

## Welcome to STI/PAP Klinic!

STI Klinic — Tuesdays-Thursdays 4 p.m.-8 p.m. Fridays 10 a.m. — 3:30 p.m. and
Saturdays 10 a.m.-4 p.m.

Pap Klinic — Saturdays 1 p.m. — 4 p.m.

## Because of COVID-19 precautions we are only seeing clients in the following circumstances:

- You have symptoms of an STI
- You have a recent sexual partner who has chlamydia, gonorrhea, syphilis or HIV
- You were told to come in for testing or treatment
- Sexual assault and emergency contraception

If you are here for routine screening, genital wart treatment, pap testing or immunizations we ask that you come back when we are able to offer full-service.

			Date:	Time seen at triage:	
Pleas	se keep i			easons and you may not be seen in the order ns, please ask a staff member!	
What name would you like us to call you?			l you?	Pronoun	
Name:			PHIN:	Date of birth:	
Phone	Numbe	er(s) we can contact yo	ou at: Do <u>not</u> list phon	e numbers that you do not want Klinic to call.	
Address:		(Ноте)	(Cell)	(Other)	
		(Street #, Street Name)	(City, Province)	(Postal Code)	
Please	check	all that apply:			
0	I have	I have STI symptoms and need testing and treatment			
0	I have a partner with an STI				
0	I was told to come in for follow-up testing or treatment				
0	Pregnancy Testing Date of last period				
0	Emergency contraception (Plan B)				
0	Other	••			



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