

- **The information on this form is confidential and used to help guide our clinicians as they assist you with sexual health and wellness, from testing to contraception.**
- **Explicit questions and answers are crucial for risk assessment. Based on your answers, you and your clinician will agree on what testing to do.**
- **Any information you give is for clinical use only and cannot be released without your written permission. Please only answer questions you are comfortable answering.**

Have you ever had sex/sexual activity? Yes/No If not, you are finished with this form.

If yes, please check all that apply

 oral vaginal anal

When did you last have intercourse?

Are your partners: male female both

Have you had a new partner in the last 6 months or since your last STI screening?

Do you use condoms?

- Yes, every time
- Sometimes
- No
- When did you last use one?

Have you ever had the human papilloma virus vaccine (Gardasil)? Yes No Unsure

Have you ever had the hepatitis A vaccine? Yes No Unsure

Have you ever had testing for sexually transmitted infections? Yes No

When was your last STI testing?

Have you ever been diagnosed with:

- Chlamydia
- Gonorrhea
- Herpes
- HIV
- Syphilis
- HPV (genital warts)
- Hepatitis B or C

If so, when and how were you treated?

Please turn form over and fill out other side

Have you ever been tested for HIV?

To the best of your knowledge, have you had sex with an HIV positive person?

To the best of your knowledge, have you used IV drugs or had sex with an IV drug user?

Have you or a sex partner ever exchanged sex for drugs or money?

Have you had sex with a stranger or someone whose sexual history is unknown to you?

Have you or a partner ever been in jail?

Have you ever had unwanted sex or been sexually assaulted?

If so, do you want to talk about this today or at another visit?

Have you ever been tested for hepatitis C?

Have you heard about PrEP, a daily medication taken to help prevent HIV?

Would you like to discuss PrEP today?

Answer if applicable:

Have you ever had a gyn/pelvic exam? Approx date of last exam

Have you ever had a pap (cervical cancer screening) test?

If so, when? Results?

Have you ever been pregnant?

Are you concerned about pregnancy possibility now or in the future?

Have you ever used any of the following for contraception? Check all that apply

- Condoms
- Withdrawal
- Birth control pills, patch or ring
- IUD or implant
- Depo provera shot
- Emergency contraception (plan B or Ella)

What are you currently using for contraception?