

## Who Should Be Tested for STDs?

Health care providers may recommend additional STD tests based on the patient's sexual history, signs, symptoms, etc.

Population	Recommendations
<i>Sexually active women 25 years of age and younger</i>	<ul style="list-style-type: none"> <li>• <b>Chlamydia</b> testing every year</li> <li>• <b>Gonorrhea</b> testing every year</li> <li>• <b>Annual HIV</b> testing</li> </ul>
<i>Sexually active men or women, who are not in a long term, mutually monogamous relationship</i>	<ul style="list-style-type: none"> <li>• <b>Hepatitis B</b> vaccination</li> <li>• <b>Annual HIV</b> testing</li> <li>• <b>Chlamydia and gonorrhea</b> testing – previous infection, presence of other STDs, new or multiple sex partners, inconsistent condom use, commercial sex work and drug use.</li> </ul>
<i>All men who have sex with men (MSM)</i>	<ul style="list-style-type: none"> <li>• <b>Hepatitis A</b> vaccination</li> <li>• <b>Hepatitis B</b> vaccination</li> </ul>
<i>Sexually active men who have sex with men (MSM), who are not in a long term, mutually monogamous relationship</i>	<ul style="list-style-type: none"> <li>• <b>Hepatitis A</b> vaccination</li> <li>• <b>Hepatitis B</b> vaccination</li> </ul> <p><b>And at least once every year:</b></p> <ul style="list-style-type: none"> <li>• <b>HIV</b></li> <li>• <b>Syphilis</b></li> <li>• <b>Chlamydia</b></li> <li>• <b>Gonorrhea</b></li> </ul>
<i>Pregnant women</i>	<ul style="list-style-type: none"> <li>• <b>Chlamydia</b> – Screen at first prenatal visit, and if is positive, should be retested in third trimester. Pregnant women 25 yrs. old and younger, and pregnant women who have a new or more than one sex partner, should be retested during their third trimester.</li> <li>• <b>Syphilis</b> – Screen at first prenatal visit. Pregnant women who are at high risk for syphilis, live in areas of high syphilis morbidity, or are previously untested, should be screened again early in the third trimester and at delivery.</li> <li>• <b>HIV</b> – Screen as early as possible in the pregnancy. Retesting in the third trimester is recommended for women at high risk (use illicit</li> </ul>

***Pregnant Women  
(cont'd.)***

drugs, have STDs during pregnancy, have multiple sex partners during pregnancy, live in a high incidence area, or have an HIV-infected partner). Rapid HIV screening should be performed on any woman in labor who has an undocumented HIV status unless she declines.

- **Hepatitis B** – Screen during an early prenatal visit even if previously vaccinated or tested. Pregnant women who were not screened prenatally, those who have more than one sex partner in the last 6 months, were tested or treated for an STD, injection-drug use, or have an HBsAg-positive sex partner.
- **Hepatitis C** – Screen all pregnant women at high risk (have a history of injection-drug use, have a history of blood transfusion or organ transplantation before 1992).
- **Gonorrhea** – Pregnant women 25 yrs. old and younger, and pregnant women who have a new or more than one sex partner, inconsistent condom use, commercial sex work, drug use, a previously positive gonorrhea or other STD test, or live in a high incidence area should be screened at the first prenatal visit. Pregnant women found to have gonorrhea at the first prenatal visit, as well as uninfected pregnant women who remain at high risk for gonorrhea, should be retested in the third trimester.

***Any person seeking STD  
evaluation or  
treatment(s)***

- Testing for **HIV**
- **Hepatitis B** vaccination
- Testing for **syphilis, gonorrhea, chlamydia**, as recommended by your health care provider

Source: *Sexually Transmitted Treatment Guidelines, 2010*, Center for Disease Control and Prevention.