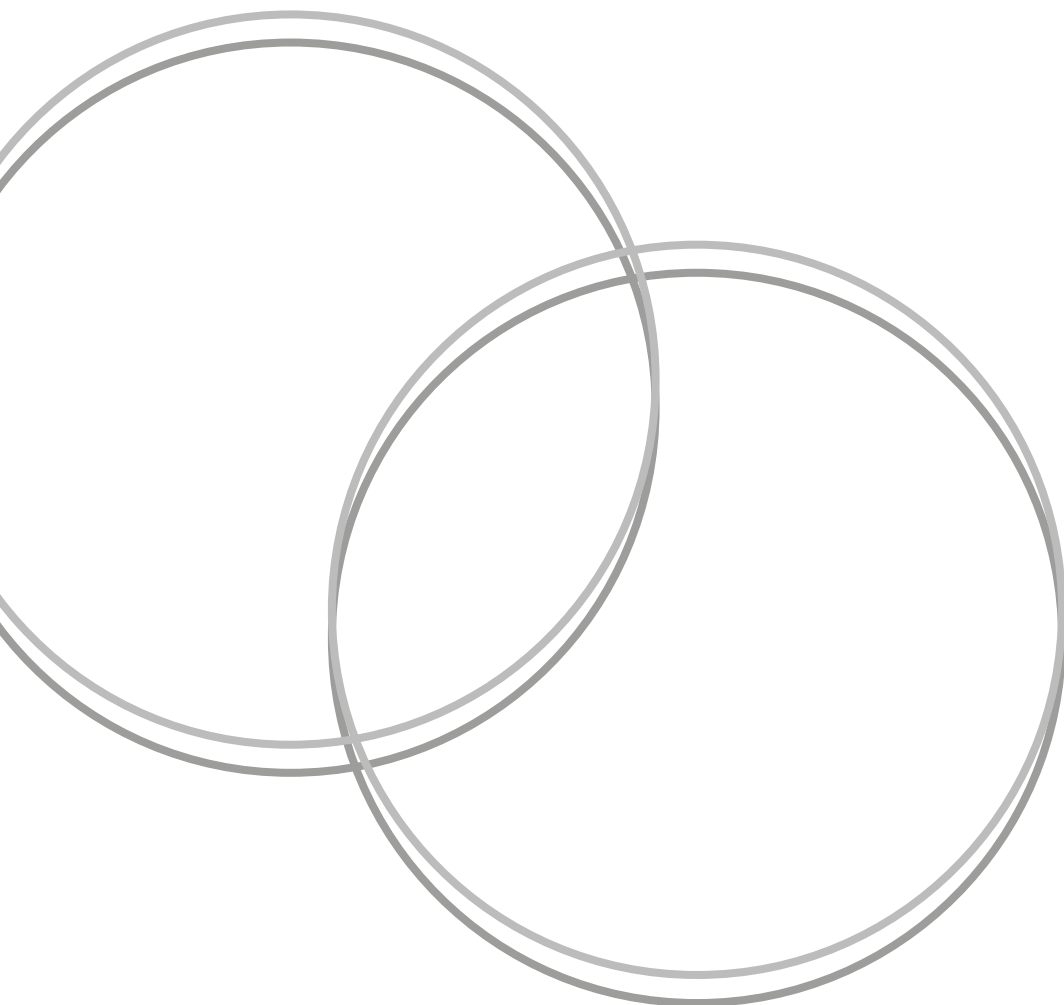




Oxford University Hospitals
NHS Foundation Trust

Having an intimate examination

Information for patients



You have been booked in for an appointment with your specialist Pelvic Health Physiotherapist to have an intimate examination, which may include one or more of the assessments below:

- External assessment of the low back and pelvis
- Perineal examination
- Vaginal examination
- Rectal examination

The information provided below is designed to answer many of the common questions patients may have regarding the assessments, and ensure you are fully informed.

External assessment of the low back and pelvis:

Why is this offered?

- To assess the function of your lower back, pelvic and hip joints, as well as muscles, ligaments and nerves in the area.
- To examine scar tissue in the area.
- To establish what level of exercise/intervention is right for you.
- To establish what type of exercise, intervention or advice is right for you.

What is involved?

- You might be asked to remove your outer clothing, or you may simply be able to roll items of clothing up/down depending on which body part is to be examined.
- You may be asked to perform different movements, or move your body into different positions. This could be in lying, sitting, or standing up.
- The physiotherapist will be looking at these movements, and may also feel or “palpate” the area with their hands.

Perineal, vaginal and rectal examination:

Why are these examinations offered?

There are several reasons why these examinations may be offered. These include:

- To assess the function of your pelvic floor and/or anal sphincter muscles. This includes both how the muscles tighten and relax.
- To assess for pelvic organ prolapse, which means the descent or bulging of one or more of the pelvic organs (the bladder, uterus or bowel) into the vagina.
- To look for causes of pain in the vagina, back passage, coccyx and /or pelvic region.
- To examine scar tissue in this area and advise on scar management strategies.

As pelvic floor exercises are an essential part of the treatment for pelvic floor problems, it is important for both you and your physiotherapist to know that you are exercising the muscles in the correct way. Following an examination, the physiotherapist will be better able to design an individualised exercise programme suitable to treat your problem.

What is involved?

Intimate assessments including perineal, vaginal and rectal examination are performed by a specialist Pelvic Health Physiotherapist.

- The examination will take place in a single patient treatment room to preserve your privacy and dignity.
- Your physiotherapist will ask you to remove your outer clothes (below your waist) and underwear, and to lie on a bed, either on your back or on your side, with your knees bent.
- You will be given a sheet to put over your lap and your knees will be supported, allowing you to relax your legs.



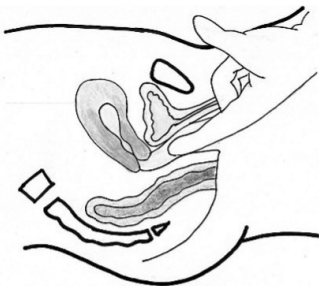
Perineal examination

- The physiotherapist will be wearing personal protective equipment including gloves.
- The physiotherapist will begin by checking the skin condition and reflexes in the perineal area (around the vagina and back passage) which may include touching the area with a gloved finger.
- The physiotherapist will visually inspect the perineal skin, and might assess touch sensation externally on the labia, clitoris and perineum, using a gloved finger or cotton bud.

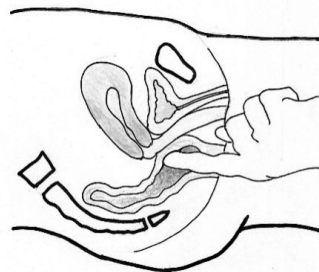
Vaginal and rectal examination

- The physiotherapist will be wearing personal protective equipment including gloves.
- The physiotherapist will begin by checking the skin condition and reflexes in the perineal area (around the vagina and back passage) which may include touching the area with a gloved finger.
- They will then insert a lubricated gloved finger into your vagina or back passage. You may be asked to:
 - Tighten and relax the pelvic floor muscles a number of times, which allows the physiotherapist to assess the muscle tone, length, strength and endurance, as well as to assess for any tenderness
 - Cough or “bear down”
 - Describe what you are feeling if the assessment relates to pain symptoms.

Throughout the examination the physiotherapist will provide feedback regarding the assessment and explain what they want you to do. Short pauses in the examination may take place to allow the muscles to recover.



Vaginal Examination



Rectal Examination

What are the risks of an internal examination?

Although internal examination carries low risk when performed with correct infection control procedures, there are certain conditions which are considered precautions under national guidelines. You should therefore inform your physiotherapist if any of the following apply:

- You are not sexually active
- You may be pregnant
- You have had a baby recently or have had recent pelvic surgery
- You currently have any vaginal infection
- You currently have a urinary tract infection
- You currently or recently had gastroenteritis/diarrhoea
- You have active Crohn's disease or Ulcerative Colitis
- You have recently received radiotherapy
- You have been diagnosed with a fistula
- You have an allergy to latex
- Your cultural/religious beliefs do not allow this type of examination
- If you have ever seen your doctor with a complaint of pelvic pain or other problems around the pelvic area
- You are menstruating
- You have undergone Female Genital Mutilation (FGM).

Other relevant circumstances to inform your Physiotherapist of are listed below. Some of these are very sensitive issues, and you are under no obligation to disclose them if you do not wish to:

- Psychosexual problems
- You have had previous negative experiences with pelvic examinations/smear tests
- You have a history of sexual assault/exploitation
- If you feel that an internal examination could be a confronting/triggering experience for you.

Consent

We understand that this is an intimate examination and that for a number of reasons, some women may not want to be examined. We need to gain your permission (or “consent”) to perform this examination. Your therapist will answer any questions or concerns you have, and will ask you if you wish to proceed with an assessment.

If you do not wish to be examined, then it is your right to decline an assessment. You can also change your mind even after you have given consent.

Chaperone

A chaperone is a person who is present during an examination to protect the safety and wellbeing of all parties present (both patient and physiotherapist). Every patient has a right to a chaperone for the examination. If you would like a chaperone, please inform your physiotherapist prior to your scheduled appointment so they can arrange this for you. This will usually involve another trained member of the team being present (a formal chaperone). If you wish to bring a support person, for example a family member or friend (an informal chaperone), please discuss this with your physiotherapist. If no chaperone is available, you will be given the opportunity to reschedule your appointment.

If you have any questions or concerns regarding this examination, please speak to your physiotherapist who will be happy to discuss any issues with you.

If I chose not to have an intimate examination, will it affect my treatment options?

When an exercise programme is based on the findings from an examination, the treatment may be more effective. If you do not wish to have an intimate examination, the physiotherapist will still provide the advice and guidance you need to undertake your exercises.

This may include using alternative ways to assess your technique. For example, your physiotherapist may still look at how you perform pelvic floor exercises whilst you are fully clothed in a lying or sitting position. Although they will not be able to confirm that your technique is correct or give you feedback on the strength of your muscles, they will be able to look at your breathing and movement patterns and whether you are using other muscle groups.

What happens after the examination?

Your physiotherapist will discuss the results of the examination with you. Using all the information gained from the examination, we can discuss your options and agree on a treatment programme designed for your individual needs.

It might be recommended by your physiotherapist to repeat the examination at a future appointment in order to re-assess the impact of treatment and/or to provide further feedback to support effective treatment. This will be discussed with you if it is appropriate.

If you have any further questions

If you have any further questions prior to your appointment, please contact us on the details below:

Women's and Men's Health Physiotherapy

Tel: **01865 235 383**

Email: physio.womensandmenshealth@ouh.nhs.uk

Chronic Pelvic Pain Physiotherapy

Tel: **01865 226 776**

Email: pelvicpainphysio@ouh.nhs.uk

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

Author: Women's and Men's Health Physiotherapy
May 2026
Review: May 2029
Oxford University Hospitals NHS Foundation Trust
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