



Which tests for which patients?

Conduct rapid sexual health risk assessment

Do you have a partner at present? *Is it a sexual relationship? Is your partner male or female?*
How long have you been together?
Have you had sex with anyone else in that time? Has he/she?

Have you ever had sex with someone from another country? Which country?
Were you born overseas? Which country?
Have you ever had sex with a man? [To men, if not already disclosed]
Have you ever injected drugs or shared drug-taking equipment?

Do you use condoms? Do you ever had sex without a condom? Any problems with condoms?

When was the last time you had an STI test? Clarify details

Young people: check age of partner; explore to see if coercion; low threshold to assess alcohol

Sexual health risk

- Change in partner: in last 3m or since last test
- >1 partner in the last year
- STI contact / STI diagnosis

Very high sexual health risk, e.g.:

- Men with multiple male partners
- Sex-promoting drug use (chemsex)
- Sex workers

HIV & viral hepatitis risks may be years ago
Degree of condom protection depends on use

No apparent sexual health risk

Asymptomatic

No tests needed

'From what you tell me you're at very low risk of having an STI.'

Signs or symptoms

Unlikely STI

- vaginal discharge
- genital itching

Generally no swabs needed

Suggestive of STI

Highly likely: eg penile discharge, warts, ulcers
Possible: ?HIV, ?PID symptoms, IMB, persistent/recurrent vaginal discharge

'From what you tell me you're at very low risk but can I suggest we do some tests to rule out...?'

Sexual health risk

Asymptomatic

- Chlamydia +/- gonorrhoea test
 - Women: self-taken VV swab
 - Men: first pass urine after no PU for >1 hour
- HIV
- Syphilis if very high risk (see box above)
- Hepatitis B & C if risk group

Signs or symptoms

VAGINAL pH will support diagnosis in woman with vaginal discharge

- Examine external genitalia
- If speculum indicated do not use lubricating gel. (Gel, semen & blood can all affect pH)
- Use 1 inch of pH paper to wipe discharge from swab or gloved finger

Candida

White curdy discharge
Itch, irritation, soreness, erythema/vaginitis

pH < 4.5

Probably physiological

No other symptoms

pH < 4.5

Bacterial vaginosis

Thin grey/white discharge coating vaginal walls
Fishy/offensive odour

pH > 4.5

Colours may vary according to brand of pH paper

All samples as above AND...

Consider window periods for all tests arranged

Examine for genital signs:

warts/ vesicles/ ulcers/ other pathology

- If genital ulcers:
 - Herpes simplex swab
 - Syphilis swab
 - Consider Mpox
- Consider High Vaginal Swab for TV only
- Consider gonorrhoeal culture:
 - Women: endocervical swab
 - Men: urethral swab

Is there contraceptive need? Are you using any contraception? Does your method suit you? How would you feel about a pregnancy right now?