

CHAPTER 20

**The pelvic exam:
how to examine a woman’s vagina and womb**

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The pelvic exam: how to examine a woman's vagina and womb



A pelvic exam is a way to learn what is happening inside a woman's vagina and womb.

Doing a pelvic exam can help you learn:

- if a woman is pregnant, and how many weeks she has been pregnant.
- if she has an infection in her womb or vagina.
- if she might have cancer of the cervix or womb.



You also must do a pelvic exam to insert an intrauterine device (see Chapter 21) or to do manual vacuum aspiration (see Chapter 23).

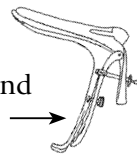
This exam is not difficult to learn, and with practice, most people can do it.

A different exam can tell you if a woman's cervix is opening during labor. This chapter does not explain how to do that exam. See page 339 to learn how.

Note: In some places, pelvic exams are done only by doctors — not midwives. But do not be afraid to try. With training and practice, midwives can learn this and other new skills. A midwife who learns to do pelvic exams can help women stay healthy throughout their whole lives, not just when they are pregnant or giving birth.

There are 3 parts of the pelvic exam

1. The **visual exam** is a way to look for any signs of infection on the outside of the woman's genitals (page 376).
2. The **speculum exam** is a way to see inside the woman's vagina and to test the health of her cervix. You use a tool called a speculum → to do the speculum exam (page 377).
3. The **bimanual exam** (2-hand exam) is a way to check the health of a woman's womb and ovaries or to check the size of the womb in pregnancy. To do a bimanual exam, you feel the womb with the fingers of one hand inside a woman's vagina and the other hand on her belly at the same time (page 387).



You do not always need to do all 3 parts of this exam.

When to do a pelvic exam

It is safe and useful to do a pelvic exam when:

- the woman wants to know about the health of her cervix, womb, and ovaries. You should certainly do this exam if the woman has signs of infection or cancer. But women can have infections or cancer in the cervix or womb and have no signs. So if possible, women should have this exam every few years — even if they have no signs of problems.
- the woman is pregnant and you need to know how long she has been pregnant.
- the woman wants an IUD (see Chapter 21).
- the woman is having problems after a miscarriage or abortion (see Chapter 22), and needs an MVA (see Chapter 23).



WARNING! It is not safe to do a pelvic exam when:

- the woman is in labor. It is not necessary to do a visual exam, a speculum exam, or a bimanual exam when a woman is in labor. If you must check her cervix to see if it is opening, see page 339.
- the woman has broken waters. If the woman is pregnant and her waters are broken, this exam can spread an infection into her womb.
- the woman is in late pregnancy and is bleeding from the vagina. If the woman is bleeding from the vagina in late pregnancy, she may have placenta previa (see page 112). Do not do a pelvic exam — or you could make the bleeding worse.
- the woman gave birth in the last few weeks.

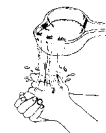
Making the pelvic exam safe

The pelvic exam is usually safe, but it can have risks. When you do a pelvic exam, you must be sure not to put any germs into the woman's vagina. When you do a pelvic exam:

- always wash your hands well, before and after the exam (see page 53).
- always wear very clean or sterile plastic gloves (see page 54).
- always use clean tools.

If you cannot wash your hands or wear gloves, it is not safe to do the exam.

There may be other ways to get information about a woman's health if you cannot make a pelvic exam safe, or you do not know how to do a pelvic exam, or the woman does not want a pelvic exam.



For example, to find out if a woman has an infection in her womb, start by asking her if she has any signs of infection (see page 325) and by taking her temperature. You can also try pressing on her belly, just above her pubic bone. If she has a womb infection, this will be very painful. These are safe ways to find infection because you do not have to put your fingers into a woman's vagina to do them.

Before the exam

Help the woman relax

The pelvic exam is easier and more comfortable when the woman is relaxed and not afraid.

Explain what you are doing and why you are doing it. Remind the woman to take deep breaths and to let her body relax. Go slowly, and stop if you are hurting her. If the woman is healthy, the exam should not hurt. Pain can be a sign of infection or a sign that you need to be more gentle.

Fear

Some women are afraid to have pelvic exams, such as women who have never had pelvic exams, and women who have had exams that were painful.

Women who have been abused sexually or physically may have an especially difficult time having pelvic exams. These women have been touched when and where they did not want to be touched. With all women, and especially with women who have been abused, ask before you touch.

Tell me anytime if you feel upset or scared, and we'll stop the exam.

All right.



Shame

Pelvic exams are the examination of genitals and vaginas. Many women are embarrassed or ashamed of these parts of their bodies. They may not want to talk about them, look at them, or let other people look at or touch them.

You can show by the way you do a pelvic exam that these parts of the body are normal, and so is talking about them. Encourage questions. You may not be able to take away someone's feelings of shame, but you can help reduce them.

Ask the woman about her history

Before you do a pelvic exam, ask the woman when she had her last monthly bleeding, if she is pregnant, and if she has any signs of infection in her vagina or womb. Chapter 7 suggests other questions you can ask a woman about her health history.

Also, explain to the woman what you are going to do during the pelvic exam and answer any of her questions about it.

The pelvic exam

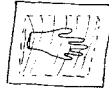
Before you start:

- Make sure that you have privacy.
- Prepare all the tools you will need for the exam:

clean or sterile speculum



clean or sterile plastic gloves



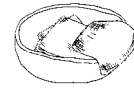
light



mirror

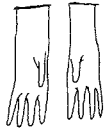
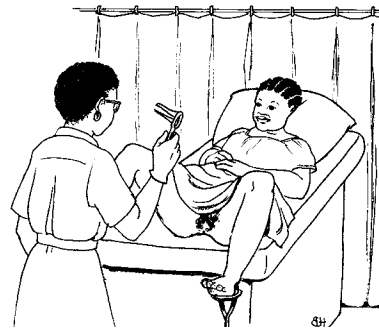


clean cloths for wiping after the exam



The speculum and gloves should be sterile if you are doing a pelvic exam to insert an IUD or to do an MVA. Otherwise, a very clean speculum is OK.

- Ask the woman to urinate before the exam. This will make the exam more comfortable for her.
- Ask the woman to remove her pants or pull up her skirt. If she wants something to cover her legs, give her a sheet or cloth.
- Ask her to lie on her back with her knees up and her buttocks at the end of the table or bed.

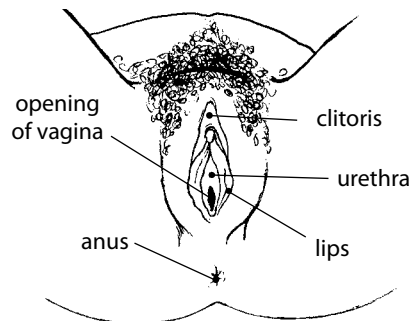


- Wash your hands with clean water and soap. Your fingernails should be short and clean.
- Put clean plastic gloves on your hands.

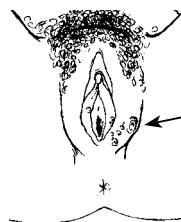
The visual exam

The skin on the genitals should be smooth and healthy. The genitals should be clean, but some clear or white discharge from the opening of the vagina is normal.

Look for lumps, swelling, unusual discharge, sores, or scars on her genitals. Sometimes you can feel lumps with your fingers that you cannot see. Lumps or sores could be signs of infection or injury. (See Chapter 18 to learn more about infections of the genitals.)



healthy genitals



Sores on the genitals can be a sign of infection.

The speculum exam

A speculum is a tool for looking inside a woman's vagina. The speculum holds the walls of the vagina open. When it is in the right position, you will be able to see the cervix, test for infection or cancer, insert an IUD, or empty the womb.

Practice opening and closing a speculum a few times before you use one for an exam so that you are comfortable with how it works.

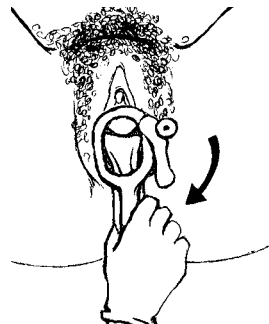
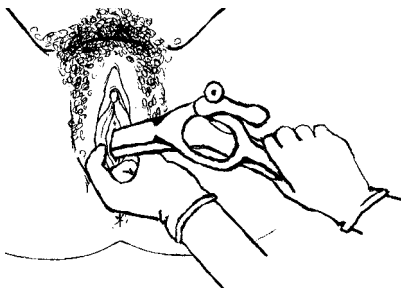
Some midwives let a woman look at a speculum before they give her an exam. This can help the woman understand the exam.

1. Help the woman relax by touching her leg, asking her to breathe, and by being gentle and slow. Remind her to tell you if the speculum hurts and stop the exam if you hurt her.

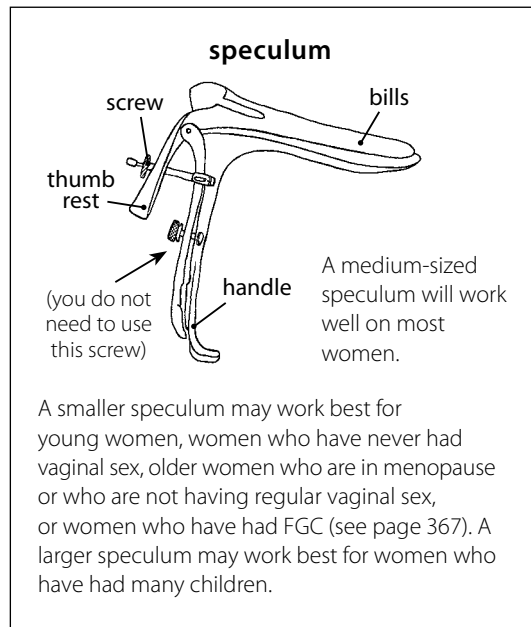


2. Warm the speculum with clean warm water, or by holding it in your gloved hand.
3. Ask the woman if she is ready to start. When she is ready, gently open the lips of her genitals with one hand so that you can see the opening of her vagina. Make sure to explain everything you are doing as you do it.

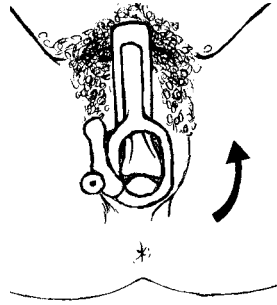
4. Hold the speculum with your other hand. Turn the handle to one side, and slide the closed bills into the vagina. If you are gentle, the bills will slide downwards into the vagina and should not hurt the woman.



As you put the speculum in, turn it so the handle is down. Be very careful not to pull her skin or hairs. Gently push the speculum all the way in. The handle should rest against the skin between the vagina and the anus.



Note: If the woman is on a bed or a flat table and the speculum handle will not fit facing down, you can insert it with the handle pointing up.



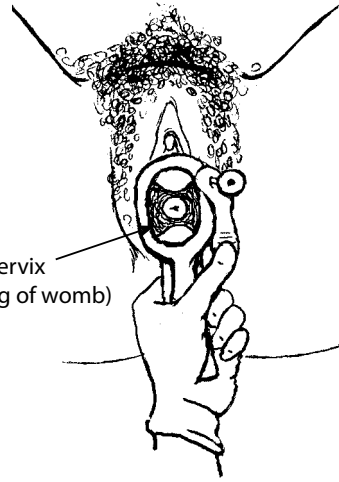
- Open the bills of the speculum by gently pushing the thumb-rest with your thumb. When you see the cervix between the bills, tighten the screw on the thumb-rest to keep the speculum open.

If you open the speculum but you do not see the cervix, close the speculum and pull it partway out. Then try again, repeating step 4. The cervix may be off to one side a little. This is normal. Sometimes the cervix will come into view more clearly if the woman coughs or pushes down as if she is passing stool while the speculum is open inside her.



The cervix is usually about this big.

cervix
(opening of womb)



- Look at the cervix — it should be smooth and pink, or, if the woman is pregnant, a little blue.

Small, smooth bumps on the cervix are usually normal, but sores or warts are signs of infection.

Notice if there is discharge or blood coming out of the cervix. Thin, white, or clear discharge is usually normal and healthy. Green, yellow, gray, lumpy, or foul-smelling discharge can be a sign of infection.

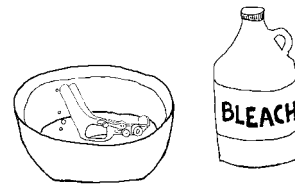


- If the woman wants to look at her own cervix, you can hold a mirror and a light to help her see. This is a chance for a woman to learn more about her body.

- Test the cervix for signs of cancer by using either the vinegar or Pap test (see page 379).

- To remove the speculum, pull it toward you a little until the bills are away from the cervix. Loosen the screw on the thumb-rest and gently let the bills close while pulling the speculum down and out of the vagina. The bills should be closed all the way as you finish pulling it out.

10. Give the woman a clean cloth or tissue to wipe any discharge from her genitals.
11. Be sure to clean the speculum after you use it.



Tests for cancer of the cervix (cervical cancer)

An important reason to do a speculum exam is to test the health of the cervix. The cervix can be tested for signs of cancer and for HPV (see page 380).

Women who have had normal exams may be tested every 3 years or when you see them during pregnancy. Women whose exams were not normal should be tested more often. Women with signs of illness should be tested right away.

Cervical cancer can be cured if signs of cancer are found early. There are 2 tests that look for abnormal cells on the cervix. Abnormal cells are not always cancer, but they can develop into cancer. You can help prevent women from getting cancer by testing them and helping them get treatment right away if necessary.

You do not need to do both tests. Choose the test that you can use most easily in your area.

The vinegar test

The vinegar test is easy to do, it is not expensive, and you do not need a laboratory to know the results. If a woman has abnormal cells on her cervix, the vinegar test will make them look white. These white patches might be cancer or pre-cancer, or a problem that is not cancer.

or



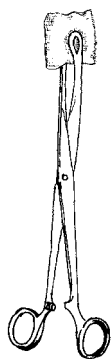
The Pap test

The Pap test also looks for abnormal cells, but it is more expensive and you need a laboratory. You will have to wait 2 to 3 weeks to get the results. But the Pap test can tell if abnormal cells are cancer, pre-cancer, or not cancer at all.

If the vinegar test shows white patches or the Pap test finds pre-cancer on the cervix, it is best to remove the abnormal cells with cryotherapy (see page 384). If the Pap test is positive for cancer, or if the vinegar test shows an area of abnormal cells too large to treat with cryotherapy, the woman needs medical attention as soon as possible. When cancer is found and treated before it spreads, it can be cured.

You can do these tests at almost any time, including when a woman has her monthly bleeding or during pregnancy. During monthly bleeding is not the best time to do the tests, because the blood can make the tests more difficult to do. But it is better to do either test during a woman's monthly bleeding than not to do any test at all. If the woman is having her monthly bleeding, use a long swab to gently wipe the blood away from her cervix before you do the test.

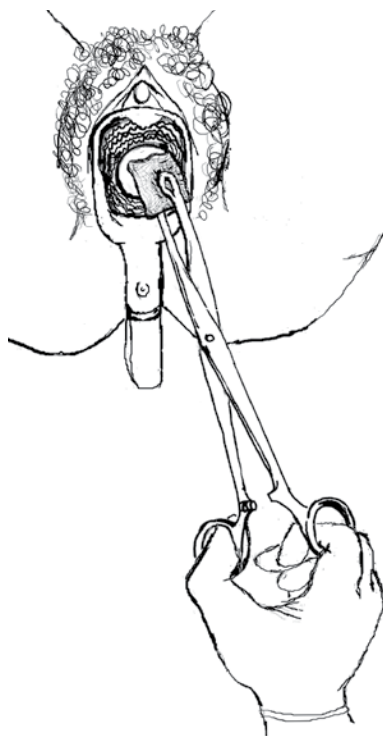
Vinegar test for cancer or pre-cancer



The vinegar test is a very simple way to check if the woman has abnormal cells on her cervix. Abnormal cells can be a sign of cancer or pre-cancer.

1. Insert a speculum and look at the cervix.
2. Hold a sterilized piece of gauze or cloth with a sterilized pair of forceps or long tweezers. You can also use a long swab if you have one.
3. Dip the gauze into plain white vinegar (any vinegar can work, as long as it has 4% to 5% acetic acid) and wet the cervix with the vinegar. Remove the gauze. The vinegar should not hurt the cervix but it may sting a little.
4. Wait for 1 minute. Look at the cervix again. If there are abnormal cells, you will see white patches on the cervix.

If white patches appear on the cervix, the woman needs care right away. If the white patches are not too large, they can be frozen and removed (see page 384) to prevent cancer. The woman can also have other tests to find out if she has cervical cancer or pre-cancer. You can save a woman's life by helping her get tested and treated early.



HPV and cancer of the cervix

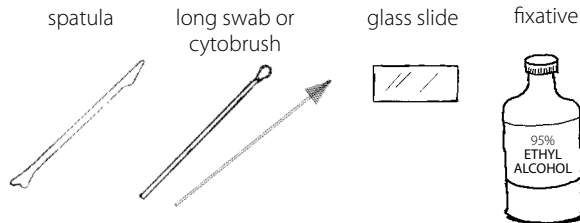
Many people are infected with a sexually transmitted virus called human papilloma virus (HPV). People get HPV through sex with someone who has it. Some types of HPV cause genital warts (see page 333). A few types of HPV are more dangerous and can cause cancer of the cervix. Most people with HPV have no warts and no other visible signs. If a woman has one of the dangerous types of HPV it may cause cancer of the cervix.

You can do a test to find out if a woman has the type of HPV that causes cervical cancer. The test is done the same way as the Pap test (see page 381). If the test is positive, it does not mean that the woman has cancer. She will still need a vinegar test or a Pap test to find out if she has abnormal cells on the cervix caused by HPV, and if those tests do not show cancer it lets you know that she needs regular Pap or vinegar tests so if cancer does appear it can be treated quickly.

Pap test for cancer or pre-cancer

For a Pap test, you will scrape a tiny bit of tissue from the cervix and vagina, and put it on a thin piece of glass called a slide. To do a Pap test, you must have access to a laboratory. At the laboratory, trained people will look at the tissue under a microscope to know if it is healthy or not.

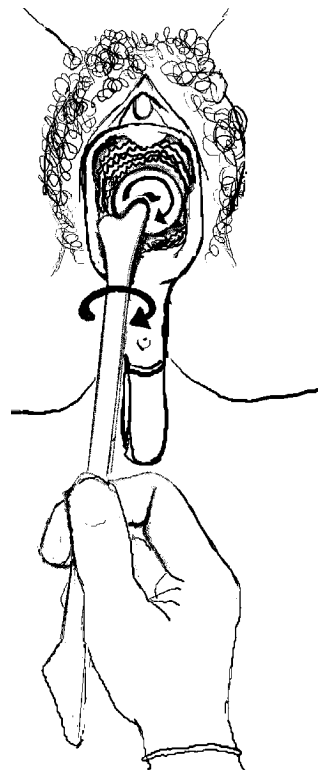
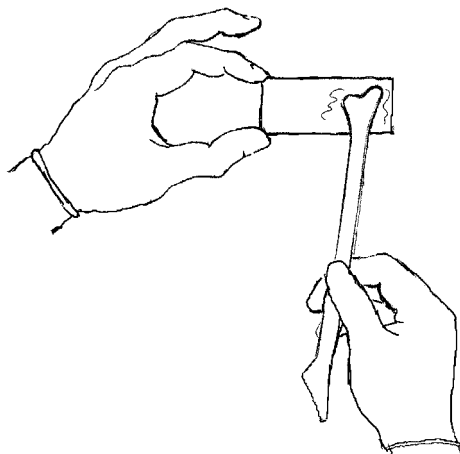
Before the test, gather sterile (or very clean) supplies:



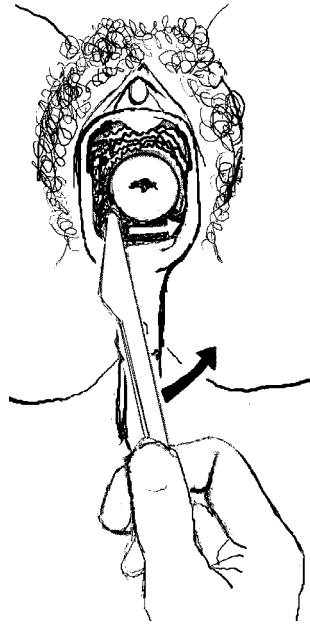
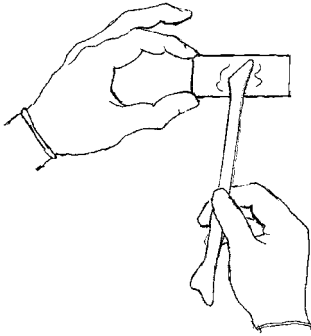
1. Insert a speculum.
2. Place the end of the spatula that has 2 points onto the cervix and roll it in a full circle between your thumb and forefinger.

As you roll the spatula, gently scrape a very thin layer of tissue off the cervix. This should not hurt the woman, but sometimes it is uncomfortable for her. It is normal for the cervix to bleed a little.

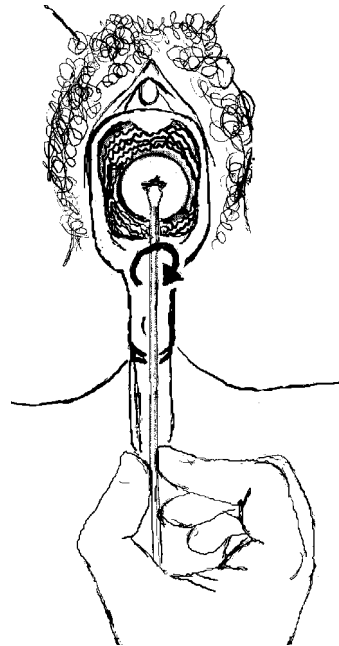
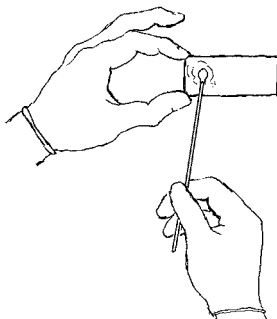
3. Wipe the spatula onto one end of the slide.



4. Place the other end of the spatula just underneath the cervix where it meets the vagina. Gently scrape sideways once.
5. Wipe the spatula onto the middle of the slide, next to the first sample.

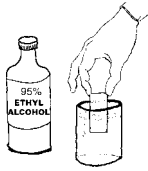


6. Put the tip of the swab or cytobrush about 1 centimeter into the opening of the cervix. Gently roll it in a full circle. This can be uncomfortable for the woman, but it is not dangerous.
7. Wipe the swab onto the end of the slide that has not been used, next to the second sample.



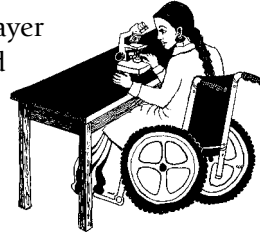
8. Put a fixative on the slide.

There are many fixatives available, but the least expensive is medical alcohol (95% ethyl alcohol). Pour some medical alcohol into a small jar and dip the slide into the jar of alcohol as soon as you have finished wiping the swab onto the slide. You must do it quickly, before the tissue dries. Let the slide sit in the medical alcohol for a few minutes, and then let the slide dry in the air. If you do not have medical alcohol, you can spray the slide with hairspray.



You must use a fixative on the slide or the thin layer of tissue from the cervix will smear or come off and the test will not be accurate.

9. Take the slide to a laboratory that can examine Pap tests (not all laboratories can). Take the slide within a week after doing the test.



Note: Tell the woman that a little bleeding from the vagina is normal after a Pap test.

Cancer of the cervix

Cancer of the cervix can be a deadly disease, but if it is found and treated early, it can usually be cured. Treatment to stop cancer is simple in the early stages. A trained health worker can freeze and destroy the abnormal cells (see page 384). If it is further along a doctor or nurse can remove or destroy the diseased parts of the cervix in a clinic or medical center. After treatment, the woman will usually get better. Hundreds of thousands of women die every year from this cancer, because they did not get treatment.

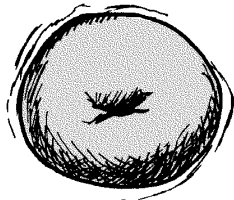
Why do so many women die if the disease is preventable and easily treated?

- Poor communities cannot afford to train health workers to test women for cancer or HPV and make sure women get the treatment they need.
- Rural and poor women may not be able to travel to or pay the fees at medical centers that do testing and treatment.
- Women and men do not know that they can prevent cancer of the cervix by protecting themselves from HPV. Wearing condoms can prevent both women and men from getting HPV.
- Some women cannot protect themselves from HPV because they do not have access to condoms. Some women cannot protect themselves because they are forced to have sex or to have unsafe sex. Some couples do not like to use condoms.

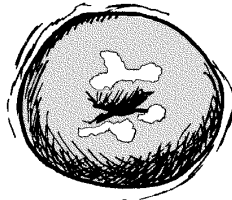
Cryotherapy treatment to prevent cervical cancer

Cryotherapy is a treatment that freezes any abnormal cells on a woman's cervix so they do not develop into cancer. Cryotherapy uses a tool called a cryoprobe with carbon dioxide or nitrous oxide gas to freeze the surface of the cervix. Freezing destroys the abnormal cells.

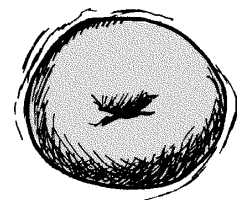
Cryotherapy is used after a woman has a positive vinegar test (page 380) or a positive Pap test (page 381).



Negative vinegar test
(no white patches)



Positive vinegar test
(white patches)



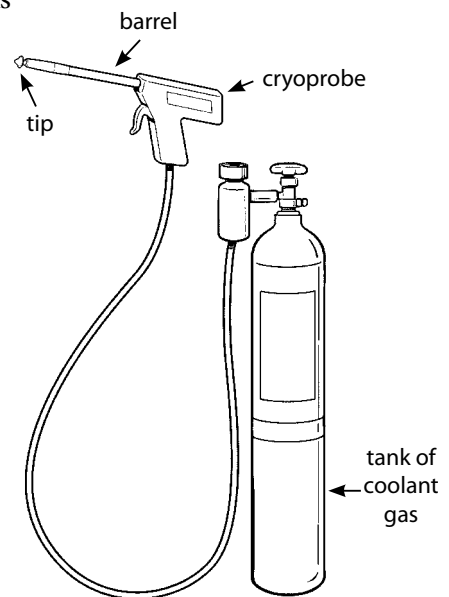
After cryotherapy treatment
cervix returns to normal
(no white patches)

Cryotherapy is very safe and has helped save many thousands of women's lives. It is not painful, though some women say they feel a mild cramping like menstrual cramps, and others say they feel cold in their vagina. Cryotherapy will not affect a woman's ability to enjoy sex or to have children, although a woman should not have vaginal sex or put anything inside her vagina for 4 weeks after cryotherapy treatment.

A woman should NOT get cryotherapy if she:

- is pregnant. It is best if she waits until 12 weeks after giving birth to have cryotherapy.
- has PID (see page 325). Once her PID has been treated, she can have cryotherapy.
- is currently having heavy monthly bleeding. Heavy bleeding can make it difficult to see the white patches on the cervix from the vinegar test. She should wait until her bleeding has lessened or ended to have cryotherapy.

The cryoprobe is connected to a tank of coolant gas. The barrel of the cryoprobe is inserted into the vagina and the tip is held against the cervix. The gas cools the cryotip which freezes the area, and destroys the abnormal cells. This is done twice, waiting 5 minutes between the 2 freezing treatments.



How to do cryotherapy

1. Insert a speculum into the vagina and do a vinegar test (see page 380). The vinegar will make any abnormal cells on the cervix show as white patches. Make sure the white patch:

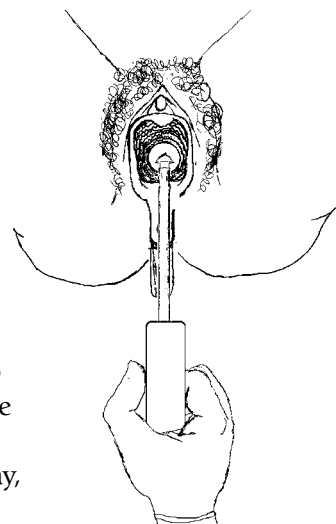
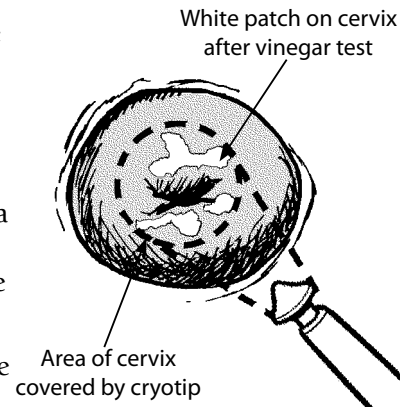
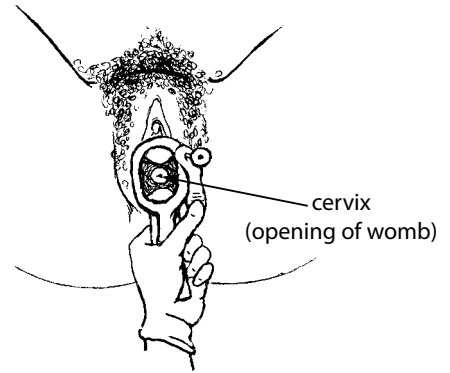
- **is not too large.** The white patch cannot go more than 2 mm beyond the area covered by the tip of the cryoprobe. (2 mm is about the thickness of a grain of rice.)
- **does not go inside the opening of the cervix.**

For either of these, cryotherapy will not work. The woman will need a different kind of treatment and should go to a medical center.

2. Insert the barrel of the cryoprobe into the vagina, and place the tip at the center of the cervix. Be careful not to let the probe touch the sides of the vagina. This can freeze the vaginal wall and may cause harm.

Note: If you cannot insert the cryoprobe without touching the vaginal wall, remove the speculum, cut a small hole in the tip of a condom and place it over the speculum. Re-insert the speculum. This will protect the walls of the vagina.

3. With the tip of the cryoprobe on the center of the cervix, check again to make sure the white patch does not go more than 2mm beyond the area covered by the tip.
4. Set a timer for 3 minutes. Start the gas coolant, keeping the tip of the cryoprobe pressed against the cervix. After about a minute or so, ice will form on the tip of the cryoprobe and on the cervix. The frozen area will turn white.
5. After 3 minutes, stop the flow of gas coolant. You will see that the frozen area goes 4 to 5 mm beyond the cryotip.
6. Do not remove the probe immediately. Wait until the cervix has thawed enough for the cryotip to fall away from the cervix by itself. If you remove the cryoprobe before the cervix is thawed, it will tear tissue off the cervix. After the cryotip falls away, gently rotate the probe to remove it.



7. Keep the speculum in place and let the cervix thaw for 5 minutes or until it becomes pink again.
8. After it has thawed, insert the cryoprobe again and place the cryotip at the center of the cervix. Set a timer for 3 minutes, and start the gas to begin a second time of freezing.
9. At the end of the second freeze, stop the flow of gas. Allow the cervix to thaw again and the cryotip to fall away before removing the probe. Gently rotate the probe on the cervix to remove it. The frozen area will be white and then returns to pink as it thaws.
10. Remove the speculum and clean and disinfect it and the cryoprobe. See the section on cleaning and sterilizing tools starting on page 59.

After cryotherapy a woman should avoid having sex or putting anything inside her vagina for 4 weeks. (Use pads or clean cloths, not tampons, for monthly bleeding or any vaginal discharge.) This is to prevent infection. If she cannot abstain from sex, advise her to use a condom.

She may have mild cramping like a menstrual period. She may have a watery discharge from her vagina for up to one month after. Reassure her that these are normal signs and not dangerous.

The woman should have another vinegar test for abnormal cells in 1 year to make sure the cryotherapy worked. If the vinegar test still shows white patches on her cervix, cryotherapy treatment can be done again.

**WARNING!**

Complications from cryotherapy are **very rare**, but if a woman has any of these signs after cryotherapy, get medical help:

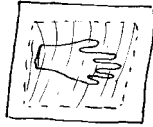
- Fever (temperature higher than 38° C / 101° F) for more than 2 days.
- Severe abdominal pain or strong cramping for more than 2 days.
- Heavy bleeding from the vagina for more than 2 days.
- Bad smelling discharge from the vagina.

—● **Note:** Thermal ablation, another method for destroying abnormal cells, uses heat to kill the pre-cancer. But as with cryotherapy, if patches of abnormal cells are large or go inside the opening of the cervix, it will not work and the woman should go to a medical center for a different type of treatment.

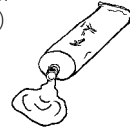
The bimanual exam (2-hand exam)

Feel the womb with 2 hands to check for infections or growths, or to learn how long a woman has been pregnant. To feel the womb, you will need:

very clean or sterilized plastic gloves



water-based lubricating jelly like *K-Y Jelly*, or clean water (do not use oil or petroleum jelly)



Ask the woman to urinate before you start.

1. Have the woman lie on her back with a pillow under her head. As you examine her, explain everything that you are going to do before you do it, remind her to relax, and stop the exam if she is in pain.
2. When the woman is ready, put on gloves and put some lubricating jelly on the first 2 fingers of your right hand (or your left hand if you are left-handed).



Ask the woman to take a deep breath to help her relax. Gently open the lips of her genitals with your left hand. With the palm of your right hand facing up, put your two lubricated fingers all the way into the woman's vagina.

3. Feel the cervix with your fingertips.

The cervix should be firm, round, and smooth. Normally, it feels about as hard as the tip of a nose. In the last months of pregnancy it feels soft, like lips. Sometimes at the end of pregnancy the cervix is a little open. If the woman has just had a miscarriage or an abortion, her cervix might be open.

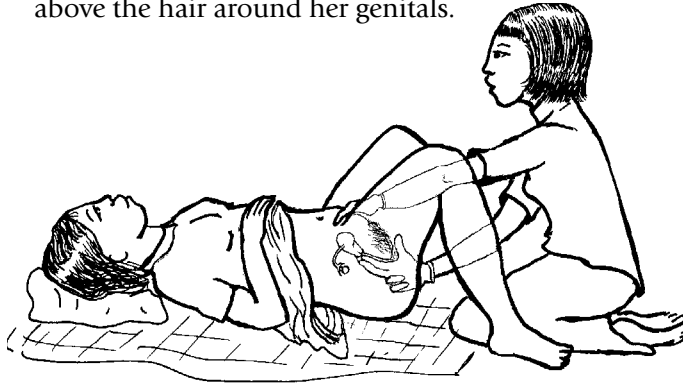
The cervix can be hard to find. If you cannot feel the cervix, ask the woman to cough or push down as if she were passing stool until the cervix touches your finger. It may also help if the woman lies more flat.

Take care not to touch the woman's clitoris, which is sensitive, or her anus, which has germs on it. Your thumb can easily touch the clitoris accidentally, so keep it to one side.

4. Check for pain in the cervix.

Put one of your fingers on each side of the cervix and move it side to side. This might feel strange to the woman, but it should not hurt. If it hurts, she might have an infection in her womb (see page 325) or a tubal pregnancy (see page 113). These are both very dangerous. If the cervix feels soft and is easy to move, the woman may be pregnant.

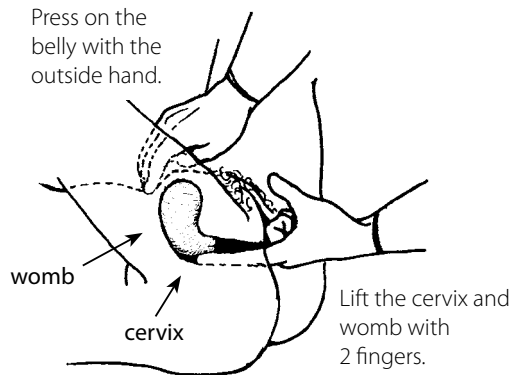
5. Put your left hand on the woman's belly, below her navel (bellybutton) and above the hair around her genitals.



This is how a bimanual exam would look if you could see the inside of a woman's body.

6. Feel the womb.

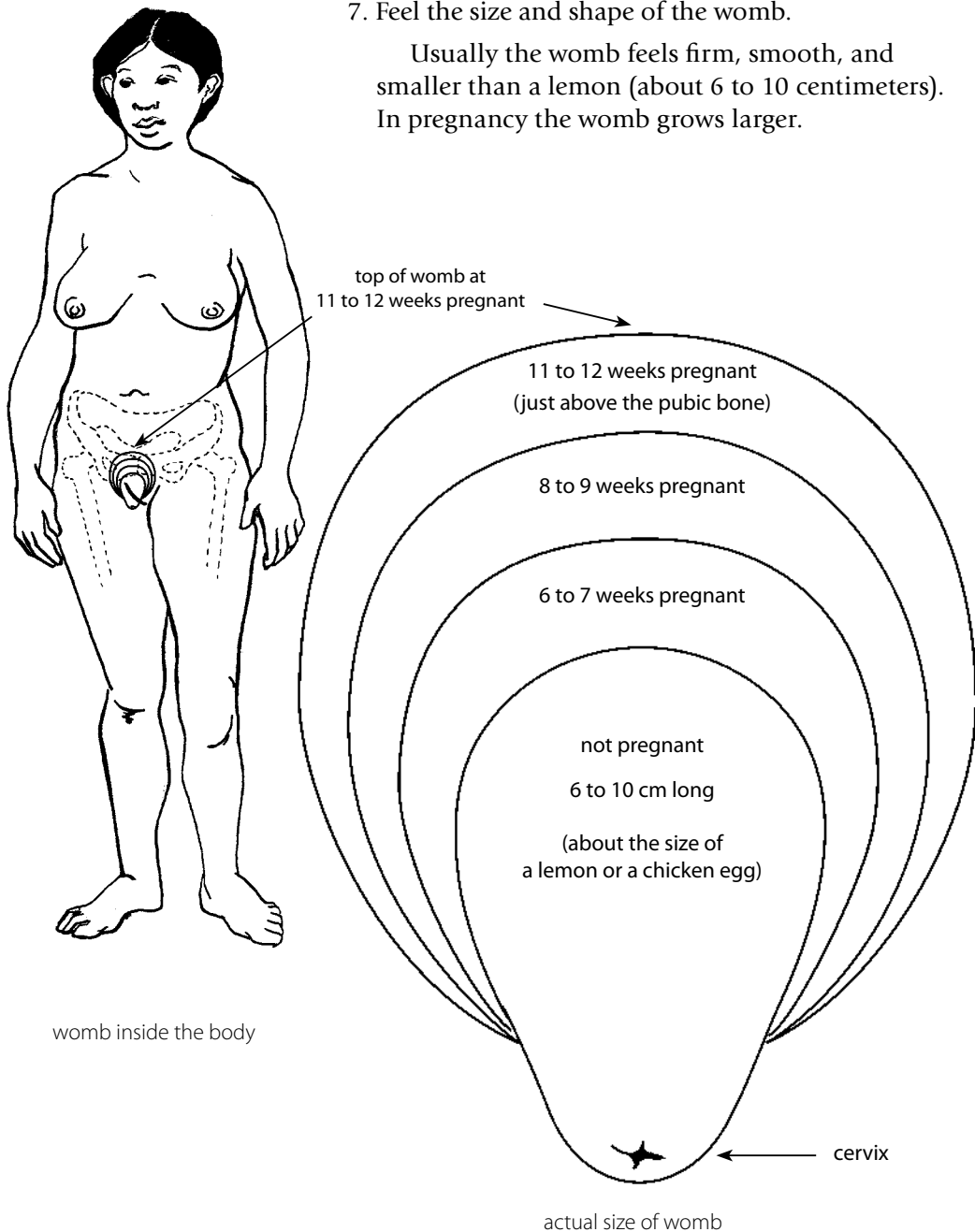
Put the 2 fingers that are in the vagina under the cervix. Lift up the cervix and womb with those 2 fingers. At the same time, press down on the woman's lower belly with your outside hand. Try to feel her womb between your hand and your 2 fingers. You will know that you are pressing on the womb when you feel the cervix move. If you do not feel the womb at first, try moving your hand around on her belly and pressing down in different places.



Feeling the womb takes practice. It is especially difficult to feel a woman's womb if she has strong belly muscles or if she has a lot of belly fat.

7. Feel the size and shape of the womb.

Usually the womb feels firm, smooth, and smaller than a lemon (about 6 to 10 centimeters). In pregnancy the womb grows larger.



To measure the womb after 12 weeks, see page 130.

You might feel lumps or growths on the womb. Some growths are not dangerous, but they may cause pain, heavy monthly bleeding, or bleeding between monthly bleedings. They are called fibroids. Other growths may be cancer of the womb. You cannot be sure the growths are not dangerous until the woman has more tests. If you feel growths on the womb, get medical help.

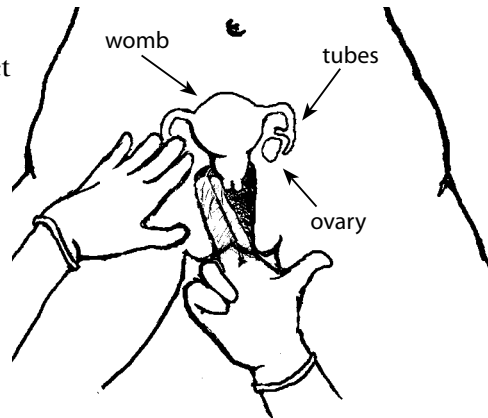
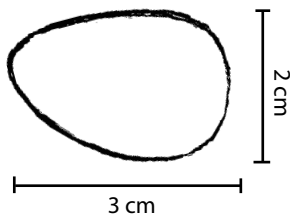
8. Feel the ovaries.

Finding and feeling the ovaries can be very difficult. It takes a lot of practice.

Put both your inside fingers on one side of the cervix and lift up the ovary. Move your outside hand to the same side of the woman's body as the inside fingers and slide your outside fingers down her belly. When you press hard, you can feel her ovary slip between your fingers.

You must push down deeply with your outside hand, so ask the woman to take a deep breath and let it go before you feel her ovary. Stop pushing if she is in pain!

An ovary is usually about this big.



After checking one side, move your hands to check the other ovary.

If you feel something bigger than 3 centimeters long and 2 centimeters wide, or if this exam hurts her a lot, she might have a growth on her ovary, or she might have a tubal pregnancy (see page 113). Get medical help.

Note: It is normal for a woman's ovary to get bigger and smaller every month. If you are not sure of the cause of a large ovary, try checking again in 6 weeks. It may be small again.

9. Take your fingers out of her vagina.

Hold the lips of her genitals open and ask her to cough or push down as if she were passing stool. Watch her vagina to see if anything bulges out. If it does, she could have a fallen womb or bladder, or part of her bowel could be bulging into the vagina. Get medical advice.

After the bimanual exam, give the woman a clean cloth or paper to wipe off the jelly. Explain to her that she will have some extra discharge (the jelly) or a little blood after the exam.

Tell the woman what you found during the pelvic exam. Make sure to answer any questions the woman has.

