

TIPS FOR DISTRESSED PATIENTS

- Allow legs to “fall to the side”
- Encourage Valsalva maneuver (“bearing down”)
- Diaphragmatic breathing
- Progressive Muscle Relaxation
- Guided Imagery
- Color Breathwork
- Deep Rhythmic Breathing
- Breath Counting
- Distraction (if effective for patient)
- Centering



AVOID

- Pushing thighs apart, however subtle
- Saying “Just relax”
- Continue advancing the speculum if patient says “stop”
- Forcing insertion against contracted perineum
- Pinching skin or pulling hair by advancing/withdrawing the speculum too quickly



DEVELOPED BY:
Adrienne A. Williams, Ph.D. and Mozella Williams, M.D.
University of Maryland School of Medicine
Department of Family and Community Medicine
29 S. Paca St.
Baltimore, MD 21201

PAINLESS PELVIC EXAMS

A POCKET GUIDE
FOR STUDENTS,
RESIDENTS,
& PHYSICIANS



SETTING UP THE ROOM

- Room temperature
- Adequate privacy
- Ensure head of table will elevate
- Have different size of speculums available
- Covers on stirrups
- Humorous picture on ceiling
- Handheld mirror

SCREEN FOR RISKS

- **Sexual History**
 - Are you sexually active? (If no, have you ever been?)
 - Are your partners male, female or both?
- **Sexual Assault**
 - Has anyone ever touched you in a way that made you feel uncomfortable or made you have sex when you didn't want to?
- **Speculum Exams**
 - Have you had a speculum exam before?
 - Have your exams ever been painful?
- **Painful intercourse**
 - Is intercourse ever painful or uncomfortable?
- **Tampon Use**
 - Do you use tampons?
 - Have you ever had difficulty or pain with tampons?

SETTING UP THE PATIENT

- Explain the exam.
- Correct myths/provide education.
- Tell patient she can stop the exam at any time.
- Have patient undress in a way comfortable for her.
- Offer (but do not require) a drape.
- Assure feet are in a comfortable position.
- Keep eye contact (elevated back of table & "dip tent" sheet).
- Ask patient to move pelvis to edge of table so pelvis is tilted.



USING THE SPECULUM

- Consider the temperature of the speculum.
- Ensure the speculum is working properly.
- Lubricate the speculum.
- Ask permission to touch the knee. WAIT FOR RESPONSE!
- Move hand along inner thigh to perineum.

- Open labia from posterior aspect with enough pressure to expose introitus.
- Insert finger(s) and gauge patient response/discomfort.
- Ask permission to insert speculum. WAIT FOR RESPONSE!
- Advance the speculum aiming toward posterior of vaginal vault.
- Consider asking permission before opening speculum.
- Open blades with as much posterior pressure as possible.
- Once cervix is in view, secure speculum.
- When specimen collected, open speculum a little (posterior pressure).
- Gradually withdraw speculum allowing blades to close slowly.



HELPFUL RESOURCES

RAINN: Rape, Abuse, & Incest National Network
rainn.org 800-656-HOPE

National Domestic Violence Hotline
thehotline.org 800-799-SAFE(7233)

Psychologists who treat Sexual Disorders:
Search: <http://locator.apa.org>