

Essential Sexual Health Questions to Ask Adults

Ask all of your adult patients the sexual health questions on this card. They will help you assess the patient's level of sexual risk and determine whether additional questions and which preventive services may be needed (other side of card).

Ask at Least Annually

Have you been sexually active in the last year?

YES

What are the gender(s) of the people with whom you are engaging in sexual activities?

In the past 12 months, how many sexual partners have you had?*

NO

Have you ever been sexually active?

YES

What are the gender(s) of the people with whom you had sex?*

How many sexual partners have you had?*

NO

Continue with medical history

*If patient answered "both" to previous question, ask this question for each gender.

Ask Older Adults

Has sex changed for you?
If so, how?

Ask at least once, and update as needed.
Gender identity and sexual orientation can be fluid.

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?
 - A. Male
 - B. Female
 - C. Decline to answer

Recommended Preventive Sexual Health Services for Adults

Service	Females			Males			Transgender Individuals
	18-64	65+	Pregnant	18-64	65+	MSM	
STI Counseling	✓ ^a	✓ ^a	✓ ^a	✓ ^a	✓ ^a	✓ ^a	✓ ^a
Contraceptive Counseling	✓		✓	✓	✓		✓
Cervical Cancer Screening	✓ ^b	✓ ^b	✓ ^b				✓ ^c
Chlamydia Screening	✓ ^d	✓ ^d	✓ ^d	✓ ^e		✓ ^f	✓ ^a
Gonorrhea Screening	✓ ^d	✓ ^d	✓ ^d			✓ ^g	✓ ^a
HIV Testing	✓	✓ ^a	✓	✓	✓ ^a	✓	✓
Syphilis Screening	✓ ^h	✓ ^h	✓	✓ ^h	✓ ^h	✓	✓ ^h
Hepatitis B Screening	✓ ⁱ	✓ ⁱ	✓	✓ ⁱ	✓ ⁱ	✓	✓ ⁱ
Hepatitis C Screening	✓ ^{jk}	✓ ^{jk}	✓ ^j	✓ ^{jk}	✓ ^{jk}	✓ ^{jk}	✓ ^{jk}
Hepatitis A Vaccine	✓ ^l	✓ ^l	✓ ^l	✓ ^l	✓ ^l	✓	✓ ^l
Hepatitis B Vaccine	✓ ^m	✓ ^m	✓ ^m	✓ ^m	✓ ^m	✓	✓ ^m
HPV Vaccine	✓ ⁿ			✓ ⁿ		✓ ⁿ	✓ ⁿ

a = At increased risk: inconsistent condom use, multiple partners, partner with concurrent partners, current STI, or history of STI within a year

b = Aged 21 to 65 or when adequate screening history has been established

c = FTM transgender patients who still have a cervix according to guidelines for non-transgender women

d = Sexually-active women aged <25; women aged ≥25 at increased risk

e = Young adult males in high prevalence communities or settings

f = Screen for urethral infection if insertive anal sex in preceding year; rectal infection if receptive anal sex in preceding year

g = Screen for urethral infection if insertive anal sex in preceding year; rectal infection if receptive anal sex in preceding year; pharyngeal infection if receptive oral sex in preceding year

h = HIV-positive; at increased risk: exchange sex for drugs or money; in high prevalence communities

i = At risk: HIV-positive, unprotected sex, share needles, family member or sexual partner infected with HBV; born in a HBV-endemic country; born to parents from a HBV-endemic country

j = HIV-positive, history of injection or intranasal drug use or incarceration; blood transfusion prior to 1992

k = Born between 1945 and 1965 (at least once)

l = Use illicit drugs; have chronic liver disease; receive clotting factors; travel to HAV-endemic countries; wish to be vaccinated

m = At risk: multiple partners, share needles, family member or sexual partner infected with HBV

n = Young adult women and men aged ≤26

For more information, visit: nationalcoalitionforsexualhealth.org