Preventative Services for Men – HM 3

DEFINITION

Quality family planning services recommendations for men seeking barrier methods require no special evaluation. However, men requesting advice on pregnancy prevention and/ or STI testing, should be provided quality family planning services which include preconception health, STI services, basic infertility services, and/or preventive health services. These screening components include reproductive life plan, medical history, sexual health assessment, alcohol & other drug use, tobacco use, immunizations, and depression. Physical examination and laboratory testing can be done if clinically indicated.

SUBJECTIVE

Should include:

- 1. Medical, surgical, family, social, and sexual history
- 2. Intimate partner violence and sexual violence
- 3. Mental health and substance use behaviors
- 4. Immunizations
- 5. Reproductive life plan
- 6. Medications and allergies

OBJECTIVE

Should include:

- 1. Height, weight, BMI
- 2. Blood pressure
 - a. For blood pressure less than 120/80: screen every 2 years

May include:

- 1. Inspect skin and hair, palpating inguinal nodes and penis; including location of the urethral meatus
- 2. Palpation of the testes and scrotal contents
- 3. Presence of the vas deferens and epididymis
- 4. Presence of a varicocele, hydrocele, and signs of STI's
- 5. Secondary sex characteristics; including normal growth and development
- 6. Inspect the perianal area and perform digital rectal exam, as indicated

LABORATORY

May include:

- 1. STI screening as indicated per CDC guidelines:
 - a. Chlamydia/gonorrhea (site specific based on sexual practices)
 - b. Syphilis
 - c. HIV
 - d. Hepatitis C (recommend screening persons at high risk (see CTR manual).
- 2. Diabetes screening:
 - a. Screening for Type 2 diabetes in asymptomatic males with sustained blood pressures greater than 135/80
- 3. Male infertility:
 - a. Refer for semen analysis. (See Reproductive Diseases: RD-15 Basic Infertility protocol)

ASSESSMENT

Male client preventative services

Effective Date: 12/1/2023 Last Reviewed: 10/24/2023

Next Scheduled Review: 10/1/2024

PLAN

- 1. Identify need for other services including acute care, chronic care management, and/or preventative services. Assist with any referral, as indicated.
- 2. Provide HPV vaccine per CDC guidelines. Assess need for any other vaccines that could affect preconception health (TDAP, HBV).
- 3. Treatment of any STI per CDC guidelines (partners in the past 60 days for chlamydia and gonorrhea)
- 4. If partner is unlikely to access treatment, then EPT for chlamydia and gonorrhea should be considered, per North Dakota state law (See Reproductive Diseases: Expedited Partner Therapy protocol RD-3)
- 5. If client is seeking infertility evaluation, both partners should begin at the same time (See Reproductive Diseases: Basic Infertility protocol RD-15)

CLIENT EDUCATION

- 1. Preventative health counseling per client's needs (for additional information regarding services see Health Maintenance: Reproductive Life Plan protocol)
- 2. Counsel on preconception health recommendations, as indicated
- 3. When working with male clients, discuss information about female contraceptive methods, including emergency contraception.
- 4. Encourage client to have discussion on contraception and STI risks with partner(s) and provide information to client on how partner(s) can access contraceptive services.

CONSULT / REFER TO PHYSICIAN

- 1. Any medical concerns and any requests by the client seeking additional medical care.
- 2. Any client seeking infertility assessment of testing outside Title X guidelines.
- 3. Clients seeking permanent sterilization.

REFERENCES

- 1. Male Services | Reproductive Health National Training Center (rhntc.org).
- 2. QFP: rr6304.pdf (cdc.gov)
- 3. New ACC/AHA Hypertension Guidelines Make 130 the New 140 (medscape.com)
- 4. https://www.health.nd.gov/HIV/CTR
- 5. Checklists for Family planning and related preventive health services (rhntc.org)
- 6. HPV Vaccine Schedule and Dosing | CDC

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