

Female asymptomatic STI screen



History

Further information on www.antibioticprescribing.ie

- Time since last sexual contact (LSC)
- Time since previous sexual contact (PSC) if within last 3 months
- Ask "when is the last time you had sex with someone else?"
- Number of sexual partners in last 3 months
- The type of sexual contact/sites of exposure
- Condom use/barrier use
- Any risk factors for blood-borne viruses in the partner
- Diagnosis of previous STIs and the approximate date
- Have they ever paid for or been paid for sex
- Past medical and surgical history
- Vaccination history; HPV, Hepatitis B
- Medication history and history of allergies
- Alcohol and recreational drug history (including current or previous IV drug use)
- Smoking history
- Up to date with CervicalCheck
- LMP
- Contraception
- Emergency contraception in this cycle
- Identification of unmet need with regards to difficulties with sexual performance and satisfaction

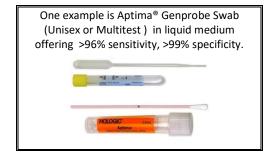
Possible STI symptoms include:

- <u>Vaginal discharge</u> (+/- odour)
- Dysuria
- Post coital bleeding/intermenstrual bleeding
- Deep dyspareunia
- Genital lesions: lumps, ulcers
- Abdominal pain

Systemic symptoms:

Arthralgia, rash, fever

NAAT (Nucleic Acid Amplification Test/PCR) is the gold standard for chlamydia and gonorrhoea testing. The type of test may vary for different laboratories.



Testing process / counselling points:

- Counsel re: self-take samples for vaginal (and as appropriate rectal) chlamydia and gonorrhoea testing. Asymptomatic patients do not need a genital examination and it is appropriate to refer them towards self-testing. If having a provider taken screen with examination, the sample should be taken from vulvovaginal area; endocervical swabs are less sensitive for *Chlamydia trachomatis* and *Neisseria gonorrhoea*.
- Use patient handouts or laminate poster for toilet on how to self-take sample.
- Advise re 'window period' if appropriate. Do not delay taking samples. Samples should be taken opportunistically and then patient to return for repeat tests as required, depending on window period.

Recommended tests and sampling for asymptomatic screen:

- Swabs: NAAT/PCR- Vaginal; self-take swab for Chlamydia/Gonorrhoea (consider rectal & pharyngeal sampling. The role of routine pharyngeal Chlamydia/Gonorrhoea testing in women has not yet been established).
- Blood samples: (usually 1 plain tube) for HIV 1&2, Syphilis & Hepatitis B, +/- Hepatitis C in line with national HCV guidelines.

Delivery plan for results

- Essential to outline expected time for results & mode of delivery. Suggest text 'Lab results available' to patient.
- Follow up telephone consult with Doctor/Nurse required
- Advise condoms while awaiting results
- Discuss concept of <u>Partner Notification</u>
- Review contraception
 - Signpost to useful resources e.g. Sexual wellbeing website, HSE free home STI testing service website