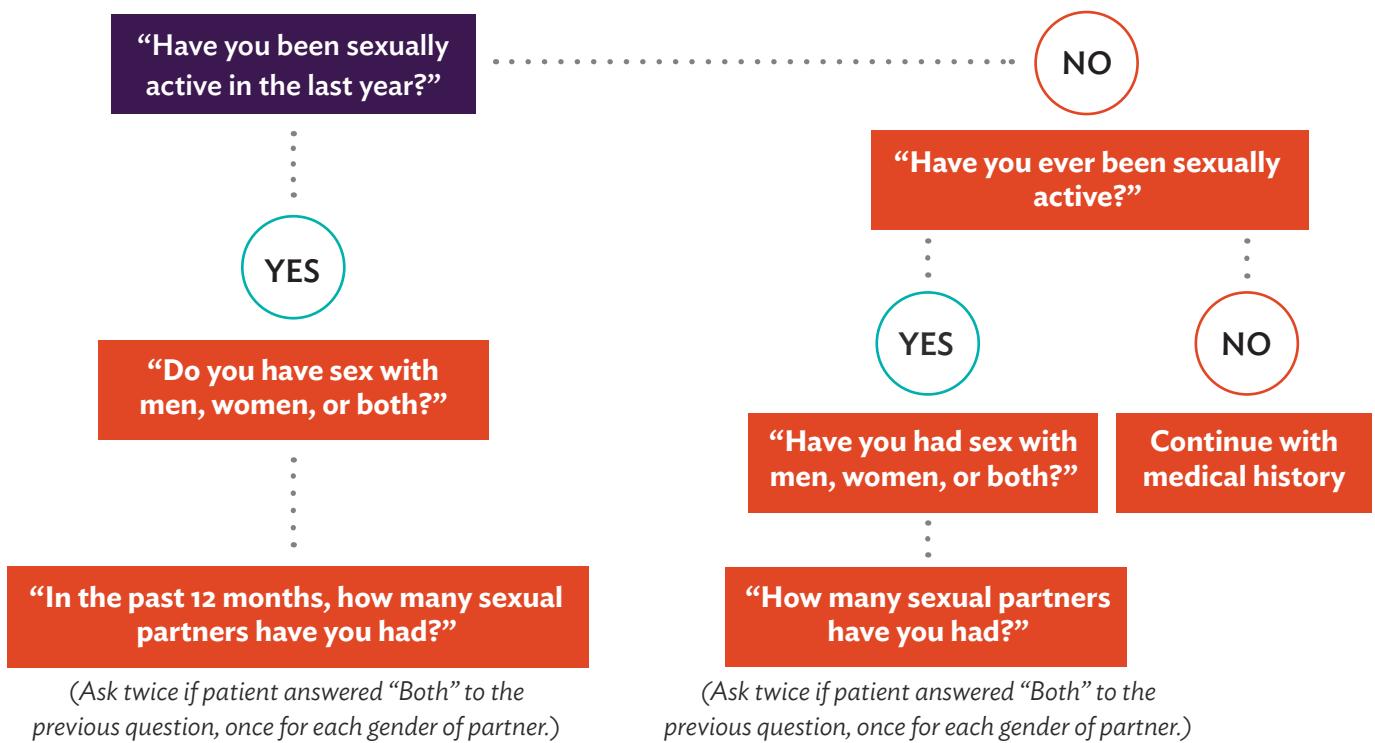


Asking Essential Sexual Health Questions

Adults: Essential questions to ask at least annually

- Ask every adult patient the following questions as part of the overall medical history.
- Try to have this conversation, even if your patient seems uncomfortable or you feel awkward.
- Consider using the following script to transition to asking these sensitive questions and let your patient know that you ask these questions of everyone. If a partner, relative, or caregiver is in the room, ask that person to step into the waiting room. He or she can be invited back after the examination.

"I'm going to ask you a few questions about your sexual health. Since sexual health is very important to overall health, I ask all my adult patients these questions. Before I begin, do you have any questions or sexual concerns you'd like to discuss?"



Many older adults remain sexually active. **Ask all your older adult patients whether sex has changed for them and, if so, how.** By asking this question you can identify and address any sexual problems. These challenges can result from other health conditions, medications, or simply the process of aging.

Adults: Essential questions to ask at least once

- Ask the following questions at least once, such as when establishing a patient chart. Consider asking them every few years as sexual behavior and gender identity can change over time. You can include these questions on an intake form, or ask them verbally and record the responses in your electronic medical record or the patient's chart.
- Be prepared to explain these terms as they will be unfamiliar to many patients.
- Assure confidentiality to increase patients' comfort disclosing this sensitive information.
- See the Fenway Institute's [Do Ask Do Tell](#) toolkit for guidance on asking sexual orientation and gender identity questions, recording the responses in your EMR, using this data to provide patient-centered care, and training your office staff on how to provide culturally competent care to lesbian, gay, bisexual, and transgender individuals.

1. “What do you consider yourself to be?”

- a. Lesbian, gay, or homosexual
- b. Straight or heterosexual
- c. Bisexual
- d. Other (please specify)
- e. Don't know

2. “What is your current gender identity?”

- a. Male
- b. Female
- c. Female-to-male/transgender male/trans man
- d. Male-to-female/transgender female/ trans woman
- e. Neither exclusively male nor female (e.g., genderqueer)
- f. Other (please specify)
- g. Decline to answer

3. “What sex were you assigned at birth, as shown on your original birth certificate?”

- a. Male
- b. Female
- c. Decline to answer

DEFINITIONS

Gender identity – A person's internal sense of being male, female, both, neither, or another gender.

Sex assigned at birth – The sex (male or female) that is assigned to an infant at birth, which is typically determined by observation of the external anatomy. Also referred to as birth sex, natal sex, or biological sex.

Sexual orientation – A person's characterization of their emotional and sexual attraction to others. Examples include lesbian, gay, heterosexual, and bisexual.

Transgender – When a person's gender identity and sex assigned at birth do not correspond. A transgender person may have any sexual orientation.

Adolescents: Essential questions to ask at least annually

Ask all your adolescent patients aged 11 and older the following four sexual health questions. These questions address 1) puberty and sex, 2) gender identity, 3) sexual attraction/orientation, and 4) sexual activity. Consider using the following script to begin the discussion.

“I’m going to ask you some questions that I ask of all my patients. This information is important and will help me know how best to care for you. Your answers will be kept private so please speak freely. There are a few times that I may need to share this information with others.” (Review instances when your state requires sharing confidential information.)

1. “What questions do you have about your body and/or sex?”

2. “Your body changes a lot during adolescence, and although this is normal, it can also be confusing. Some of my patients feel as though they’re more of a boy or a girl, or even something else, while their body changes in another way. How has this been for you?

If the adolescent expresses discordance with their natal sex:

- Say “It is OK to feel this way” to validate the adolescent’s feelings.
- Gain an understanding of where your patient is on the gender spectrum. Some may identify as something other than male or female, while some may be unsure. Others may identify as the opposite gender.
- Identify whether the adolescent has told anyone, and assess his or her safety at home and school. Be ready to refer to a counselor and/or a transgender care specialist.
- Provide information about local or national organizations, such as <https://www.pflag.org>, that can offer support and education.

3. “Some patients your age are exploring new relationships. Who do you find yourself attracted to?” (Or, you could ask “How would you describe your sexual orientation?”)

4. “Have you ever had sex with someone? By “sex” I mean vaginal, oral, or anal sex.” (If sexual activity has already been established, ask about sex in the past year.)

If the adolescent has never had sex or has not been sexually active in the last year:

- Say “If and when that changes, please let me know so that together we can keep you sexually healthy.”
- Support abstinence as an effective strategy for preventing STIs and unplanned pregnancy. Reinforce the importance of condoms to prevent both STIs and pregnancy, and the need for contraception when sexual activity begins.

If the adolescent has had sex:

- Ask about the following to identify risk factors, determine which preventive services are needed, and guide your counseling:
 - » number of lifetime partners
 - » the number of partners in the past year
 - » the gender of those partners
 - » the types of sex (vaginal, oral, anal)
 - » the use of protection (condoms and contraception)
 - » coercion or rape

If the adolescent has same-sex partners or self-identifies as lesbian, gay, bisexual, questioning (LGBQ), or something else:

- Ask whether he or she has a trusted adult to talk to or has come out to his or her family. Offer to help the adolescent have this conversation, if you feel you can assist.
- Assess the adolescent's safety at home and school, and whether he or she is being bullied or harassed.
- Link your patient to community or national organizations, such as <https://www.pflag.org> or <http://www.thetrevorproject.org>, for education and support.
- Counsel all sexually active adolescents, regardless of their sexual orientation, about using condoms and contraception. Adolescents who identify as LGBQ may also have sex with members of the opposite sex, which increases the risk for unintended pregnancy. For more information about counseling, turn to page 9.



Preparing for the adolescent sexual history

- Incorporate the four essential sexual health questions from the previous page into a broader psychosocial history, such as the HEEADSSS (Home, Education or Employment, Eating, Activities, Drugs, Sexuality, Suicide/depression, and Safety) interview.
- Explain to a parent or caregiver that you spend a portion of each visit alone with the adolescent. Time alone with teens is critical to discussing sensitive topics such as sexual health and prepares them for assuming responsibility for their health care. Assure that he or she will be invited back to complete the visit.
- Put your patient at ease before beginning the psychosocial history. Ensure confidentiality of the conversation except for certain circumstances, such as if the adolescent intends to inflict harm or reports being abused. You should know your state's laws that affect minor consent and patient confidentiality.
- Plan to start with less threatening topics, such as school or activities, before progressing to more sensitive topics, such as drugs and sexuality.
- Use open-ended questions to better facilitate conversation, rather than close-ended questions.
- Be ready to listen for strengths and positive behaviors, and to give praise where praise is due.

Additional questions to ask adolescents and adults

Consider asking additional questions to better understand your patient's level of risk, determine whether you need to recommend screenings or vaccinations, and offer appropriate counseling. *Table 1* contains questions that follow the Centers for Disease Control and Prevention's 5 Ps approach to taking a sexual history (**P**artners, **P**ractices, **P**ast history of STI, **P**rotection, and **P**regnancy Prevention/Reproductive Life Plan).

Table 1: Additional sexual health questions for adolescents and adults (including those who are transgender)

Partners	<p>Do you know whether your partner has other sexual partners?</p> <p>In the past 3 months, have you had sex with someone you didn't know or had just met?</p> <p>Have you ever been coerced or pressured to have sex?</p>
Practices	<p>In the past 3 months, what kinds of sex have you had? Anal? Vaginal? Oral? (For men who have sex with men: Ask about receptive anal sex, insertive anal sex, or both)</p> <p>Have you or any of your partners used alcohol or drugs when you had sex?</p> <p>Have you ever exchanged sex for drugs or money?</p>
Past History of STI	<p>Have you ever had a sexually transmitted infection (or disease)?</p> <p>If yes: Which STI? Where was the infection? When did you have it? Was (Were) your partner(s) treated too?</p> <p>Have you ever been tested for HIV?</p> <p>If yes: How long ago was that test? What was the result?</p>
Protection	<p>What do you do to protect yourself from STIs, including HIV?</p> <p>When do you use this protection? With which partners?</p> <p>Have you been vaccinated against HPV? Hepatitis A? Hepatitis B?</p>
Pregnancy Prevention/Reproductive Life Plan	<p>Do you have any desire to have (more) children?</p> <p>If yes: How many children would you like to have? When would you like to have a child? What are you and your partner doing to prevent pregnancy until that time?</p> <p>If no: Are you doing anything to prevent pregnancy? (Be sure to ask female-to-male transgender patients who still have female reproductive organs)</p>

Using Table 1 to ask additional questions

The following two examples illustrate how to use *Table 1* to ask additional questions of your patients. The questions you choose to ask from *Table 1* will depend on how your patient responded to the essential questions outlined on the previous pages.

EXAMPLE #1

A patient (of any age, gender identity, or sexual orientation) who had only one sexual partner in the past year.

1. “Is this a past or current partner?”

» *If current partner:*

- “Do you know whether your partner has other sexual partners?”
- “Does your partner engage in other risk behaviors?”

» *If partner has other sexual partners, or patient does not know whether partner has other partners:*

- “What are you doing to protect yourself against STIs, including HIV?”

2. “In the past 3 months, what kinds of sex (vaginal, anal, or oral) have you had?”

3. “Have you ever been tested for HIV?”

4. “Do you have any desire for (more) children?” (Ask if relevant given patient’s age or age of partner)

» *If yes:*

- “How many children would you like to have?”
- “When would you like to have a child?”

» *If no:*

- “What are you and your partner doing to prevent pregnancy until that time?” (Ask if relevant given patient’s sexual behaviors)

EXAMPLE #2

A male patient who had more than one male sexual partner in the past year and only has sex with men.

1. In the past 3 months what kinds of sex have you had?

» *If the patient had anal sex with male partners:*

- “Did you have receptive anal sex, insertive anal sex, or both?”
- “Did you use any kind of protection while you had sex?”

» *If the patient had oral sex with male partners:*

- “Were you giving or receiving, and where on the body?”
- “Did you use any kind of protection during oral sex?”

2. “Have you ever been tested for HIV?”

3. “Have you ever had an STI?”

4. “Have you been vaccinated against hepatitis A, hepatitis B, and HPV (only if eligible)?”

5. Other potential questions to ask include the following:

- » “Where did you meet these partners?”
- » “Have you ever been coerced or pressured to have sex?”