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## Confidentiality

Concerns about confidentiality may discourage adolescents from seeking necessary medical care and counseling, and may create barriers to open communication between patient and physician. Protection of confidentiality is needed to appropriately address issues such as depression, suicide, substance abuse, domestic violence, unintended pregnancy and sexual orientation.

When caring for an adolescent patient:

1. The physician should offer the adolescent an opportunity for examination and counseling separate from parents/guardians, and their privacy should be respected.
2. The physician should make a reasonable effort to encourage the adolescent to involve parents or guardians in healthcare decisions.
3. The physician should educate parents to encourage their adolescents toward personal responsibility in health care, and facilitate communication regarding appointments and payments, in a manner supportive of the adolescent's rights to confidentiality.
4. Every effort should be made to maintain confidentiality. The limits on what can be guaranteed should be clearly discussed. Information that would suggest someone is in danger, evidence of abuse or diagnosis of certain communicable diseases must be reported to the proper authorities. Billing and insurance information often cannot be kept confidential from the guarantor of payment.

Since state laws and regulations vary, family physicians should be aware of their community's standards regarding adolescent confidentiality. In general, especially in areas where the adolescent has the legal right to give consent, confidentiality must be maintained. Ultimately, the judgment of the physician should prevail in the best medical interest of the patient.  
(1988) (2001)

## Role of the Family Physician

Family physicians are by their training qualified to provide for the health care needs of the adolescent. The special and complex needs of adolescents are well served by the family physician's comprehensive skills, family and community orientation, and social and developmental awareness. Family physicians should promote their availability and expertise in adolescent health care to families and communities (1989) (2000)

## Sexuality and Contraception

The American Academy of Family Physicians is concerned about the sexual health of adolescents in the United States, particularly in regard to the high incidence of teenage pregnancies, the high rate of sexually transmitted diseases and the lack of effective sex education programs. The AAFP recommends that:

- a. Family physicians should stress abstinence which, when practiced consistently, is the most effective method of preventing unplanned pregnancy and the transmission of sexually transmitted disease(s). Responsible sexual behavior is also an effective method of preventing

- pregnancy and sexually transmitted diseases.
- b. Adolescents receiving contraceptive services should be accorded strict patient confidentiality
  - c. All family physicians should take an active role in the prevention of unintended teenage pregnancies and prevention of STDs, by providing appropriate guidance/counseling and effective sex education to their adolescent patient population.
  - d. Family physicians should ensure that adolescent patients receive appropriate medical care related to sexual health, including examinations, testing, treatments, prophylactic immunizations, counseling, and contraceptive methods.
  - e. Family physicians should encourage family members to be involved in sex education efforts. It is from the family that an adolescent's values and concept of sexual responsibility arise.
  - f. Family physicians should be actively involved in community efforts in initiating and implementing effective education and prevention programs for unintended teenage pregnancy and sexually transmitted diseases. The AAFP supports health education programs in elementary to high schools to include age appropriate sex education.
  - g. Family physicians should be aware that their adolescent patients may be dealing with issues of sexual orientation that impact their psychosocial and physical health. Asking open questions about sexuality rather than assuming a teen is heterosexual can open a dialogue on family relationships, safe sex, suicide risks and other issues confronting gay, lesbian, bisexual, and transgender adolescents, in a sensitive and accepting atmosphere.

(1987) (2000)

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