

STI
.....
Testing
.....
Information



**CAMPUS
HEALTH**

Frequently Asked Questions

We hope this will answer some questions you may have about sexually transmitted infection (STI) testing.

- Q.** I just want to get checked out to be sure I'm O.K. Can I be tested for everything?
- A.** Yes, you could be tested for everything, but it would mean tests for over 25 different organisms and be very expensive! Sexually transmitted infections are caused by a variety of organisms in four categories: bacterial, viral, fungal, and parasitic. The screening test for HPV is completely different than the urine test to look for chlamydia and gonorrhea. Each infection has a set of specific symptoms. Your medical provider will discuss any signs or symptoms you (or your partner) may have, review your sexual health history, and recommend what tests to consider based on your individual circumstances.
- Q.** I had some blood tests done when I had a physical last year. Did they test me for STIs?
- A.** No. If you didn't discuss STI testing, it didn't happen.
- Q.** If I have an infection and my partner doesn't have anything wrong with them, where did I get it?
- A.** Sometimes that question is impossible to answer, especially if you have had more than one sexual contact in your life. Some infections, particularly viral ones, may take months after exposure to show any signs. It's possible to transmit

an infection without knowing anything is wrong. If either of you slept with someone else (even over a year ago), one of you may have brought an infection into your relationship. The diagnosis of an STI may be emotionally difficult and result in blame or mistrust between partners. If you feel safe, telling your partner your diagnosis or STI status is always best, and can keep a difficult situation from getting worse. You can take an active role in treatment or maintenance of your condition, and you have options.

- Q** Where can I go for testing?
- A.** To a doctor or nurse practitioner in a medical clinic. You can get tested at Campus Health and the record of the services you received will NOT show up on your Bursar's statement. This means nobody has to know you got tested unless you tell them.
- Q.** Will my parents or partner find out if I'm seen at Campus Health?
- A.** Not unless you tell them yourself. We do everything possible to protect your medical confidentiality. Your medical record cannot be released without your written consent. If you bill your charges to your Bursar's account, the bill simply states "Student Health charges" on the statement. Nowhere does it give any details about what you were seen for or treated for at Campus Health.

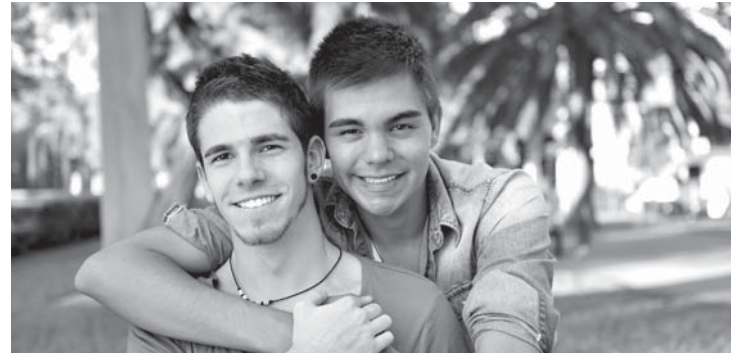
Q. What are the top 3 STIs at the UA?

- A.**
- Human Papilloma Virus (HPV/genital warts)
 - Chlamydia
 - Genital Herpes

Approximately 2 of every 3 people who acquire STIs are under the age of 25. Campus Health sees thousands of students each year for STI testing, diagnosis and treatment. If you do have an infection, you will receive experienced care and treatment.

Q. I am a virgin. How could I get an STI?

- A.** Many infections can be spread by touching. Penetration isn't necessary. If you had skin-to-skin contact anywhere on the body, you might get something, particularly herpes, molluscum contagiosum, or genital warts. Oral sex can spread STIs too.



Q. Where can I buy good condoms that aren't expensive?

- A.** The Campus Health Pharmacy has a large selection of condoms for sale. You can buy condoms by the 3, 6, or 12 pack, or cost-saving 100 pack. Also for sale: water-based lubricants, latex dams, and contraceptive products.

Potential Complications of Untreated STIs

It is important to seek testing and treatment for STIs. While many STIs have minor lasting physical effects when treated, if untreated, serious complications can occur. These may range from secondary infections to infertility to cancers. Bacterial infections in women may lead to

fallopian tube scarring and pelvic inflammatory disease, which both increase the risk of tubal pregnancy. Other infections can lead to chronic pain, severe neurological damage, birth defects, liver failure, and death. Having an STI can put you at risk of other STIs, including HIV.

Reducing Risks

To reduce your risks, abstain from any sexual contact (even touching without penetration). Many STIs, including HPV, herpes, and molluscum, can be spread through touching, massage, and mutual masturbation. The good news is that you can lower your risks if you're sexually active in the following ways:

Limit your number of partners. With each additional partner you raise your chance of acquiring an STI. Be Smart. It's your choice who, and how many people, you sleep with. Use strategies to lower your risks if you have multiple partners.

Barrier methods, condoms, and latex (dental) dams can reduce transmission. Use condoms made of latex or polyurethane (not natural or "sheep skin" condoms). While condoms do not provide 100 percent protection, next to abstinence, they are the best protection available.

Get tested regularly. Include STI testing as part of your regular medical check-up, especially if you have any new partner(s).

Learn about your body and be aware of changes. Know the symptoms of STIs. Seek medical help if you have any doubts about a sign or symptom. Condoms and spermicides with nonoxynol-9 may increase your risk of acquiring HIV infection, especially in women who use it several times a day.

If you notice a change in your body, get it checked out. Watch for these signs:

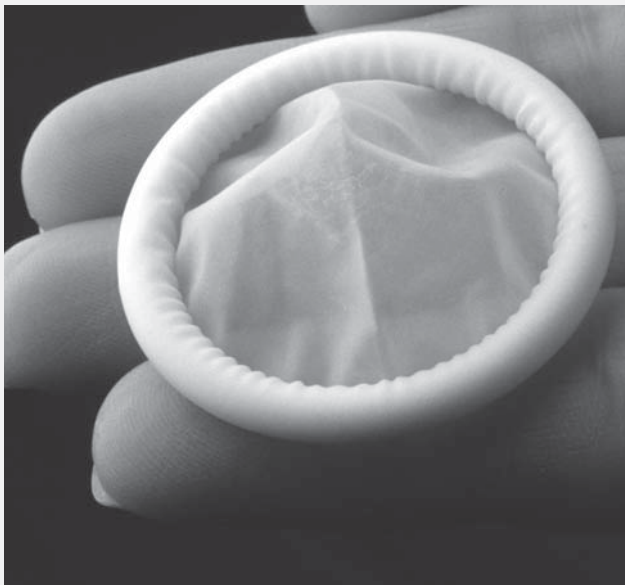
- Pain
- Painful sores
- Itching
- Redness
- Unusual discharge
- Unusual odor
- Bumps
- Painful urination

Communicate openly with your partner. Talk about getting tested, sexual health and prevention, sexual activities outside of your relationship, trust, and honesty. Try having these conversations before you start having sex with someone. The more you trust each other to be open in your communication, the less likely it is that either of you will bring an STI into the bedroom.

Avoid alcohol and drugs. If you drink too much or do drugs before having sex, you are more likely to do something risky (like not use protection or sleep with someone you just met).

Know your personal boundaries, before you find yourself in an uncomfortable situation, so you know how to react. Decide what risks you are, or are not, willing to take. This could mean never having sex without a condom, never having sex with someone you don't know, communication about STI testing before having sex, etc.

STI Checklist



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Infectious Agent	Transmission	Symptoms	Testing Time	How tested?	Treatment	Prevention
<p>Chlamydia Chlamydia trachomatis (bacteria)</p>	<p>Body Fluids – contact of mucous membranes (cervix, urethra, mouth) with infected person’s fluids (semen, mucus).</p> <p>Transmission common with exposure through vaginal or anal sex.</p>	<p>1-3 weeks after exposure.</p> <p>Most people have no symptoms.</p> <p>Dull, aching pain or heavy feeling in pelvic area, pain with urination or intercourse, cervical or anal discharge, sore throat. Urethral discharge, anal itching or discharge, swelling in the testicles or bleeding after sex.</p>	<p>7-14 days after exposure.</p>	<p>Test of vaginal/ cervical secretions or urine test.</p> <p>Swab of the throat if symptoms are present.</p>	<p>A number of antibiotics are effective.</p> <p>All partners should be examined and treated.</p> <p>Do not have vaginal, anal, or oral sex until 1 week after you and your partner(s) have completed treatment.</p>	<p>Condoms for vaginal, oral, and anal sex can reduce transmission.</p> <p>See “Reducing Risks” on page 4.</p>

sextalk.

Read SexTalk every Monday in the *Arizona Daily Wildcat* or visit bit.ly/SexTalkUA to see 15 years of student questions.

factoid 69% of UA students who had sexual intercourse in the past year usually or always used a condom. (2016 Health and Wellness Survey)

Infectious Agent	Transmission	Symptoms	Testing Time	How tested?	Treatment	Prevention-
<p>Gonorrhea Neisseria gonorrhoea (bacteria)</p>	<p>Body Fluids – contact of mucous membranes (cervix, anus, throat, urethra) with infected person’s fluids (semen, mucus).</p>	<p>2-10 days after exposure.</p> <p>Some people have no symptoms.</p> <p>May have pain or burning with urination, vaginal, anal or penile discharge, bleeding between menstrual periods, and/or sore throat.</p> <p>Males are more likely than females to have symptoms.</p>	<p>Approximately 7 days after exposure.</p>	<p>A test of vaginal/ cervical secretions or urine test.</p> <p>Can also culture throat and anus if indicated.</p>	<p>A number of antibiotics are effective, although some strains are antibiotic-resistant.</p> <p>All partners should be examined and treated.</p> <p>Do not have vaginal, anal, or oral sex until 1 week after you and your partner(s) have completed treatment.</p>	<p>Condoms for vaginal, oral, and anal sex can reduce transmission.</p> <p>See “Reducing Risks” on page 4.</p>



Subscribe to SexTalk Express!

1. EMAIL list@list.arizona.edu
2. TYPE in the subject line of the email: **subscribe sextalk anonymous**
3. READ each SexTalk Q&A delivered to your inbox **every Monday!**

factoid **29% of UA students have never had vaginal intercourse.**
(2016 Health and Wellness Survey)

Infectious Agent	Transmission	Symptoms	Testing Time	How tested?	Treatment	Prevention
<p>HPV (Human Papilloma Virus) on the cervix, penis, or anus</p>	<p>HPV is passed on through genital contact during vaginal, anal, and oral sex.</p> <p>HPV can be spread without penetrative intercourse. It can be spread without visible lesions.</p>	<p>Usually no symptoms.</p> <p>Pap test can reveal dysplasia (unusual cells).</p> <p>Lesions on the cervix can be evaluated by a special procedure called colposcopy.</p>	<p>Weeks to years after exposure.</p> <p>For women, Pap testing is recommended every three years, beginning at age 21.</p>	<p>A Pap test can screen for cellular changes on the cervix, penis, or anus, caused by HPV.</p> <p>HPV is not routinely tested for in people under age 30.</p>	<p>In most cases, no treatment is necessary, as the body's immune system clears the HPV infection over time.</p> <p>Options: Cryotherapy (freezing), laser surgery, or a LEEP (loop electrosurgical excision procedure).</p>	<p>Condoms for vaginal, oral, and anal sex can reduce transmission.</p> <p>Vaccination with an HPV vaccine, such as Gardasil® 9, prevents most, but not all, HPV infection.</p> <p>HPV vaccination (see below) can prevent many cancers.</p>

Have you gotten the cancer-preventing HPV vaccine?

Females 9-26 years old and males 9-15 years old can get the HPV vaccine, Gardasil® 9. This vaccine has proven highly effective in preventing genital warts and cancers of the cervix, anus, penis, and mouth, caused by 9 strains of HPV.

Most insurers cover the cost. If you already recieved the original vaccine, check with your doctor about getting Gardasil® 9.

Infectious Agent	Transmission	Symptoms	Testing Time	How tested?	Treatment	Prevention
<p>External Genital Warts* (condyloma)</p> <p>*Caused by HPV</p>	<p>Skin to skin contact. Touching an infected person's skin, lesions, or genital secretions can transmit cells containing the virus. HPV can be spread without penetrative intercourse. It can be spread without visible lesions.</p>	<p>Lesions on the skin can be either papillary (standing up from the skin) or flat. Often rough or "cauliflower-like" in texture. Usually not painful, but external lesions (bumps, warts) may itch.</p>	<p>Weeks to years of exposure.</p>	<p>There is no routine test for genital warts at this time. A medical provider will visually observe symptoms (lesions) if present.</p>	<p>There are many options depending on site and severity for external warts: Aldara cream (Rx), laser surgery, freezing with liquid nitrogen, trichloroacetic acid (TCA), and interferon.</p>	<p>Total absence of skin-to-skin contact is the only way to avoid transmission. Condoms and latex dams are only partially protective since they don't cover all exposed areas.</p> <p>Vaccination with the HPV vaccine Gardasil® 9 can prevent 90% of genital warts.</p>



The Campus Health Service Pharmacy sells many sexual health products: condoms, lubricants, spermicides, pregnancy tests, emergency contraception, diaphragms, and hormonal contraceptive products. Call (520) 621-6516 for more information.

Infectious Agent	Transmission	Symptoms	Testing Time	How tested?	Treatment	Prevention
<p>Herpes Simplex Virus (HSV) both types I and II</p>	<p>Skin to skin contact. Touching an infected person's lesions can transmit cells containing the virus (oral/oral, hand/genital, or genital/genital).</p> <p>Can be spread without penetrative intercourse or visible lesions.</p> <p>Having HSV increases the risk of becoming infected with other STIs.</p>	<p>Fluid-filled blisters on skin. Blisters may rupture, leaving painful, shallow ulcers. They heal in about 12 days.</p>	<p>Culture of lesions: 2-12 days after exposure.</p> <p>Blood test: 2-3 months after exposure.</p> <p>Blood test can tell you if you have ever been infected with HSV. It cannot tell you:</p> <ul style="list-style-type: none"> • At what site you were infected • When or if you are contagious • When you contracted HSV 	<p>Culture of lesion. Blood test may be used for people with an infected partner or past history of undiagnosed lesions.</p> <p>Talk with your medical provider to decide if testing is appropriate for you.</p> <p>Routine blood testing is not recommended per the US Preventative Services Task Force.</p>	<p>If treated immediately, antiviral medications can help decrease the severity and length of an outbreak. Topical anesthetic cream is helpful.</p> <p>For recurring outbreaks, medication can greatly decrease the frequency and severity of outbreaks, as well as decrease risk of transmission.</p>	<p>Total absence of skin-to-skin contact is the only way to avoid transmission.</p> <p>Condoms and latex dams are only partially protective. Lesions may be present in areas not covered.</p>



One in two sexually active persons will contract an STI by age 25.

(American Social Health Association)

Infectious Agent	Transmission	Symptoms	Testing Time	How tested?	Treatment	Prevention
<p>Non-gonococcal Urethritis (NGU)</p> <p>This is a condition involving the urethra (tube that carries urine).</p> <p>NGU is often diagnosed when gonorrhea and chlamydia have been ruled out.</p>	<p>Body fluids – contact of mucous membranes with infected person's genital secretions. Transmission usually occurs through vaginal or anal sex.</p>	<p>Sometimes has no symptoms.</p> <p>May have painful and frequent urination, possibly a discharge, or no symptoms at all.</p>	<p>7-14 days after exposure.</p>	<p>Discharge can be examined under microscope.</p> <p>Possible urine test to rule out gonorrhea and/or chlamydia.</p>	<p>A number of antibiotics are effective.</p> <p>All partners should be examined and treated.</p> <p>Do not have sex until you and your partner(s) have completed treatment.</p>	<p>Condoms for vaginal, oral, and anal sex can reduce transmission.</p>

factoid

64% of UA students have not been tested for STIs in the last year.

(2016 Health and Wellness Survey)

Infectious Agent	Transmission	Symptoms	Testing Time	How tested?	Treatment	Prevention
<p>Trichomoniasis Trichomonas vaginalis</p> <p>This usually affects the vagina and can also affect the penis.</p>	<p>Body Fluids – contact of mucous membranes (cervix, urethra) with infected person's fluids. Transmission usually occurs through vaginal sex.</p>	<p>Greenish-yellowish discharge with bad odor.</p>	<p>4-20 days after exposure.</p>	<p>Vaginal secretions are examined under a microscope or detected in urinalysis.</p>	<p>Antibiotics.</p> <p>Partner(s) should be examined and treated.</p> <p>Do not have sex until you and your partner(s) have completed treatment.</p> <p>Re-screening is strongly recommended.</p>	<p>Condoms for vaginal, oral, and anal sex can reduce transmission.</p>



Consistent and correct use of latex condoms provides the best protection against STIs and HIV.
(U.S. Centers for Disease Control and Prevention)

Infected Agent	Transmission	Symptoms	Testing Time	How tested?	Treatment	Prevention
Syphilis <i>Treponema pallidum</i>	<p>Sexual contact or direct contact with a syphilis sore. Some risk of mother to infant transmission.</p> <p>Having syphilis increases the risk of becoming infected with other STIs, including HIV.</p>	<p>Occurs in stages and may progress from a painless, open sore (chancre) to a rash. In later stages, cardiovascular, skin, bone, and neurological infection may occur.</p>	<p>Exam of the sore 10-90 days after exposure.</p> <p>Blood test 3 months after exposure.</p>	<p>Blood test.</p> <p>Examination of cells from the chancre in the primary stage.</p>	<p>Appropriate antibiotics are effective. All partners should be examined and treated.</p> <p>Do not have sex until you and your partner(s) have completed treatment.</p>	<p>Condoms for vaginal, oral, and anal sex can reduce transmission.</p>

Infected Agent	Transmission	Symptoms	Testing Time	How tested?	Treatment	Prevention
HIV Human Immunodeficiency Virus	<p>Body Fluids – contact of mucous membranes (cervix, urethra) with infected person's fluids (semen, blood, vaginal fluid, breast milk).</p>	<p>Early: Flu-like symptoms for 2 weeks. No obvious symptoms for a few months to many years. When symptoms develop: fevers, herpes zoster, yeast infections. AIDS: opportunistic infections.</p>	<p>3-12 weeks after exposure.</p> <p>Most tests measure HIV antibodies. About 97% of people will develop detectable antibodies within 3-12 weeks of infection.</p>	<p>Blood test.</p> <p>Same day, rapid blood testing available at Pima County Health Department and other local agencies.</p>	<p>Antiviral drugs and specific medications for complications.</p> <p>There is no cure for HIV.</p>	<p>Condoms for vaginal, oral, and anal sex can reduce transmission.</p> <p>Avoid contact with needles, particularly sharing needles for injecting drug use.</p>

Infected Agent	Transmission	Symptoms	Testing Time	How tested?	Treatment	Prevention
Hepatitis B Hepatitis B Virus (HBV)	Bodily fluids – contact of mucous membranes (cervix, urethra) with infected person's body fluids (semen, vaginal fluid, and blood).	Fatigue, nausea, and jaundice (yellow skin and eyes) with dark urine. Some people have very mild symptoms or no symptoms at all.	2-6 months after exposure.	Blood test.	Sometimes treated with anti-viral drugs.	Vaccination is available and recommended for infants, adolescents, people with multiple sexual partners, health care workers, and prison guards. Avoid contact with blood and needles.

Infected Agent	Transmission	Symptoms	Testing Time	How tested?	Treatment	Prevention
Molluscum Contagiosum (a member of the pox virus group)	Skin to skin contact can transmit cells containing the virus. Intercourse is not necessary.	Small, round, raised lesions with shiny surface. Occurs on genital skin, thighs, abdomen, and other body areas. Often mistaken for warts.	1 week to 6 months after exposure.	Visual exam.	Cryotherapy (freezing with liquid nitrogen). Blister will form and bump will disappear as blister heals. Trichloroacetic acid and curettage (scraping).	Total absence of skin-to-skin contact is the only way to avoid transmission.

Resources

Campus

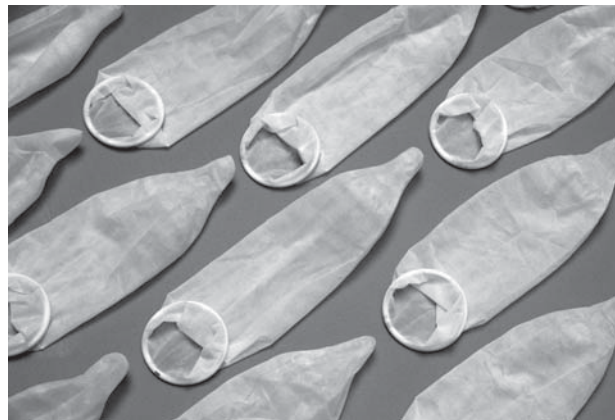
- UA Campus Health
 - Sexual Health Questions 520.621.4967
 - Appointments 520.621.9202
 - Pharmacy 520.621.6516
 - Counseling & Psych Services (CAPS) 520.621.3334
 - Oasis Sexual Assault & Trauma Services 520.626.2051
- ASUA Pride Alliance 520.621.7585
- Women’s Resource Center 520.621.4498

Local

- Southern Arizona AIDS Foundation 520.628.7223
- Planned Parenthood of Southern Arizona 520.408.PLAN
- Pima County Health Department
Theresa Lee Center (STI testing) 520.724.7900
- Southern Arizona Center Against
Sexual Assault (SACASA) 520.327.7273

National

- HIV Hotline 800.232.4636
- STI Hotline 919.361.8488
- Emergency Contraception 888.NOT.2.LATE



Websites

All Health Topics:

health.arizona.edu
goaskalice.com

STIs:

ashastd.org
cdcnpin.org

LGBTQ:

pride.asua.arizona.edu
SAAF.org

Family Planning:

plannedparenthood.org
azsafebabyhaven.org

- (If you have delivered a baby and cannot keep it, they will receive the baby and find a safe, permanent home. You can remain anonymous.)



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STD or STI? What's in a name?

Diseases that are spread through sexual contact are usually referred to as “sexually transmitted diseases”— STDs for short. In recent years, however, many experts in this area of public health have suggested replacing STD with a new term – sexually transmitted infection, or STI.

Why? The concept of “disease,” as in STD, implies a clear medical problem, usually some obvious signs or symptoms. But in truth several of the most common STDs have no signs or symptoms in the majority of persons infected. Or they have mild signs and symptoms that can be easily overlooked. So the sexually transmitted virus or bacteria can be described as creating “infection,” which may or may not result in “disease.” This is true of chlamydia, gonorrhea, herpes, and human papillomavirus (HPV), to name a few.

For this reason, in some of the published literature, the term “disease” is being replaced by “infection.”

(The American Social Health Association, 2016)



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