

If your doctor suspects that you may be infected with an **STI**, he or she will ask how many sexual partners you have had and if any of them have had an STI.

Then, your doctor will examine you, focusing on your genital area. He or she also will examine your anal area and in women, do a pelvic exam. In addition, your doctor may swab the tip of the penis in men or take a sample of any cervical discharge in women. The specimens are sent to a laboratory for testing. Similar measures may be done with any visible sores. Rarely, your doctor may use a needle to obtain a sample from inside a swollen lymph gland to confirm a specific diagnosis.

Your doctor may make a preliminary diagnosis based on the results of your physical examination. For example, painful sores would suggest genital herpes, whereas painless ulcers may indicate syphilis. In this way, you can begin treatment for your infection as soon as possible, even before results of laboratory tests are available.

Different tests will be done depending on your symptoms. In the case of genital herpes, if you have an ulcer, it will be swabbed and tested in the lab. Blood tests can also be done to see if you have antibodies (infection-fighting proteins) against the herpes virus, which would indicate that you have been infected at some time in the past. To test for gonorrhea and chlamydia infections, your doctor will send a sample of fluid from the vagina or penis, or else a urine specimen, for testing in the lab. Syphilis and HIV can be confirmed with a blood test. If you have an ulcer from syphilis, the diagnosis can be confirmed by looking at fluid from the ulcer under a special darkfield microscope to see if the bacteria are present. If you have one STI, your doctor probably will recommend that you get tested for HIV and other STIs, because the risk factors are similar. Also, you are more likely to get HIV if you are infected with another STI.

Sexually active individuals, particularly those with multiple partners, are recommended to have regular check-ups with a family doctor. In some cases, there are no obvious symptoms and the infections that cause STIs can only be identified through regular STI screening tests.

STI testing is done in many different ways. When you go to a doctor to be tested for STIs, they should start by asking you questions about your risk factors. After assessing what diseases you are at risk for, they will test you for those conditions. Anyone with a new partner or multiple partners should be screened for chlamydia and gonorrhea, but testing for other STIs is usually done at the doctor's discretion. Syphilis screening, for example, is recommended for pregnant women and certain high risk groups including prison inmates, men who have high risk sex with men, and patients with another STI. In the absence of symptoms, however, other people are not usually tested for syphilis because of the risk of false positives. However, if you know you are at risk for a particular disease, speak up. The best way to make sure you're screened is to ask.

Testing may be done through a blood sample, urine sample, vaginal discharge, or by collecting a sample of cells from the cervix or the urethra in men.