

# Assessing Risk: *Sexually Transmitted Diseases in Adolescents*

Clinicians should assess risk factors for sexually transmitted diseases and HIV infection in all patients by obtaining a careful sexual history and inquiring about drug use. Counseling and testing for sexually transmitted diseases and HIV should be offered to all persons at risk of infection. The Vermont Department of Health STD/AIDS Program can provide information about testing and treatment, epidemiological information, referrals for clinical services, assistance with confidential notification of sexual partners of infected patients and sexual assault victims, and other assistance. **Call the STD Hotline (800-244-7639) or the HIV/AIDS Hotline (800-882-2437).**

Testing for sexually transmitted diseases should only be performed in the presence of informed consent and pretest counseling, which should include:

- the purposes and procedures of the test
- the meaning and consequences of reactive and non-reactive results
- information about what will be recorded in the medical record
- required notification to the Vermont Department of Health of reportable infections (see *Mandatory Reporting of Diseases to Vermont Department of Health*)
- strategies for reducing the risk of future exposure

Contact the Vermont Department of Health STD/AIDS Program for information and training in the specific knowledge and skills required for pre-and post-HIV test counseling. (800-882-2437)

It is recommended that **all sexually active adolescents** be tested for chlamydia and gonorrhea, and screened for human papilloma virus. The STD Hotline (800-244-7639) can provide specific information on testing protocols.

It is recommended that **sexually active adolescents** with the following history or risk factors also be tested for both HIV and Hepatitis B virus if not known to be immune:

- use or have used injection drugs
- males who have had sex with males
- patients with bleeding disorders who receive blood products or derivatives
- females and males whose past or present sex partners were injection drug users, or whose male sex partners had sex with males
- received a blood transfusion or blood products before 1985

It is recommended that **sexually active adolescents** with the following history or risk factors also be tested for Hepatitis B virus if not known to be immune:

- **immigrants and refugees from HBV endemic areas**  
including their children, children adopted from endemic areas, and travelers/workers in HBV endemic countries with close contact with local people for more than 3 months (Alaska Natives, Pacific Islanders, including Asia, Africa, and Eastern Europe)
- **all pregnant women**
- **commercial sex workers,**  
includes those who have had sex with a commercial sex worker
- **persons who exchange sex for money or drugs, or otherwise barter sex**
- **hemodialysis patients and staff**
- **residents and staff in institutions for the developmentally disabled**
- **inmates of long-term correctional facilities**
- **household or sexual contact with HBV-infected persons or with persons at high risk for HBV infection**

It is recommended that **sexually active adolescents** with the following history or risk factors also be counseled and offered testing for HIV and Syphilis:

- **all pregnant women**
- **commercial sex workers**  
includes those who have had sex with a commercial sex worker
- **persons who exchange sex for money or drugs, or otherwise barter sex**
- **sexual contacts of persons with active syphilis**
- **persons who have resided in, or who have had sex partners who reside in, areas of high prevalence for Syphilis**

#### **Sources:**

American Medical Association: *Guidelines for Adolescent Preventive Services (GAPS)*. Chicago, American medical Association Department of Adolescent Health, 1996.

Bright Futures

Division of Health Surveillance, Vermont Department of Health. *Hepatitis B Infection and Prevention*. January 1998.

*MMWR 1998 Guidelines for Treatment of STD's*: (Lists only general risk factors for adolescents)

United States Preventive Services Task Force. *Guide to Clinical Preventive Services (2nd ed.)*. Baltimore: Williams & Wilkins, 1996.