

Please place this in the medical record of _____

Taking a Sexual History for Teenage Girls and Young Women

HEDIS requires documentation of annual Chlamydia screenings for sexually active females who turned 16 – 24 years old in the calendar year. Missouri Care encourages you to place this sheet in the medical record of the above-named member and use it to guide a discussion about sexual activity and sexually transmitted diseases (STDs) at her next visit.

Ask about menstrual history first, and then follow with sexual history:

- What have you learned in school or elsewhere about STDs and birth control?
- Do you date or are you in a relationship with someone? How old is he or she? How does he or she treat you?
- Are you having or have you ever had sex?

If the member tells you she has not had sex:

“I would like to make sure that I understand your answer. People have sex in many different ways. By sexual activity, I mean to ask if you are having any oral, vaginal, or anal sex.”

- Have you thought about what you might do if you ever felt pressure to have sex?

“I am always available to discuss your questions and concerns.”

If the member tells you she has had sex:

- When was the last time you had sex?
- Do you have sex with males, females, or both?
- What kind of sex? Vaginal? Anal? Oral?
- Are you using a method to prevent pregnancy? Have you ever been pregnant?

“I would like to ask you some questions about risky behavior because there may be some information I can offer you that will help you reduce your risk of illness or injury.”

- Do you and your partner use condoms? Never? Sometimes? Always?
- Do you ever have unprotected sex? Does your partner?
- Have you ever had sex under the influence of alcohol or drugs?
- Have you ever had an STD?
- Has anyone ever touched you in a way you didn't like or force you to have sex?

Notes:

Date _____ Signature _____

(See next side for tips on creating an environment conducive to sexual history taking)

Creating an Environment Conducive to Sexual History Taking

- If a member presents with her parent, make sure that you have an opportunity to speak with the member alone. Make this a standard part of the office visit and explain it up front to the member and her parent.
- Discuss your confidentiality policy with the member and her parent (if applicable).
- Introduce sensitive topics by starting with non-threatening topics first and then moving to more sensitive issues. One way to do so is by following the HEADSS assessment (Goldenring and Rosen, 2004). HEADSS stands for
 - Home
 - Education (or Employment)
 - Activities
 - Drugs
 - Sex
 - Suicidality
- Ask questions and offer explanations about sexuality in a straightforward manner. Avoid euphemisms.
- Offer guidance on responsible sexual behaviors, including using latex condoms to reduce the risk of STDs and HIV.

Note

All adolescents should be asked at least annually about involvement in sexual behaviors that may result in:

- Unintended pregnancy
- Chlamydia or other STDs
- HIV infection

*Adapted with permission from **Suggestions for Taking a Sexual History for Teenage Girls**
Harvard Pilgrim HealthCare*



Missouri Care[™]
H E A L T H P L A N