



Welcome to Teen Klinik!

Please keep in mind that people are here for a variety of reasons and you may not be seen in the order that you checked in. If you have any questions, please ask a staff member!

What name would you like us to call you? _____

Name: _____ Age: _____ Date of Birth: _____
(22 and under)

Do you have any flu symptoms (fever, cough, runny nose, sore throat, weakness, headache?) Yes No

Have you travelled out-of-province or internationally in the last 14 days? Yes No

Do you have somewhere else (like a car) where you can wait before your appointment? Yes No

What is the best phone number to reach you at? _____ *cell/other*

Do you have a different phone with you tonight? Number: _____ *cell/other*

Address: _____
apartment # — street number — street name city province postal code

9-digit health number from the back of your health card (PHIN): _____

What brings you to Teen Klinik today?

- Symptoms of a sexually transmitted infection (STI/STD) (please **do not** pee before the test)
- Emergency contraception (Plan B/morning after pill)
- Prenatal care
- Depo injection*
- Pregnancy test*
- Start birth control for the first time

- Restart birth control
- Birth control refills
- Returning for my test results
- Discuss pregnancy options (parenting, adoption, abortion)
- Talk to a counsellor
- I need help being connected with services (e.g. housing, EIA, mental health, etc.)
- I was sexually assaulted

- Other _____

Please note: As of June 2 we are no longer able to dispense birth control through our low-cost program at Teen Klinik. We are able to provide a prescription to take to your pharmacy. Please talk to your health-care provider about how this will affect you and let them know if you have health insurance available.