

PATIENT INFORMATION · SEXUAL HEALTH

Sexual health screening

what gets tested, and when to test

Most sexually transmitted infections cause no symptoms at all, which is why testing is based on exposure rather than on how you feel. Timing matters: test too early and a genuine infection will be missed, which is the commonest reason a reassuring result turns out to be wrong.

Seek help urgently if

- there is a risk of **HIV exposure** — preventive treatment (PEP) must start within **72 hours** and works best within 24
- you have **severe pelvic or testicular pain**, or a high fever
- you have **painful blisters or ulcers** and cannot pass urine
- there is any possibility that sex was **not consensual**
- you are **pregnant** with symptoms of an infection

PEP is available from emergency departments and sexual health clinics out of hours — do not wait for a routine appointment. Sexual assault referral centres provide confidential care and support regardless of whether you involve the police. In an emergency call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

When to test after a risk

2 weeks

chlamydia and gonorrhoea

4-6 weeks

HIV and syphilis, from most modern tests

12 weeks

repeat test to confirm all clear

Testing before these points can produce a negative result while an infection is still developing. If you test early because you are worried, that is reasonable — but plan the repeat test as well, and use condoms in the interval.

What a screen involves

- **Chlamydia and gonorrhoea** — a urine sample for men, a self-taken vaginal swab for women, plus throat and rectal swabs where relevant. Self-taken swabs are as accurate as clinician-taken ones.
- **HIV and syphilis** — a blood test.
- **Hepatitis B and C** — blood tests, offered depending on risk.

- **Herpes and genital warts** are diagnosed from examination of symptoms rather than screened for routinely.
- **Trichomonas and mycoplasma** where symptoms suggest them.
- No examination is needed if you have no symptoms — a routine screen can be entirely self-sampled.

Symptoms are the exception, not the rule

Around seven in ten women and half of men with chlamydia have no symptoms whatsoever. Untreated, it can cause pelvic inflammatory disease, ectopic pregnancy and infertility in women, and epididymitis in men. This is why regular screening — annually if you are sexually active and under 25, or on any change of partner — matters more than waiting to notice something.

Symptoms worth testing for

- unusual discharge from the vagina, penis or anus
- pain or burning on passing urine
- sores, blisters, ulcers, lumps or warts around the genitals or anus
- itching, rash or unusual smell
- bleeding between periods or after sex
- pain during sex, pelvic pain, or testicular pain

If a test is positive

- Most bacterial infections are cured with a short course of antibiotics.
- **Avoid sex** until you and any partners have completed treatment and been given the all clear — usually seven days after treatment.
- **Partner notification** matters: previous partners need testing to prevent reinfection and complications. This can be done anonymously through a clinic if you prefer, and we can arrange it.
- A test of cure is recommended for certain infections, and in pregnancy.
- HIV is now a manageable long-term condition with normal life expectancy, and people on effective treatment with an undetectable viral load **cannot pass it on sexually**.

Prevention

- Condoms substantially reduce transmission of most infections, though not entirely for those spread by skin contact such as herpes and warts.
- **PrEP** — medication taken before exposure — is highly effective at preventing HIV and is available for people at higher risk. Ask us if you think it may apply to you.
- The **HPV vaccine** protects against the virus causing most cervical cancer and genital warts.
- **Hepatitis B vaccination** is recommended for several groups and is available here.
- Regular screening on changing partners, even without symptoms.

Book an appointment if you want a routine screen, have symptoms, need results quickly for peace of mind, or want to discuss PrEP or vaccination. Everything is confidential, most screening is self-sampled, and results come back without a wait. If you need PEP after a possible HIV exposure, go to an emergency department now rather than booking.

Confidential screening, fast results

Discreet appointments seven days a week, 9am–7pm,
on Whitechapel Road.

Book an appointment

or call 020 7916 0029

Where to get help

Tower Bridge Hospital London

97–99 Whitechapel Road, London E1 1DT

020 7916 0029

WhatsApp **07903 284 189**

info@mhwclinic.co.uk

Open 7 days, 9am–7pm

In an emergency

Call 999, or go to the Royal London Hospital
Emergency Department, Whitechapel Road,
London E1 1FR.

When we are closed and it is not an emergency

Call NHS 111 or visit 111.nhs.uk.

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This leaflet is based on current NHS, NICE and BASHH guidance on sexually transmitted infection testing and management. It is general information and does not replace advice from a clinician who has assessed you. If your symptoms change or you are worried, contact us on 020 7916 0029, call NHS 111, or call 999 in an emergency.

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