

Strength of Recommendations
Bold = Good
Italics = Fair
 Plain Text = consensus or
 inconclusive evidence



HEADSSS - a mnemonic for interviewing adolescents	
Home	
	Where, who lives there? How do the people in your family get along?
	Do you argue with your parents?
	Do you feel safe at home?
Education and Employment	
	Do you feel safe at school?
	Performance at school?
	Do you have a job? How many hours?
	Have you ever failed or repeated a grade?
	Have you ever been suspended?
Activities	
	What do you and your friends do for fun?
	What are your hobbies?
	Do you participate in sports?
	Have you ever been in trouble with the law?
	What would you like to do after you finish school
Drugs, Drinking and Dieting (and smoking)	
	Do you or your friends often drink or smoke pot at parties?
	Do you ever drink or smoke pot alone?
	Have you ever been in a car driven by someone who was drunk or high?
	Have you ever tried any other drugs?
	Are you satisfied with your weight? Have you ever dieted, exercised or used drugs to change your weight?
Sexuality	
	DO NOT ASSUME HETEROSEXUALITY
	Do you have any concerns about your physical/sexual development?
	Are you dating? How long have you been together?
	Have you ever had sexual contact? What kind of sexual contact have you had? Are you sexually active now? How often do you have sex?
	What was your age when you first had sex?
	Have you used protection for sexually transmitted diseases or birth control?
	Have you ever been pregnant?
	Have you ever been forced to have sex?
Suicide (and depression)	
	Do you feel down or depressed much of the time?
	For how long have you felt this way?
	Have you thought of hurting yourself?
	Have you ever tried to harm yourself?
Safety (violence and abuse)	
	Have you ever seen or been the victim of violence?
	Is there a gun in your home?
	Have you ever been in trouble with the law?
	Do you have use of a car? Do you wear a seat belt?

Adapted from Sacks D, Westwood M Paediatrics & Child Health 2003;8:554-6

Sexuality Questions (examples):	
Partners	Sex with men, women, both or people who identify in other ways? How many partners in past 2 months / 12 months? Any partners having sex with someone else while in a sexual relationship with you?
Pregnancy Prevention	What are you doing to prevent pregnancy?
STI Protection	What do you do to protect yourself from STIs and HIV?
Practices	Kind of sex: Vaginal, anal, oral. Condom use – always, sometimes, never. If not always, what situations or circumstances make condom use less likely?
Past STI history	Have you or a partner –ever had a STI? –ever injected drugs? –exchanged sex for drugs or money? Is there anything else about your sexual practices, either now or in the past, that I should know?

<http://www.cdc.gov/std/treatment/2010/clinical.htm#shpc>

Prevention Counselling for Sexual Activity	
Abstinence and reduction of number of sex partners	CDC
Pre-exposure Immunization – Hepatitis B, HPV	CDC, PHAC
Pre-exposure Immunization for men who have sex with men – Hepatitis A	CDC, PHAC
Condom use (male), female condoms	CDC, PHAC
Education about STIs – signs, symptoms, transmission, risk factors, safer sex practices	PHAC
Nonoxonyl 9 and increased risk of STI transmission	CDC, PHAC
Partner testing (previously sexually active) for youth contemplating initiation of sexual activity	PHAC
Folic acid – peri-conceptual	SOGC, USPSTF
Contraception	SOGC
<i>Emergency contraception</i>	SOGC, CDC

CDC www.cdc.gov/std/tg2015

SOGC sogc.org/clinical-practice-guidelines/

PHAC www.phac-aspc.gc.ca/std-mts/sti-its/index-eng.php

STI Risk Factors	
Sexually active < 25 years	
Sexual contact with person with a known STI	
Serial monogamy – multiple partners over time	
No barrier contraception	
Injection drug use	
Other substances including alcohol especially if associated with having sex	
Unsafe sexual practices (eg unprotected, blood exchange, shared sex toys)	
Sex workers and their clients	
Sex for money, drugs, shelter or food	
Street involvement, homelessness	
Anonymous sexual partnering (internet, bathhouse, rave party etc.)	
Victim of sexual assault or abuse	
Previous STI	

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Cervical cancer and STI screening in sexually active teens	
Pap smears not recommended, No HPV testing	
Chlamydia and Gonorrhea	
Screen all asymptomatic sexually active women under 25years males- assess risk	<i>Urine or vaginal or vaginal self-swabs or cervical swabs (use first 10 to 20 mL of urine. Preferable to avoid voiding 2hrs prior but does not preclude testing)</i>
Screen those who are symptomatic or who have contact with an infected person	<i>Use vaginal or cervical swabs for females Urine for males</i>
HIV	
Screen all age 15 years and older	Risk factors: Men who have sex with men Injection drug users Those with STI's or requesting STI testing
Screen under 15 if risk factors	Unprotected vaginal or anal intercourse Having sexual partners who are infected with HIV, bisexual, or injecting drugs Exchanging sex for drugs or money
Syphilis	Screen for those at increased risk, including high community prevalence
Hep B, Hep C,	<i>Screen high risk</i>
HPV	Insufficient evidence for primary screening
Herpes simplex	Primary screening not recommended

PHAC www.phac-aspc.gc.ca/std-mts/sti-its/index-eng.php

USPSTF www.uspreventiveservicestaskforce.org www.cps.ca