

SCENARIO 1: “I HAVE A STRANGE SYMPTOM”

Maybe you notice:

- Unusual discharge
- Burning when you urinate
- Genital itching or irritation
- A sore or blister
- Unusual bleeding
- Pelvic or lower abdominal pain
- Testicular pain or swelling
- An unexplained rash

Your first instinct might be to Google it.

Don't.

At least, don't let Google become your doctor.

Instead:

STEP 1 — SPOT IT

Ask:

“Is this new or unusual for me?”

If yes, pay attention.

STEP 2 — SCREEN IT

Seek appropriate medical advice and ask whether you need testing.

Don't assume the symptom tells you exactly which infection you have.

STEP 3 — STOP IT

If an infection is diagnosed, follow the recommended treatment.

Don't self-medicate.

Don't stop treatment because the symptom disappears.

STEP 4 — PROTECT

Follow advice about sexual activity and partner management.

Then learn how to reduce your risk going forward.

SCENARIO 2: “THE CONDOM BROKE”

This happens.

And when it does, your brain can immediately go:

“OH NO.”

Take a breath.

Then act.

STEP 1—DON'T WASTE TIME

Think about what happened and when it happened.

The timing matters.

STEP 2—THINK HIV

If HIV exposure is possible, ask urgently whether **PEP** is appropriate.

Remember:

PEP works best when started as soon as possible and must be started within 72 hours when indicated.

Don't wait for symptoms.

Don't wait for a test result before seeking advice.

STEP 3—THINK PREGNANCY

If pregnancy is possible from the exposure, emergency contraception may be an option depending on the circumstances and timing.

Seek advice promptly because emergency contraception is time-sensitive.

STEP 4—THINK STIs

Depending on the exposure, STI testing and follow-up may be appropriate.

Remember that testing immediately after an exposure may not detect every infection.

A healthcare professional can advise you about timing and whether repeat testing is needed

SCENARIO 3: “MY PARTNER TOLD ME THEY HAVE AN STI”

First reaction:

Don't attack them.

Second reaction:

Don't immediately assume they cheated.

Third reaction:

Get information.

Ask:

- What infection were they diagnosed with?
- When were they diagnosed?
- Have they started treatment?
- What did their healthcare professional advise about partners?
- Do I need testing?
- Do I need treatment?
- Do I need to avoid sex temporarily?

And remember:

Some infections can be present without symptoms.

So don't wait for yourself to become symptomatic before seeking advice.

SCENARIO 4: “I TESTED POSITIVE”

This is where people often spiral.

Don't.

A positive result gives you something incredibly valuable:

You now know.

STEP 1 — UNDERSTAND THE RESULT

Find out exactly what infection was detected.

Don't leave the clinic thinking:

“Something was positive.”

Know what it was.

STEP 2 — GET THE RIGHT TREATMENT

If the infection is curable, get the recommended treatment.

If it is a chronic infection, get appropriate medical care and learn how to manage it.

STEP 3 — ASK ABOUT YOUR PARTNER

Your healthcare professional can advise whether your partner or partners need testing, evaluation, or treatment.

STEP 4—FOLLOW THE INSTRUCTIONS

Ask:

“When should I come back?”

“Do I need another test?”

“When is it safe to have sex again?”

STEP 5—DON'T HIDE

You may feel embarrassed.

You may feel angry.

You may feel ashamed.

Those emotions are understandable.

But hiding an infection doesn't make it disappear.

Action does.

SCENARIO 5: “I TESTED NEGATIVE, BUT I STILL HAVE SYMPTOMS.”

This is important.

A negative test does not automatically mean:

“Nothing is wrong.”

There are several possibilities.

You may have tested too early.

You may have been tested for one infection but not another.

The sample may not have been taken from the site where the infection is present.

Or your symptoms may have another cause that isn't an STI.

So if symptoms continue:

Go back.

Tell the healthcare professional:

“My test was negative, but my symptoms are still there.”

You may need another assessment or another test.

Don't simply assume the first negative result ends the conversation.

SCENARIO 6: “I HAD SEX WITHOUT A CONDOM”

Maybe it happened once.

Maybe it happens more often.

Maybe you regret it.

Maybe you don't.

Either way, don't waste your energy beating yourself up.

Ask:

What can I do now?

Depending on the circumstances:

- Consider whether HIV PEP is appropriate if the exposure was recent.
- Consider emergency contraception if pregnancy is possible.
- Ask about STI testing.
- Ask when testing should be done.
- Consider whether repeat testing will be needed.
- Use condoms going forward if appropriate.
- Consider whether PrEP may be appropriate if you have ongoing HIV exposure risk.

Your past decision cannot be changed.

But your **next decision can be better informed.**

SCENARIO 7: “I DON'T HAVE ANY SYMPTOMS”

This one is easy.

You feel fine.

So you do nothing.

But stop for a second.

Ask yourself:

When was my last STI test?

If you don't know, that's useful information.

It means you may need to think about your sexual health screening.

Whether testing is appropriate depends on your individual circumstances.

Consider things like

- New sexual partners
- Multiple or concurrent partners
- Condomless sex
- A partner with an STI
- Previous STI history
- Your sexual practices
- Pregnancy
- Other individual risk factors

You don't have to wait until something hurts.

SCENARIO 8: “I'M WORRIED ABOUT CERVICAL CANCER”

If you're experiencing:

- Bleeding after sex
- Unusual bleeding

- Persistent unusual discharge
- Pelvic pain
- Pain during sex

Don't immediately conclude:

“I have cervical cancer.”

There are many possible causes.

But don't ignore the symptoms either.

Seek medical evaluation.

And even if you feel completely healthy, remember that **cervical screening is designed to detect high-risk HPV or cervical abnormalities before invasive cancer develops**, depending on the screening approach used.

So don't wait for symptoms before keeping up with recommended screening.

THE 24-HOUR RULE

Here's a simple principle I want you to remember:

When something concerning happens, don't spend days panicking before taking action.

You don't necessarily need to solve the problem in 24 hours.

But you should know whether the situation requires **urgent action**.

Especially when the clock matters.

For example:

Possible HIV exposure?

Think about PEP immediately.

Possible pregnancy after unprotected sex?

Think about emergency contraception promptly.

New genital sore?

Get it assessed rather than waiting for it to disappear.

Partner diagnosed with an STI?

Seek advice rather than waiting for symptoms.

The earlier you identify what needs to happen, the more options you may have.

YOUR EMERGENCY STI SHIELD

Save this section.

Screenshot it.

Write it down.

Whatever works for you.

IF SOMETHING HAPPENS:

1. STOP

Don't panic.

Don't self-medicate.

Don't start blaming yourself or your partner.

2. SPOT

What happened?

What symptoms do you have?

When did it happen?

3. SCREEN

What test is appropriate?

When should you test?

Do you need repeat testing?

4. STOP THE SPREAD

If diagnosed, get appropriate treatment and follow medical advice about sexual activity and partners.

5. PROTECT

Use prevention strategies going forward.

That's your **STI SHIELD™**.

YOUR PERSONAL STI SHIELD™ CHECKLIST

Before you finish this guide, I want you to be able to say:

I KNOW HOW TO:

- ☐ Recognize common STI warning signs.
- ☐ Understand that some STIs have no symptoms.
- ☐ Know when I should seek medical advice.
- ☐ Understand why testing is important.
- ☐ Ask what infection I'm being tested for.
- ☐ Ask whether the timing of my test is appropriate.
- ☐ Know what to do after a positive result.
- ☐ Know that some STIs are curable.
- ☐ Know that others can be managed.
- ☐ Understand the difference between PrEP and PEP.
- ☐ Know that PEP is time-sensitive after a possible HIV exposure.
- ☐ Know about HPV vaccination.
- ☐ Understand the importance of hepatitis B vaccination.
- ☐ Understand why cervical screening matters.
- ☐ Know that an abnormal cervical screening result does not automatically mean cancer.
- ☐ Know how condoms reduce STI risk.
- ☐ Know that condoms don't eliminate every STI risk.
- ☐ Know why partner testing or treatment can matter.
- ☐ Know not to rely entirely on symptoms.

THE STI SHIELD™ IN ONE MINUTE

If you forget everything else in this guide, remember this:

SPOT IT

Notice the signs.

New discharge?

Sore?

Burning?

Unusual bleeding?

Pain?

Possible exposure?

Don't ignore it.

SCREEN IT

Get answers.

Don't diagnose yourself.

Don't assume your partner's status.

Don't rely on symptoms.

Get the kits and get tested

Get the appropriate test at the appropriate time.

STOP IT

Take action.

Get appropriate treatment.

Complete treatment as advised.

Follow up.

Protect your partner.

Prevent reinfection.

PROTECT IT

Build better habits.

Use condoms.

Consider vaccination.

Know your HIV prevention options.

Test appropriately.

Keep up with cervical screening when recommended.

Communicate with your partner.

YOUR SEXUAL HEALTH IS YOUR RESPONSIBILITY—NOT YOUR SHAME

Let's end where we started.

There is still so much shame around sexual health.

People whisper.

People hide symptoms.

People buy random medication.

People avoid testing because they are scared of what someone might think.

People stay silent.

And sometimes that silence allows a completely treatable problem to become something much more serious.

I want you to do things differently.

If something feels wrong:

Speak up.

If you think you've been exposed:

Get advice.

If you need a test:

Get tested.

If your result is positive:

Get treated or managed appropriately.

If your result is negative:

Learn how to stay protected.

And if you're healthy right now?

Keep it that way.

YOU DON'T NEED TO KNOW EVERYTHING.

You don't need to become a doctor.

You don't need to memorize every STI.

You don't need to diagnose yourself from a Google search.

You simply need to remember the system:

THE STI SHIELD™

SPOT IT.

Recognize the warning.

SCREEN IT.

Find out what's actually happening.

STOP IT.

Take the right action.

PROTECT YOURSELF.

Don't repeat the same preventable mistakes.

That's it.

Four ideas.

One shield.

And potentially a very different outcome.

FINAL MESSAGE

Your sexual health is part of your health.

It deserves the same attention you give your heart, your skin, your teeth, and every other part of your body.

Don't wait until you're sick to care.

Don't let embarrassment make your decisions.

Don't let fear stop you from getting tested.

And don't let one mistake convince you that your future is ruined.

You have choices.

You have prevention.

You have testing.

You have treatment.

You have medical care.

And most importantly:

You have the power to act early.

So the next time you hear someone say,

“I feel fine, so I'm probably fine.”

Remember what you've learned.

Feeling fine is great.

But knowing your sexual health status is better.

THE STI SHIELD™

SPOT IT. SCREEN IT. STOP IT.

Know the signs.

Get the answers.

Take action.

Protect your future.

THE STI SHIELD™ EMERGENCY ACTION CARD

“I Think I Was Exposed—What Do I Do Now?”

Spot It. Screen It. Stop it.

A quick-action guide for sexually active young women and men who have had a possible STI exposure, noticed symptoms, or discovered that a sexual partner may have an STI.

FIRST: DON'T PANIC.

A possible exposure does **not automatically mean you have an STI.**

But waiting and hoping can sometimes delay testing or treatment.

Your next step depends on **what happened, when it happened, whether you have symptoms, and what you know about your partner's status.**

Use this card to decide what to do next.

SITUATION 1: "I HAD UNPROTECTED SEX."

This includes sex without a condom or when a condom was not used correctly.

DO THIS:

1. Remember when it happened.

Write down:

Date: _____

Approximate time: _____

Knowing when the exposure happened can be important when discussing testing and time-sensitive prevention with a healthcare professional.

2. Consider HIV PEP urgently if there may have been a significant HIV exposure.

HIV post-exposure prophylaxis (PEP) is time-sensitive and should be started **as soon as possible and no later than 72 hours after a potential exposure.**

If you think you may need PEP, **do not wait for STI symptoms or a test result before seeking medical advice.**

3. Consider pregnancy prevention if pregnancy is possible.

If you could become pregnant and the sex was recent, ask a healthcare professional or pharmacist about **emergency contraception** as soon as possible. Different options have different time limits.

4. Arrange appropriate STI testing.

A healthcare professional can advise you on which tests you need and when they should be performed.

DON'T:

Take antibiotics “just in case.”

Assume you are safe because you have no symptoms.

Wait for symptoms before asking about HIV PEP when the exposure was recent.

SITUATION 2: “THE CONDOM BROKE OR CAME OFF.”

A broken or slipped condom can create an exposure risk.

YOUR ACTION PLAN:

- ☐ Note when it happened.
- ☐ Stop sexual activity until you have considered the risks and next steps.
- ☐ If HIV exposure is possible and it has been **less than 72 hours**, seek urgent medical advice about PEP.
- ☐ If pregnancy is possible, ask promptly about emergency contraception.

- ☐ Ask a healthcare professional about appropriate STI testing.
- ☐ Do not douche or wash inside the vagina in an attempt to prevent an STI.

REMEMBER:

The sooner you act, the more options you may have for time-sensitive prevention.

SITUATION 3: “MY PARTNER TOLD ME THEY HAVE AN STI.”

First: **Don't panic and don't blame yourself or your partner.**

Many STIs can be treated, and some can be cured.

DO THIS:

1. Find out what infection was diagnosed.

If possible, ask your partner:

“What STI were you diagnosed with, and when were you diagnosed?”

2. Find out whether they have started treatment.

Some infections require treatment for one or both partners to prevent passing the infection back and forth.

3. Get medical advice.

Tell the healthcare professional that you have had sexual contact with someone diagnosed with an STI.

They can determine:

- Which tests you may need
- When you should test
- Whether treatment is appropriate
- Whether you need follow-up

4. Avoid sex until you have received appropriate advice.

If you are diagnosed with an STI, follow the treatment and abstinence instructions given by your healthcare professional.

SITUATION 4: “I HAVE UNUSUAL SYMPTOMS.”

Possible STI-related symptoms can include:

- ☐ Unusual vaginal or penile discharge
- ☐ Pain or burning when urinating
- ☐ Genital sores or ulcers
- ☐ Blisters around the genitals
- ☐ Genital itching or irritation
- ☐ Pain during sex
- ☐ Pelvic or lower abdominal pain
- ☐ Testicular pain or swelling
- ☐ Bleeding between periods or after sex
- ☐ A new rash, particularly with other symptoms

IMPORTANT:

Symptoms alone cannot tell you which STI you have.

Some STIs cause **no symptoms at all**, while similar symptoms can occur with conditions that are not STIs.

YOUR NEXT STEP:

Get assessed and tested rather than trying to diagnose yourself from the symptoms.

Until you know what is causing the symptoms, consider avoiding sexual contact or using condoms consistently. Get the kits and get tested

SITUATION 5: “I FEEL COMPLETELY FINE.”

This is one of the most important things to remember:

NO SYMPTOMS ≠ NO STI

Some sexually transmitted infections can be present without obvious symptoms.

If you have had a possible exposure, don't use the absence of symptoms as proof that you are not infected.

ASK YOURSELF:

Have I had a new sexual partner recently?

☐ Yes ☐ No

Did I have sex without a condom, or did the condom fail?

☐ Yes ☐ No

Has a sexual partner told me they have an STI?

☐ Yes ☐ No

Am I worried about a possible recent exposure?

☐ Yes ☐ No

If you answered **YES** to any of these, consider speaking with a healthcare professional about whether STI screening is appropriate.

THE 72-HOUR RULE

If you think you may have been exposed to HIV:

DO NOT WAIT.

HIV PEP works best when started as soon as possible after a potential exposure and should be started **within 72 hours**.

If it has been:

LESS THAN 72 HOURS

Seek urgent medical care and ask about HIV PEP.

MORE THAN 72 HOURS

Still seek medical advice. PEP may no longer be recommended, but you can discuss testing, prevention, and other appropriate next steps.

NEVER START OR STOP PEP WITHOUT MEDICAL GUIDANCE.

“WHEN SHOULD I GET TESTED?”

There is **no single testing time that works for every STI**.

Different infections and different tests have different **window periods**—the time between exposure and when a test can reliably detect an infection.

Therefore:

DON'T:

✗ Take one test immediately and assume that a negative result rules everything out.

DO:

- ☑ Tell the healthcare professional **when the possible exposure happened**.
- ☑ Explain what type of sexual contact occurred.
- ☑ Mention any symptoms.
- ☑ Tell them whether you know your partner's STI status.
- ☑ Follow their advice about the appropriate tests and whether repeat testing is needed.

SEEK URGENT MEDICAL CARE IF...

Don't rely on this card alone if you have:

● Severe or worsening lower abdominal/pelvic pain

Severe testicular pain or sudden swelling

High fever with significant genital or pelvic symptoms

Fainting, severe weakness, or feeling seriously unwell

Severe pain or rapidly worsening genital swelling

A serious allergic reaction or difficulty breathing

Symptoms following sexual assault

IF YOU FEEL SERIOUSLY UNWELL:

Seek urgent medical care rather than waiting for an STI test.

YOUR “WHAT DO I DO NOW?” CHECKLIST

If you're unsure what to do, work through these questions:

1. WHAT HAPPENED?

- ☐ Unprotected sex
- ☐ Condom broke/slipped
- ☐ Partner diagnosed with an STI
- ☐ New genital symptoms
- ☐ Sexual assault
- ☐ Other: _____

2. WHEN DID IT HAPPEN?

Date: _____

Approximate time: _____

3. COULD HIV EXPOSURE BE POSSIBLE?

- ☐ Yes
- ☐ No
- ☐ I don't know

If yes or unsure and it has been less than 72 hours → seek urgent medical advice about PEP.

4. COULD PREGNANCY BE POSSIBLE?

- ☐ Yes
- ☐ No
- ☐ Not applicable

If yes and the exposure was recent, ask promptly about emergency contraception.

5. DO I HAVE SYMPTOMS?

- ☐ Yes
- ☐ No

If yes, describe them:

6. WHAT SHOULD I DO NEXT?

- ☐ Contact a healthcare professional
- ☐ Ask about STI screening
- ☐ Ask about HIV PEP

- ☐ Ask about emergency contraception
- ☐ Avoid sexual contact until advised
- ☐ Follow-up as recommended

WHAT TO SAY AT THE CLINIC

If you're nervous about explaining everything, you can simply say:

“I had a possible STI exposure, and I'd like to know what testing or treatment I need.”

Then tell the healthcare professional:

When it happened:

Type of sexual contact:

Condom used?

☐ Yes ☐ No ☐ Condom broke/slipped

Partner's known STI status:

Symptoms:

Any previous STI diagnosis:

You do **not** need to know which STI you have before seeking care.

ONE LAST THING

Having an STI does **not** make you dirty, careless, or unworthy.

STIs are infections. They can affect people of different ages, backgrounds, and relationship statuses.

The important thing is what you do **after a possible exposure**.

DON'T PANIC.

DON'T GUESS.

DON'T DELAY TIME-SENSITIVE CARE.

SPOT IT.

SCREEN IT.

STOP IT.

THE STI SHIELD

Your sexual-health guide to making informed decisions, recognizing warning signs, and knowing when to seek screening and care.

MEDICAL DISCLAIMER

This emergency action card is an educational resource and is not a substitute for diagnosis, testing, treatment, or individualized medical advice.

STI symptoms can overlap with other conditions, and some STIs cause no symptoms. Testing recommendations and treatment depend on the individual, the type of exposure, timing, symptoms, and local clinical guidance.

If you believe you have been exposed to HIV within the past 72 hours, seek urgent medical advice about HIV PEP rather than waiting for symptoms or test results.

If you have severe symptoms, have experienced sexual assault, or feel seriously unwell, seek urgent medical care.

