

Clinical Education Initiative  
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# TAKING A SEXUAL HISTORY

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## Taking a Sexual History

### [Video Transcript]

00:00:07

- [Pat] My name is Patricia Coury-Doniger. I'm a family nurse practitioner and the director for the Center for Health and Behavioral Training at the University of Rochester. We are a New York state designated center of excellence for STDs, part of the New York state Clinical Education Initiative. Today, we are filming a demonstration of taking a sexual history and conducting a behavioral risk assessment. This is not a real patient that you will see portrayed, but one of our staff claim instructors and also the program manager for the Clinical Education Initiative STD center of excellence.

00:00:43

- [Pat] Hi, and you are Mindy Jones?

- [Mindy] Yes.

- [Pat] Date of birth, please.

- [Mindy] 3/24/68.

- [Pat] Okay, great. Mindy, my name is Pat Coury-Doniger. I'm a nurse practitioner here, and I'll be taking your history for the first part of our visit today.

- [Mindy] Okay.

- [Pat] Okay? Can you tell me what we can do for you today?

- [Mindy] Well, I just wanted to come in for testing.

- [Pat] Mhmm, okay. Is there some specific reason today, versus you know, another day?

- [Mindy] Well, I just really think I need to get tested.

- [Pat] Okay, good. Well, you've come to the right place, 'cause we can certainly do that for you here. Okay, so we're just going to ask you a little bit about history. And do you feel like you're having any symptoms at all?

- [Mindy] No, not really.

- [Pat] And how about specifically in terms of any vaginal discharge or?

- [Mindy] No, not really, just normal.

- [Pat] Okay. Burning when you urinate?

- [Mindy] No.

- [Pat] Any sores that you've noticed around the genitals?

- [Mindy] No.

- [Pat] And how about rash?
- [Mindy] No.
- [Pat] Or swollen glands.
- [Mindy] I don't, no.
- [Pat] And how would you say your health is in general?
- [Mindy] Pretty good.
- [Pat] Have you had any kind of like a flu-like illness in the last several months- where you had a fever or swollen glands or felt sick like you had to go to bed, like a flu-like symptom?
- [Mindy] No, I haven't.
- [Pat] Okay. And do you have any kind of chronic health problems that you take any medication for?
- [Mindy] Nope.
- [Pat] Okay. So you're on no meds.
- [Mindy] No med.
- [Pat] And how about antibiotics in the last couple of weeks?
- [Mindy] No, I haven't taken any.
- [Pat] Okay. And how about drug allergy?
- [Mindy] I don't have any.
- [Pat] Okay good, great. Okay, so really you're just coming in for a routine check. And how about in terms of the past, getting tested? Would you say you'd had testing for HIV in the past?
- [Mindy] I have. Probably not in a couple of years though.
- [Pat] Okay so maybe two years ago roughly?
- [Mindy] Yeah, probably.
- [Pat] And where did you get that done?
- [Mindy] At my primary care doctor.
- [Pat] And do you know the result of that test?
- [Mindy] It was negative.
- [Pat] Okay, good. And how about any STD testing in the past? Have you had that done?
- [Mindy] I have at my again my OBGYN but I don't- they never called and said anything was positive so.

- [Pat] And when was that roughly?
- [Mindy] Probably a year or two ago as well.
- [Pat] So you have a regular OBGYN?
- [Mindy] Yes.
- [Pat] What made you decide to come here today instead of there?
- [Mindy] I really just didn't want them to know.
- [Pat] Okay, I understand, okay. And how about vaccines, you know? There's different vaccines now for preventing getting STDs. The Hepatitis B vaccine, do you think you've had that?
- [Mindy] Yeah, the three shots? Yeah I've gotten that.
- [Pat] Okay, and how about any vaccine for HPV? Probably not, that's a newer one.
- [Mindy] No, I- no.
- [Pat] Okay, we can talk about that a little bit later. And then what about any kind of testing for Hepatitis C? Have you had screening for that?
- [Mindy] No.
- [Pat] Okay. Okay, and then what about any kind of sexually transmitted infections before besides the testing? Have you had any kind of, like gonorrhea or chlamydia in the past?
- [Mindy] Oh way back when I was in college, but—
- [Pat] Which one?
- [Mindy] Chlamydia.
- [Pat] Okay. And gonorrhea?
- [Mindy] Um no, not that I remember.
- [Pat] And how about any of the viral ones, like herpes?
- [Mindy] No.
- [Pat] Warts? Okay, so just the chlamydia. Okay good, good. And how about things in terms of your period? Do you know when you might have had your last period?
- [Mindy] Right around the beginning of June. Like June first or second.
- [Pat] Okay, so you're on time.
- [Mindy] Yes.
- [Pat] Okay, and how about a pap smear?

- [Mindy] Last fall I had one.
- [Pat] Okay and what have your pap smears been like in terms of results?
- [Mindy] I had one abnormal about eight years ago.
- [Pat] Did you get treatment or just repeat?
- [Mindy] Just repeat, no treatment and everything has been fine.
- [Pat] Okay, and pregnancies, have you had pregnancies?
- [Mindy] I've been pregnant twice.
- [Pat] And how many live births?
- [Mindy] None.
- [Pat] Okay. Okay, and what about birth control at this time?
- [Mindy] I'm on none right now.
- [Pat] All right, so let's talk a little bit about your partner situation, because we also want to know sort of where to take the tests and what kind of tests to do. And in terms of having sexual contact, what's your partner situation right now would you say?
- [Mindy] Hm, is that really I mean, is that really important?
- [Pat] Well, it is because we also want to talk to you about the kinds of sex you have, because you can get STDs, you know in your throat or in your vagina or in your rectum. So we talk to people about partners and their situation and also kind of like the types of sex that you usually have. Is that okay?
- [Mindy] Yeah, I suppose.
- [Pat] Okay. So you want to talk to me about what's happening in terms of your partner or partners?
- [Mindy] Well, I have a new partner.
- [Pat] Okay.
- [Mindy] And... I think that I- I thought that we were just exclusive and I don't think we are.
- [Pat] Okay, and so how long have you been seeing that person?
- [Mindy] About five months.
- [Pat] Okay. And when's the last time that you had sexual contact with that person?
- [Mindy] Last night.
- [Pat] Okay, all right. And then how about before that, before that in terms of a different partner?
- [Mindy] I had a different partner about a month ago.

- [Pat] Was that with somebody that you were with at the time, or just somebody that you just met?
- [Mindy] I just met 'em.
- [Pat] Okay, okay. And how about in the last three months? How many different partners would you say you've had?
- [Mindy] Um just those two, yeah.
- [Pat] Okay. Okay, so the relationship that you have that you're saying is new. What's that relationship like for you?
- [Mindy] It's... Kind of hard to talk about. It's fun, but...
- [Pat] You have some worries?
- [Mindy] Yeah.
- [Pat] In terms of all the stuff that's going on with him? Is it a him?
- [Mindy] Yeah, I just... I don't know if it's real or we're just having fun and I, you know, I'm just wasting my time and here I am, you know. I don't- I can't trust him.
- [Pat] Okay, so you're looking for a little bit more of a committed relationship, is that what you're saying?
- [Mindy] Yeah, I was in one but a long time ago and...
- [Pat] Okay. Well it sounds like you've made good decision to come and get screened if you have concerns. Do you know anything about his HIV testing or his HIV situation?
- [Pat] Not discussed it or?
- [Mindy] No, yeah. That's not really a conversation that I can have.
- [Pat] Sure. Do you know anything in terms of whether he's having any kind of symptoms of STDs or anything that you've seen that you're concerned about?
- [Mindy] No, not really.
- [Pat] Okay. And what about in terms of like, substance use- you know for like using drugs or alcohol? What's your experience been with that?
- [Mindy] Well, we both smoke pot together, and but I know that he's doing something else, but I don't know what he's doing. He's a little bit like, kind of hiding it from me.
- [Pat] Some other drugs you mean?
- [Mindy] Yeah.
- [Pat] Okay, and how about for you?
- [Mindy] Um, that's all.

- [Pat] The marijuana?
- [Mindy] Yeah.
- [Pat] Okay.
- [Mindy] And I drink sometimes.
- [Pat] Okay, do you think that that's a problem for you in terms of drinking?
- [Mindy] No.
- [Pat] Okay, and so when you say you're concerned about something else, what gives you that impression that he might have some other drug involvement?
- [Mindy] When he gets paid, we'll- I know he just got paid and he'll say like a few days later that he doesn't have any money to go out to dinner and I'll end up paying. And then, you know, like you know you can tell when somebody might be using.
- [Pat] Okay, so you're concerned that he might be using some other drugs. What would be your best guess if you thought about what?
- [Mindy] Probably coke.
- [Pat] Mhmm, okay. Needles do you think?
- [Mindy] I don't know. I've tried to look, and I just—
- [Pat] Not sure.
- [Mindy] Yeah.
- [Pat] Okay. Okay, and then in terms of other partners for him, what do you think? You said you're not sure what he's doing. You think he might have other partners or?
- [Mindy] I'm- I think he does, because I looked on his phone the other day and I saw a text from this girl he's been hanging out with, and I know they're probably doing coke together and they're probably getting you know high and doing—
- [Pat] So you think there's a lot going on?
- [Mindy] Yeah.
- [Pat] Okay.
- [Mindy] And he's gone a little bit more and more and not around, so I just don't know. But he still comes around to me and wants to hang out and have fun.
- [Pat] And you still like him.
- [Mindy] Yeah.

- [Pat] Okay. Well, you made a good decision by coming to get tested. And just one other thing about the condom use- like, what's your experience been with that?
- [Mindy] He, he always says, "oh, it doesn't feel right, when I don't, if I have a condom on," and so he doesn't want to use one or if I get him to put one on, he'll, you know secretly take it off halfway through.
- [Pat] Okay. And so have you had experience in the past with condom use yourself, with other partners?
- [Mindy] Yeah, yeah.
- [Pat] Do you know how to use it right as far as getting other people to use it, do you think?
- [Mindy] Yeah. I know that I tend to be a little shy sometimes with being assertive and yeah.
- [Pat] Okay, okay good. So let me just see also in terms of what we talked about before in terms of the types of sex that you have. Do you have like oral sex with him?
- [Mindy] Yeah.
- [Pat] Okay and how about vaginal penile?
- [Mindy] Mhmm.
- [Pat] And how about rectal sex?
- [Mindy] Yes.
- [Pat] Okay, okay. Good, 'cause we do need to take samples from all three sites, you know when we do your testing, okay? Okay, so let me see if I understand. You know, you're coming for a screening and you don't really have symptoms. And you're in a partner situation that's kind of new, but in the last three months you've just had one other partner besides this new person. And you're just with him, but you're kind of concerned that maybe he's you know has other partners.
- [Mindy] Yeah.
- [Pat] And you're also a little bit concerned about his drug use and what's going on with that. And in terms of the condoms, you're not using them consistently right now.
- [Mindy] No.
- [Pat] What do you think is your idea about whether you would like to use them or not? Like what's your feeling about it for yourself?
- [Mindy] I want to protect myself because I don't, you know I don't want to get anything.
- [Pat] So you think it would be a good idea, you mean.
- [Mindy] Yeah.
- [Pat] Okay. But you got some barriers with him.
- [Mindy] Yeah.



- [Pat] Okay.

- [Mindy] I don't, it's hard to make that negotiation of you know, I want you to wear one but don't you trust me? Well, how do you say well no I don't.

- [Pat] Right, well we can talk about some other ways that you might say that. But you know, condom negotiation they talk about having skills and doing that, and that's something we could help you with. But first we want to get to your exam and get all your tests and we can check some of them today. And then some we'll have you call back on, make sure everything's okay. But then a little later in the visit, we'll talk to you about how you might be able to approach him.

- [Mindy] Okay.

- [Pat] Okay?

- [Mindy] Yeah.

- [Pat] Great.

- [Mindy] Thank you.

00:13:15

- [Pat] What you just saw was a demonstration of taking a sexual history and conducting a behavioral risk assessment at the same time. The behavioral risk assessment focuses on the relationship status for the patient and their partner, as well as their history and attitudes towards getting tested for HIV and other STDs, drug use or alcohol use present and past, and then their attitudes and history of condom use. So in this portrayal our patient Mindy came in with a history of having a new partner, but also one other additional partner within the previous three months and that new partner is a person who she thinks has other sexual partners. So she is in monogamous situation herself at present, but her partner is likely not. In terms of drug and alcohol use, they have some marijuana use, then she has marijuana use. He may have additional drug use and may also be doing additional transactions around drug use. She thinks perhaps cocaine, but not needle use. In terms of their condom use, she's using condoms some of the time. Her attitude toward condom use though is that she thinks she should be using them consistently because she is worried about this person. However, there are barriers for her in terms of her partner's unwillingness to use them consistently. So in our behavioral counseling model that we use which is a stage based behavioral counseling model, we would say that Mindy is in contemplation. She sees the need to use condoms with her partner and in this current scenario, but she has barriers around negotiating with her partner about condom use.

00:14:51

- [Pat] Okay Mindy, so I'm back in the room. We did your exam obviously and now your specimens are in the lab. Like I said, we'll be looking at some of them today. We can give you some test results for today. But while they're doing that, I wanted to come back and talk to you a little bit about what we started to talk about in terms of working with him around condom use. Do you want to talk about that a little bit?

- [Mindy] Sure.

- [Pat] Okay, so you feel that sometimes it's hard for you to sort of be assertive about that right?

- [Mindy] Yeah.

- [Pat] Okay. And so tell me a little bit more about the birth control situation because you said you weren't using birth control?

- [Mindy] Yeah I was, and then I didn't want to take the pill anymore and I just haven't gone any- I haven't gone anywhere to get others and I know I need to do that as well. Especially since I can't get him to use a condom all the time.

- [Mindy] Well you brought up the issue about trust, like you had some concerns if you brought up condom use he might say to you, "don't you trust me?" Is that a concern that you have? One option, one way to sort of get around that is to have a different reason for wanting condom use. Okay, so I just was thinking possibly because you're not using birth control, whether that might be something that would be effective. In other words, have you talked to him at all about birth control or?

- [Mindy] It's really not something that we talk about, like that's my problem and not his.

- [Pat] So I mean in that regard, you might start a conversation where you say you know, I wanted to talk to you a little bit about what's happening with me in terms of birth control. I'm having problems with other birth control methods I've tried. I went to my clinic and they told me that I could use condoms and that would be very effective. And you know, I don't want to have a baby. Likely you don't want to have a baby, and maybe I could take care of things by just doing that.

- [Mindy] That's worth a try.

- [Pat] How do you think he might react to that?

- [Mindy] As long as I don't make it his fault that I, or his problem for using a condom, I think he would be okay with that.

- [Pat] And is that something that you could have available? Like you could get them and you could take care of that part of it?

- [Mindy] Yeah.

- [Pat] Sometimes you said in terms of what his objection was, that he feels like there's less sensitivity with using the condoms, is that what he said? Doesn't feel, doesn't feel the same?

- [Mindy] Yeah.

- [Pat] You know what KY jelly is, Mindy?

- [Mindy] Yeah.

- [Pat] Because for some men, if you put some KY jelly inside the condom before you put it on the guy, that jelly helps the condom to move more like skin for the male partner, and you could say, you know I heard this is going to make it feel a lot better for you, and you know say let's try or are willing to try with me or something like that.

- [Mindy] Okay.
- [Pat] What do you think about that?
- [Mindy] I don't know, he might laugh at me.
- [Pat] He might.
- [Mindy] I'm willing to try it. I really want to try to stay safe and so far I haven't really known what to do.
- [Pat] Okay, well that's an alternative. You know it may be effective, it may not, but if you think it's worth a try you could do that. We're going to be seeing you back in a couple weeks, and so you can tell us how it went.
- [Mindy] Okay.
- [Pat] Okay? 'Cause there's other options we could explore as well.
- [Mindy] Okay.
- [Pat] Okay? And just at the end you know, tell me- where do you think you're going here in terms of this relationship? It sounds like you do have kind of concerns and?
- [Mindy] I don't know.
- [Pat] Not sure yet.
- [Mindy] I really don't know. I like him, and then things kind of have changed in the past couple of months.
- [Pat] You have more concerns, yeah.
- [Mindy] So I need to figure out what I want to do. It's not a great—
- [Pat] Not kind of turning out to be what you thought, right? Sounds like you had some high hopes in the beginning.
- [Mindy] I did, I really liked him and then it just all kind of fell apart.
- [Pat] Yeah well, it takes a while to figure out these things; what you want to do in terms of you know going forward.
- [Mindy] Yeah.
- [Pat] But as you know, as you've said, it's important to protect yourself in the meantime. And maybe you want to try that strategy and let us know how it works in a couple weeks.
- [Mindy] I will.
- [Pat] Okay?
- [Mindy] I will, thank you.

- [Pat] Okay, let me go get your test results and we'll see how we're doing.

- [Mindy] Okay.

- [Pat] Thanks.

- [Mindy] Thanks.

00:19:21

- [Pat] That was a demonstration of a behavioral counseling strategy. Remember when we finish the sexual history and the behavioral risk assessment, we assessed that Mindy was contemplative for condom use. She thought it was a good idea to use condoms, but she was ambivalent about using them because she had barriers in terms of her perceived reaction of her partner if she were to be direct with him about condom negotiation. So one of the counseling strategies that matches someone who's ambivalent would be to explore their ambivalence, find out why they're ambivalent, and then offer ways around the barriers that they perceive. So what I was introducing to her since she's not using birth control and also doesn't want to get pregnant right now, would be the option of bringing this up; the condoms as a method of birth control, versus something that would introduce distrust into the relationship. So we talked about whether she could explore that option with him, saying that they would use condoms for birth control. She obviously has skills in terms of condom use. She's used condoms in the past, knows how to use them. So that was offered as an alternative to her and she indicated willingness to try. She will be returning for some test results in a week or so, and so we followed up with the first step is that she's going to think about this and try to bring it up as birth control and then we'll follow up with her when she comes back to see whether that worked for her or not. So that behavioral counseling strategy really took about five minutes. The initial sexual history and risk assessment that were combined were about 10 minutes, so really within a 15-minute period of time, it is possible to take a sexual history, do a behavioral risk assessment, and follow with a behavioral counseling strategy. That behavioral counseling would be considered a short term HIV or STD prevention risk reduction counseling session. That type of short term behavioral counseling intervention is billable in New York State as a CPT code 99401, and is reimbursed by Medicaid and Medicaid Managed Care, and other third party payers.

[Video End]