

Consultant Questionnaire

I addressed the questions by the client from the questionnaire.

Format: single choice

☐ Yes

☐ No

We addressed the following topics:

Format: multiple choice + multiple open text field

☐ Test procedure

☐ HIV: prevention, symptoms, testing

☐ Other STI: prevention, symptoms, testing

☐ Mental health

☐ Substance use

☐ Gender identity

☐ Sexual orientation

☐ Sexuality, love, relationships

☐ Sexual or reproductive health

☐ Living with HIV

☐ (Sexual) violence

☐ Other:

I have clarified the vaccination status. The client is fully immunised against:

Format: multiple choice + multiple open text field

- ☐ Hepatitis A
 - ☐ Hepatitis B
 - ☐ HPV
 - ☐ Mpox
 - ☐ Meningococcal (4MenB)
 - ☐ Other:
-

I proposed the following measures:

Format: multiple choice + multiple open text field

- ☐ Vaccination Hepatitis A
 - ☐ Vaccination Hepatitis B
 - ☐ Vaccination HPV
 - ☐ Vaccination Mpox
 - ☐ HIV-PEP
 - ☐ HIV-PrEP
 - ☐ DoxyPEP
 - ☐ Empiric STI treatment
 - ☐ Contraception ordinary
 - ☐ Contraception emergency
 - ☐ Other:
-

I recommend testing again in:

Format: single choice

- ☐ 2 weeks
- ☐ 4 weeks
- ☐ 6 weeks
- ☐ 2 months
- ☐ 3 months
- ☐ 6 months
- ☐ 9 months
- ☐ 12 months
- ☐ No reminder useful

Internal remarks:

Format: long text field

- ☐ *Free text response:*

☐ missing