

Timing the discussion

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When should contact tracing be discussed?

- **Before testing:** Contact tracing may sometimes be discussed prior to STI testing, particularly if a patient raises concerns, is symptomatic or the likelihood of an STI is high.
- **When an STI is diagnosed:** Contact tracing is more commonly discussed after a confirmed diagnosis when the index patient's sexual, injecting or other risk history is reassessed, and treatment provided.

Factors to consider include:

1. **The patient's physical and emotional state.** If the patient is physically unwell or emotionally distressed, it may be better to defer the discussion to a subsequent
2. **The patient's own priority.** For many patients, the issue of notifying contacts is high on their agenda and it may suit them to deal with the issue immediately.
3. **The nature of the condition.** For easily treatable infectious conditions such as [chlamydia](#) or [gonorrhoea](#), contact tracing is usually initiated during the same visit in which the index patient is given the diagnosis and treatment. This is important in limiting further transmission or re-infection of the index patient.
4. **Public health factors.** If it is suspected that a contact is placing others at immediate risk of infection (e.g. HIV or [syphilis](#) in pregnancy), contact tracing should proceed immediately. Consider contacting a sexual health or public health service in your area if you require assistance completing any stage of the contact tracing and notification process. The public health considerations for individual conditions are described in the Conditions section.

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