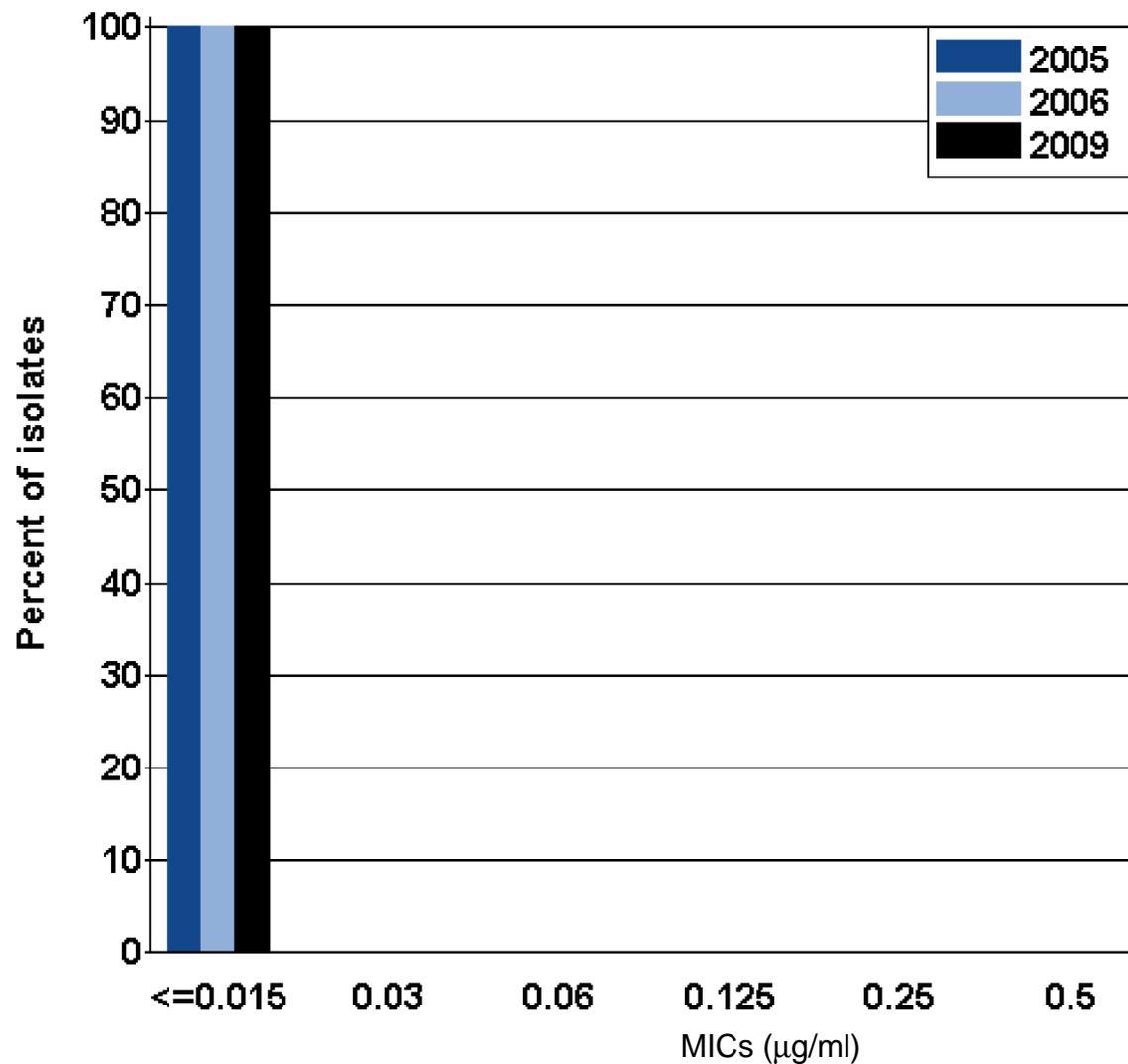
Tripler Army Medical Center, Hawaii

Figure G. Distribution of Minimum Inhibitory Concentrations (MICs) to ceftriaxone among GISP isolates, 2005-2009



Tripler Army Medical Center, Hawaii

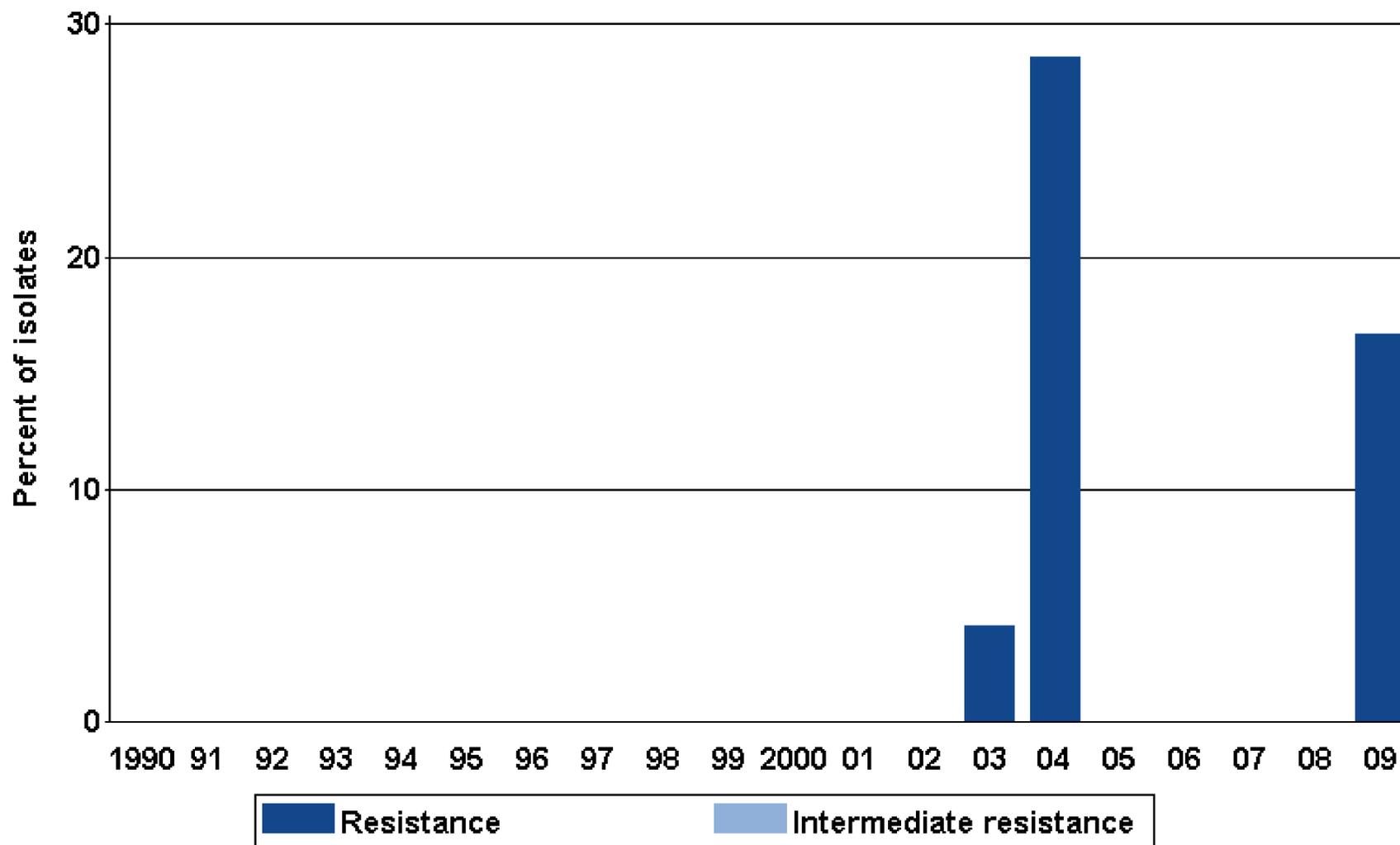
Figure H. Distribution of Minimum Inhibitory Concentrations (MICs) to cefixime among GISP isolates, 2005-2006 and 2009



NOTE: Isolates were not tested for cefixime susceptibility in 2007 and 2008.

Tripler Army Medical Center, Hawaii

Figure I. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990-2009



Note: Susceptibility to ciprofloxacin first measured in 1990.

Tripler Army Medical Center, Hawaii

Figure J. Distribution of Minimum Inhibitory Concentrations (MICs) to azithromycin among GISP isolates, 2005-2009

