

Sensitive Examinations or Procedures: What to Expect and Patient Rights During Exam

Welcome to the UT Student Health Center. We are happy to serve you and meet your healthcare needs.

We understand that most patients feel uncomfortable when they go to see a doctor or another healthcare provider. We also understand that many of our patients may be doing so for the first time on their own and may not know what to expect. To facilitate a better exchange of information, we want you to feel safe, comfortable and confident during your examination. Therefore, we would like for you to know what to expect during a sensitive examination or procedure with one of our doctors or other healthcare providers.

A sensitive examination or procedure includes the physical examination of or a procedure involving the genitalia, breasts, and the perianal region, rectum, and/or buttocks (regardless of gender).

To serve as a safeguard for patients against any unacceptable acts or behavior and to minimize the risk of a clinical staff member's action being misinterpreted, Student Health Center policy requires the presence of a chaperone when any sensitive examination or procedure is performed. Below, we have outlined many of the more common components of a sensitive examination. Not all of these will be performed at each visit. It really depends on the purpose of your visit

What to Expect

Sensitive Exams and Procedures. The following examination procedures will require the examiner to visualize and touch your body. The time spent on these procedures will be kept to an absolute minimum that will provide for a thorough medical examination.

Pelvic exam. Patients typically have a first pelvic exam upon experiencing symptoms such as discharge or pain, or at the age of twenty-one.

Pelvic exams may include:

External exam. Visually inspecting and touching/feeling/palpating the bare areas of the external labia, clitoris, vaginal opening, perineum, and rectal area, conducted with the patient lying down on an exam table with paper/cloth coverings over the stomach and legs and with feet in stirrups.

Speculum exam. A duck bill-shaped instrument is gently inserted into the vaginal opening and opened to provide visual access to the vaginal canal and cervix. The provider may also conduct a Pap test for patients age 21+ by using a thin plastic brush to collect cells from the cervix. Additionally, a swab may be collected for STI testing, evaluating vaginal discharge, or diagnosing infection.

Bimanual exam. Bimanual exams may be performed on patients experiencing pain or other symptoms in the lower abdomen and reproductive organs. A provider will insert 1 to 2 gloved fingers into the vaginal canal while using the other hand to gently apply pressure and touch/feel/palpate the bare skin at the lower part of the belly to check the size and placement of the ovaries and uterus. The provider may (gently) move the cervix from side-to-side with their fingers to check for signs of infection. The provider may also use a single digit to evaluate pelvic floor muscles for tenderness due to muscle spasm.

Rectal exam. Providers may perform rectal exams on patients experiencing pain in the lower abdomen and reproductive organs, blood in the stool, or other gastrointestinal or rectal symptoms. Rectal exams

are also performed to collect tests for sexually transmitted infections of the rectum. Rectal examinations are performed with the patient either lying or kneeling on the examination table.

Some patients may feel sensations similar to an urge to urinate or defecate during the rectal exam. This usually passes quickly, but patients should ask the provider to stop the exam if the urge is strong.

Rectal exams may include:

External exam. Providers may visually examine and touch/feel/palpate the bare skin of the anus and surrounding area to assess for sores, rashes and bumps, sometimes aided by a light in order to see better. The provider may collect tests for sexually transmitted infections by placing a cotton swab approximately 1 inch (2-3 cm) into the rectum, gently rotating, and removing the swab.

Digital exam. The provider inserts one gloved, lubricated finger into the anus, palpating to detect lumps or abnormalities. The provider may also push firmly on the prostate gland to check for pain or tenderness.

Anoscope exam. The provider uses a hollow tube, 3-5 inches long, and about 2 inches wide, to examine the anus and rectum in detail. The lubricated anoscope is gently inserted into the rectum and slowly withdrawn as the provider exams the rectal canal. To ease the placement of the anoscope, the provider may ask the patient to intensify and relax internal muscles (as if having a bowel movement) during insertion. The provider may position a light or ask a medical assistant to hold a light during the procedure.

Breast exam. A breast exam is performed when there is a breast concern such as pain or lumps. Providers may also offer screening breast exams to patients based on personal and family risk assessment.

A breast exam may include:

Visual exam. Patients may be requested to raise their arms above their heads to allow providers to check for differences in size or shape between breasts as well as signs of rash, dimpling, etc. The exam may be conducted in a seated position and when lying on an exam table.

Manual exam. The provider uses the pads of the finger to palpate the bare skin of the entire breast, underarm, and collarbone area for lumps or abnormalities. Providers will also check to see if lymph nodes under the armpit are enlarged. Nipples may be lightly squeezed to check for expressed fluid.

Urogenital exam (exam of the penis and scrotum). Urogenital exams may be performed to check for a hernia, if a patient is experiencing pain, swelling or discharge, or has sores/ other unusual symptoms.

Some patients develop erections during examination - this is completely normal as erections can result from anxiety, temperature changes and a reflex to touch (in addition to sexual arousal).

Urogenital exams may include:

Pubic/groin region - Hernia exam. Visually inspecting and touching/feeling/palpating the bare skin overlying the scrotum, groin, hip crease, inner upper thigh crease, and lower abdomen to check for abnormalities, especially along the lymph nodes of the hip area, testicles, and the spermatic cord connected to the testis inside the scrotum. Performed by the provider placing gloved fingers through the patient's scrotum while the patient is standing.

Diagnosing causes of pain or unusual symptoms - Penile and scrotal exam. A visual and manual examination of the penis, including the skin, foreskin, glans, and urethra to check for pain, sores or other unusual symptoms.

Providers may ask uncircumcised patients to retract the foreskin back in order to examine all surfaces of the penis for sores and lesions and may palpate the area for irregularities. Providers may on occasion check for scarring (Peyronie's disease) by squeezing the muscle of the penis. The provider may also examine the opening of the urethra.

Patient Rights

We also want to remind you that you have rights as a patient. The following are some of your rights as it relates to your physical or diagnostic examination:

- To be treated with respect, consideration, and dignity.
- To have the nature and necessity of your examination explained.
- To choose to be seen by another doctor or health care provider if that would make you feel more comfortable.
- To provide or refuse consent to any or all parts of your examination.
- To be provided with privacy during all phases of your examination.
- To request the presence of a chaperone during any or all parts of your examination. By SHC policy, some exams require the presence of a chaperone.
- To raise concerns or objections prior to or during your examination.
- To have your examination discontinued at your discretion.
- To be informed that you have the right to make suggestions for service improvement, complaints, grievances, or compliments of care and how to do so.

We hope this information has been helpful and provides useful insight to the process and procedures involved in this part of your care. Please ask questions of your doctor or other healthcare provider. We are honored to facilitate your healthcare and to contribute to your understanding and knowledge of quality healthcare delivery.

