

## Additional file 2: Example of treatment advice



### Sexuality

You indicate that you have no problems with intimacy or sexuality

*Advice (select if applicable):*

- ☐ None



### Sexuality

You indicate that you have little difficulty with intimacy or sexuality

*Advice (select if applicable):*

- ☐ Search for the cause of the difficulty with intimacy or sexuality; talk about experiences, concerns and wishes. Take into account the side effects of medication
- ☐ Provide information and advice, and refer to *www.thuisarts.nl*



### Sexuality

You indicate that you have difficulty with intimacy or sexuality

*Advice (select if applicable):*

- ☐ Search for the cause of the difficulty with intimacy or sexuality; talk about experiences, concerns and wishes. Take into account the side effects of medication
- ☐ Provide information and advice, and refer to *www.thuisarts.nl*
- ☐ Perform additional diagnostics or consult a specialised general practitioner or another specialist for further action