

YOUR PELVIC EXAM

**A pelvic exam is not any woman's idea of a good time,
but knowing what happens and why, can make the exam more bearable.
You might even find it interesting.**

Tips

<ul style="list-style-type: none">Find a provider who thinks that education is an important part of health care.	<ul style="list-style-type: none">If you want to have a friend with you during the exam, that is fine.
<ul style="list-style-type: none">If you are concerned about confidentiality, be sure to ask about this in advance.	<ul style="list-style-type: none">If you have questions, be sure to write them down so you won't forget during the exam.
<ul style="list-style-type: none">Tell the clinician why you are seeing him/her.	<ul style="list-style-type: none">Be prepared to tell the clinician the date that your last period started.
<ul style="list-style-type: none">Be sure to report any unusual symptoms that you are having.	<ul style="list-style-type: none">Take pamphlets home with you in case questions arise later.

When and Why

How often you have a pelvic exam is up to you. Experts generally agree that once a woman begins having sex, or reaches age 21, she should have regular pelvic exams. You and your clinician should decide together how often you need one.

Besides routine checkups and to get birth control, you may need a pelvic exam if you have any of the following symptoms:

1. Heavy vaginal discharge that itches, burns, or smells.
2. Heavy vaginal bleeding.
3. Bleeding between periods.
4. Painful intercourse.
5. Menstrual cramps that cause you to miss school or work.
6. Any signs of pregnancy (a missed period, tender breasts, upset stomach).
7. No periods at all.

What Happens?

Before the exam

The clinician will want to know the reason for your visit. Do you need birth control? A regular checkup? Are you concerned that you may have a problem?

You will be asked some questions about your period: when you had your first period, the date your last period started, how many days you bleed (menstruate), how many days between periods, and if you have severe cramps or heavy bleeding. You'll be asked if you are using birth control. You'll also be asked to give your medical history, including any pregnancies, major illnesses or surgery. This information gives your clinician clues about your health.

When it is time for the exam, you will be asked to undress and put on a gown. Be sure to go to the bathroom first, as this will make the exam more comfortable for you.

The Breast Exam

First, the clinician will check your breasts for lumps. She or he will press gently around the breast and under the arm. The appearance of the breasts – dimpling or puckering of the skin, or any discharge from the nipples that might mean a problem may also be checked.

Your clinician will teach you how to check your breasts so you can do a self exam each month.

The Pelvic Exam

The pelvic exam is actually quite simple. It consists of 3 or 4 steps, and it only takes a few minutes. This is the part of the exam women find most embarrassing, so it is nice to know that it is quick. Remember, your clinician does this every day. Her or his only concern is for your health.

You will be asked to lie down on a table with “stirrups” on one end for your feet or knees. Your knees and legs will be positioned apart so the genital area is easier to see. Now is the time when you should try to relax (easier said than done!). The more relaxed you are, the more comfortable the exam will be. If you are nervous, try closing your eyes and taking deep breaths.

External exam

First, the vulva or external sex organs are checked for signs of growths or rashes. Be sure to say if you’ve noticed any.

Speculum exam

Next comes the speculum exam. The speculum is a metal or plastic instrument that gently spreads the vagina so the cervix (the opening of the uterus) can be seen. The clinician carefully puts a warm speculum into the vagina. This shouldn’t hurt because the vagina is flexible. At most, you will feel pressure. If you’d like, the clinician will hold a mirror so you can see for yourself what your cervix looks like.

The main reason for the speculum exam is so the clinician can do a Pap smear. This is usually a painless test. Cells are gently taken from the cervix with a brush and then placed into a vial of liquid. These cells will be sent to a laboratory and examined for abnormalities that could lead to cancer. Cervical cancer can be cured if found early so regular pap smears are a must.

Another purpose of the speculum exam is to look for rashes or redness on the vagina or cervix. These things may be caused by sexually transmitted infections (STIs). When the exam is completed, the speculum is carefully removed.

The Bimanual Exam

The bimanual (two hands) exam is next. After putting on a clean glove and rubbing gel on the fingers, the clinician puts one or two fingers in the vagina until they touch the cervix. With the other hand, she or he gently presses the abdomen. This is done to check the uterus, ovaries and fallopian tubes. If you feel any pain be sure to say so.

Sometimes the pelvic exam may include one more step. This is called a recto-vaginal exam. The clinician puts one finger into the vagina and one finger into the rectum. Again, with the other hand, she or he gently presses the abdomen. This exam helps the clinician feel areas that can’t be reached with the bimanual exam.

That’s it. The pelvic exam is over, and you can get dressed.

After the exam

Once you are dressed you will have another chance to talk to the clinician. This is the time to ask any questions that you didn’t ask during the exam. If you are having a pelvic exam because you have a problem, or your clinician found anything unusual, she or he will explain what it is and what to do about it. If the purpose of your visit is to get birth control and you need a prescription, the clinician will write it for you. He or she will also suggest when you should return for your next pelvic exam.