

## History

### Further information on [www.antibioticprescribing.ie](http://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:

- [Vaginal discharge](#) (+/- 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.

One example is Aptima® Genprobe Swab (Unisex or Multitest ) in liquid medium offering >96% sensitivity, >99% specificity.



### 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 [Partner Notification](#)
- Review contraception
- Signpost to useful resources e.g. [Sexual wellbeing](#) website, [HSE free home STI testing service website](#)