

Syphilis Pre- and Post-Test Discussion Checklists

- Pre- and post-test discussions can affect how the client responds to testing and test results.
- Be aware of cultural understandings of illness and well-being.
- Be aware of barriers to understanding medical information (ie. language, literacy, health literacy), but don't make assumptions about your client's level of knowledge, concerns, or values.
- Ensure the client understands the information and feels confident in their ability to use it.
- Use harm reduction and motivational interviewing techniques to set realistic goals for behaviour change.

Syphilis Pre-Test Discussion Checklist	Key Messages
<input type="checkbox"/> Assess knowledge of syphilis and request permission to fill in the gaps <i>Try saying:</i> "Can you tell me what you know about syphilis?" "May I share some other information about syphilis with you?"	<ul style="list-style-type: none"> • Modes of transmission, symptoms, treatment, consequences of not treating. • Assess previous diagnosis with syphilis.
<input type="checkbox"/> Advantages and disadvantages of testing (for informed consent) <i>Try saying:</i> "What are some good reasons for being tested? What concerns do you have about being tested?"	<ul style="list-style-type: none"> • Advantages – relieve anxiety, prevent transmission, access treatment. • Disadvantages – possible positive result, anxiety, difficulty with relationships if positive, stigma.
<input type="checkbox"/> Reasons for testing (client or provider initiated) <i>Try saying:</i> "There are lots of reasons for having sex, and lots of ways to have sex. Help me understand some of the reasons you think you or your partner(s) might be at risk for syphilis. How would you like things to be different?"	<ul style="list-style-type: none"> • Assess client's perception of their personal risk factors (unprotected vaginal, anal, or oral sex; multiple partners; another STI; sex while drinking or high; transactional sex). • Provide feedback on their personal risk factors. • Explore realistic risk reduction options.
<input type="checkbox"/> Information about testing process <i>Try saying:</i> "I'd like to tell you a bit more about the testing process. Is that ok?"	<ul style="list-style-type: none"> • Testing window for EIA (repeat serology in 2-4 weeks if first test negative, but suspect syphilis). • When to expect results and when to follow up. • Meaning of positive/ negative test results.
<input type="checkbox"/> Implications of positive result for client and others <i>Try saying:</i> "While you're waiting for your test results, is there anything you'd like to do to try to prevent the spread of STIs to your partners?"	<ul style="list-style-type: none"> • Transmission prevention. • Confidentiality of results. • Results shared only with territorial PH officials. • Treatment and follow up. • Contact tracing, including confidentiality.
<input type="checkbox"/> Provide opportunity to ask questions	<ul style="list-style-type: none"> • Provide Syphilis Patient Education Resource.

Principles of Motivational Interviewing	Skills for Motivational Interviewing
<ul style="list-style-type: none"> • Express empathy • Avoid arguments • Develop discrepancy • Roll with resistance • Support self-efficacy 	<ul style="list-style-type: none"> • Open-ended questions • Affirmations • Reflective listening • Summarizing

Syphilis Post-Test Discussion Checklist	Key Messages
Negative Result	
<input type="checkbox"/> Explain meaning of result and confirm client understanding	<ul style="list-style-type: none"> Window period for EIA if relevant (repeat serology in 2-4 weeks if first test negative, but suspect syphilis).
<input type="checkbox"/> Assess their perception of their risk behaviours <i>Try saying:</i> “Tell me more about why it’s hard for you to [insert safer sex behavior].” and “What are the good things about [insert risky behaviour] and what are the less good things?”	<ul style="list-style-type: none"> Help client identify their barriers to safer sex (examples include fear that it suggests promiscuity; inability to deal with resistance from a partner; perceptions of “normal” sexual behaviour). Explore realistic risk reduction options. Practice negotiating skills as needed.
<input type="checkbox"/> Provide opportunity to ask questions	<ul style="list-style-type: none"> Remind client when to come for re-testing if relevant.
Positive Result	
<input type="checkbox"/> Explain meaning of result and confirm client understanding	<ul style="list-style-type: none"> Denial, shock, anger, guilt, sadness, anxiety, and indifference are all common responses.
<input type="checkbox"/> Explain follow-up <i>Try saying:</i> “Tell me about any difficulties you think you might have with this follow up.”	<ul style="list-style-type: none"> Further testing if needed. Staging and implications for contacts. Treatment and follow up serology. Identify and address barriers to follow-up.
<input type="checkbox"/> Explain need for contact tracing/ partner notification <i>Try saying:</i> “We will never tell your contact that it was you who named them.”	<ul style="list-style-type: none"> Be aware of barriers including actual or feared physical or emotional abuse, fear of losing a partner, anonymous partnering. Confidentiality. Allow patient to say or write down the names of their contacts.
<input type="checkbox"/> Preventing transmission/ reinfection with syphilis or other STIs <i>Try saying:</i> “You know your life best. Help me understand what difficulties you might have.”	<ul style="list-style-type: none"> How to negotiate safer sex if partner refuses testing and treatment. Abstain from sex for 2 weeks or use protection.
<input type="checkbox"/> Assess their perception of their risk behaviours <i>Try saying:</i> “How important is this change to you right now? How confident are you that you can make this change?”	<ul style="list-style-type: none"> Help client identify their barriers to safer sex (examples include fear that it suggests promiscuity; inability to deal with resistance from a partner; perceptions of “normal” sexual behaviour). Explore realistic risk reduction options. Practice negotiating skills as needed.
<input type="checkbox"/> Provide opportunity to ask questions	<ul style="list-style-type: none"> Provide Syphilis Patient Education Resource.

Resources:

- RAO (2007). Integrating smoking cessation into daily nursing practice. http://rnao.ca/sites/rnao-ca/files/Integrating_Smoking_Cessation_into_Daily_Nursing_Practice.pdf.
- Making It Count (2013). Motivational Interviewing. <http://makingitcount.org.uk/interventions1/motivational-interviewing>.
- Homelessness Resource Centre (2007). Motivational Interviewing: Open questions, affirmation, reflective listening, and summary reflections (OARS). <http://homeless.samhsa.gov/Resource/View.aspx?id=32840&AspxAutoDetectCookieSupport=1>.
- Native Youth Sexual Health Network (2014). Indigenizing harm reduction. <http://www.nativeyouthsexualhealth.com/harmreductionmodel.pdf>