

## Family Medicine Outpatient Scenarios: Leo Moore – Sexuality

Key Objectives and Competencies		<ol style="list-style-type: none"> <li>1. Discuss Confidentiality</li> <li>2. Use the ‘five Ps’ to take a sexual health history</li> <li>3. Demonstrate sensitivity to gender identity and sexual orientation</li> <li>4. Make appropriate recommendations for screening and counseling.</li> </ol>				
Patient Name, Age Range		Leo Moore, young adult				
Appearance, Behavior, Attitude, Attire		<p>Casual androgynous street clothes, cooperative, friendly, bright, answers questions asked, with limited elaboration unless further questioned</p> <p>(yes/ no answers, occasional shrugging, pauses before answering, may appear uncomfortable/ awkward talking about sensitive topics- does not volunteer information unless directly asked a question).</p> <p>Leo will shut down/ stop talking/ look down for a moment if misgendered or if partner is misgendered. Will respond positively if provider self-corrects. Will gently correct provider if it happens more than once.</p>				
Changes to case based on participant	AMAB Standardized Patient			AFAB Standardized Patient		
	Cisgender Male	Trans-Feminine/ Trans Female	Nonbinary	Cisgender Female	Trans-Masculine/ Trans Male	Nonbinary
Pronouns Shared with Learner	he/ him	she/her	they/ them	she/ her	he/him	they/ them
Case Changes	<p>Partner is an AFAB nonbinary person, pronouns they/ them/ theirs. Sexual should indicate that they are capable of pregnancy and have recently had unprotected sex. Leo has not really thought about the possibility of getting someone pregnant before.</p>			<p>Partner is an AMAB nonbinary person, pronouns they/ them/ theirs. Sexual should indicate that Leo is capable of pregnancy and has recently unprotected sex. Leo has not really thought about the possibility of being pregnant before.</p>		
Additional Changes Made to Case						

<p>Door Instructions</p> <p>(Legal name and legal sex will be based on the SP)</p>	<p>Legal name: Leon(a) Moore  Legal sex: female or male  Age: adult  Reason for visit: STI screening</p> <p>This patient has been seen for annual follow up in your clinic, but you are meeting this patient for the first time.</p> <ol style="list-style-type: none"> <li>1. Please take a thorough sexual history, including the 5 Ps: Partners, Practices, Protection, Pregnancy, Past history of STIs + 6<sup>th</sup> P, Pleasure</li> <li>2. Make any appropriate recommendations for screening and counseling.</li> </ol>
<p>Presenting Situation and HPI</p>	<p>Leo presents to the clinic requesting an STI (sexually transmitted infection) screen prior to entering a committed relationship with a new nonbinary partner.</p> <p>History of questioning sexual and gender identity in the past. Identifies as queer and pansexual. Leo and current partner have had sex in the past, but recently decided to be exclusive and have agreed to get STI screening from their individual primary care providers and will share results. Leo has never had STI testing before.</p> <p><b>Review of Systems:</b> unremarkable</p> <p><b>Past Medical History:</b> unremarkable. Hx mono that kept you out of school for a week.</p> <p><b>Medications:</b> none</p> <p><b>Allergies:</b> none</p> <p><b>Family history:</b> Parents alive and healthy. Father has high blood pressure. Maternal grandmother has breast cancer, diagnosed at age 76.</p>
<p>Sexual Health History</p>	<p><b>Sexual Health and Reproduction:</b></p> <p>(5 P's)</p> <p><b>Partners:</b> Hasn't dated a lot of people in the past, some casual sex. History of penetrative sex including anal sex, oral sex. Sometimes with</p>

	<p>protection, not always. Partners have been AFAB and AMAB.</p> <p><b>Practices:</b> History of penetrative sex, including anal sex. Sometimes with protection, not always. They were usually one-time episodes. History of oral sex, but does not consider oral sex to be sex.</p> <p><b>Protection from STIs:</b> Do not use any barriers or protection. Sex toys and/ or prosthetics are used sometimes, shared with partner. Usually rinses off and puts in drawer after use. Occasional use of lube.</p> <p><b>Past History of STIs:</b> Denies history of prior sexually transmitted infections or awareness of any partners having an STI; has never been screened.</p> <p><b>Pregnancy:</b> Has never had a concern for pregnancy in prior sexual encounters. Either relied on partner to be careful or didn't really think it could be a concern.</p> <p><b>(6<sup>th</sup> P- sometimes called Sensuality)</b></p> <p><b>Pleasure:</b> Has not always enjoyed sex in the past. For the first time, finding true pleasure and enjoyment in sexual encounters.</p> <p><b>Additional Information- if asked</b></p> <p><b>Sexualization:</b> No history of sexual, physical or verbal abuse. Has been uncomfortable during sexual encounters but has never had sex unwillingly. Never had sex for money, drugs, clothes, or a place to live. Would go to a trusted friend if there was a concern about abuse.</p> <p><b>Sexual Intimacy:</b> Relationship history as described above. Feels that respect, comfort, fun and having mutual interests are all important in a relationship. Feels that, for the first time, current relationship fulfills all those parameters.</p> <p><b>Relevant Gender Affirming Surgical History</b></p> <p>Leo has not had 'bottom' surgery (nothing that would affect reproductive history/ screening).</p>
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<p>Tasks for Learner</p>	<p><b>Plan:</b> Ideally, we want the physician-interviewer to include the following components to the interview, which will be on the checklist.</p> <ol style="list-style-type: none"> <li><b>1. Engages patient in what they are concerned about today</b></li> <li><b>2. Discusses confidentiality issues</b></li> <li><b>3. Identifies patient pronouns and uses correct pronouns for patient and when referring to partner.</b></li> <li><b>4. Ease into the sexuality discussion respectfully by asking permission first</b></li> <li><b>5. Use the ‘five Ps’ (+6) to take a sexual health history.</b></li> <li><b>6. Develops plan for STI screening and/ or counseling that is appropriate based on sexual history and discussion of preventive measures (barrier use, cleaning sex toys).</b></li> </ol>
<p>End of Session – 2-3 min</p>	<p>Learner/ Trainee will share their STI/ pregnancy screening recommended for patient based on sexual history taken. This can be provided as a list of recommendations (no further discussion needed at this time) to the patient.</p>