THIS FORM IS INTENDED TO HELP YOU EVALUATE PATIENTS WITH PELVIC PAIN.

THE FORM WILL WALK YOU THROUGH THE PHYSICAL EXAM AND PROVIDE GUIDANCE ON FORMULATING AN ASSESSMENT AND PLAN.

THIS FORM CAN BE USED FOR DOCUMENTATION, HOWEVER, NOTE THAT ***THE PATIENT HISTORY IS COLLECTED THROUGH THE PATIENT INTAKE SURVEY.***IF YOU CHOOSE TO USE THIS FORM FOR DOCUMENTAITON PURPOSES, YOU WILL NEED TO ADD THE PATIENT INFORMATION FROM THE HISTORY FORM.

ALTERNATIVELY, YOU CAN USE THIS FORM FOR PLANNING AND THINKING PURPOSES AND USE THE ***ELECTRONIC HEALTH RECORD TEMPLATE*** FOR DOCUMENTATION.

***PATIENT IDENTIFIERS***

*Note: If you are collecting HIPAA / HPI you must ensure these forms are secured*

|  |
| --- |
| **Physical Examination Date:**Click or tap here to enter text.  **Last Name:** Click or tap here to enter text.  **First Name:** Click or tap here to enter text.  **Last 4 SSN:**Click or tap here to enter text. |

***EXAMINATION***

**General Appearance**: ***(Check all that apply)***

Well-appearing Ill-appearing Tearful Depressed

Normal weight Underweight Overweight

Abnormal Gait Other:Click or tap here to enter text.

**Head, ears, nose and throat:** WNL Other: Click or tap here to enter text.

**Lungs:** Normal Other: Click or tap here to enter text.

**Heart:** Normal Other: Click or tap here to enter text.

**Abdomen:**

Normal Non-tender Tender Inguinal tenderness

Mass Inguinal bulge Suprapubic tenderness Guarding Rebound Distention

Sensory abnormality (allodynia or hyperalgesia) Location:Click or tap here to enter text.

Positive Carnet’s sign

Trigger Points: Number:Click or tap here to enter text. Location:Click or tap here to enter text.

Surgical scars: Number: Click or tap here to enter text. Location:Click or tap here to enter text.

Surgical scar pain present (describe location and severity):Click or tap here to enter text.

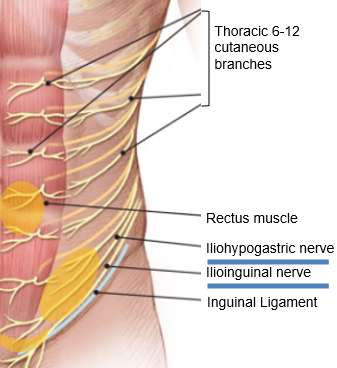
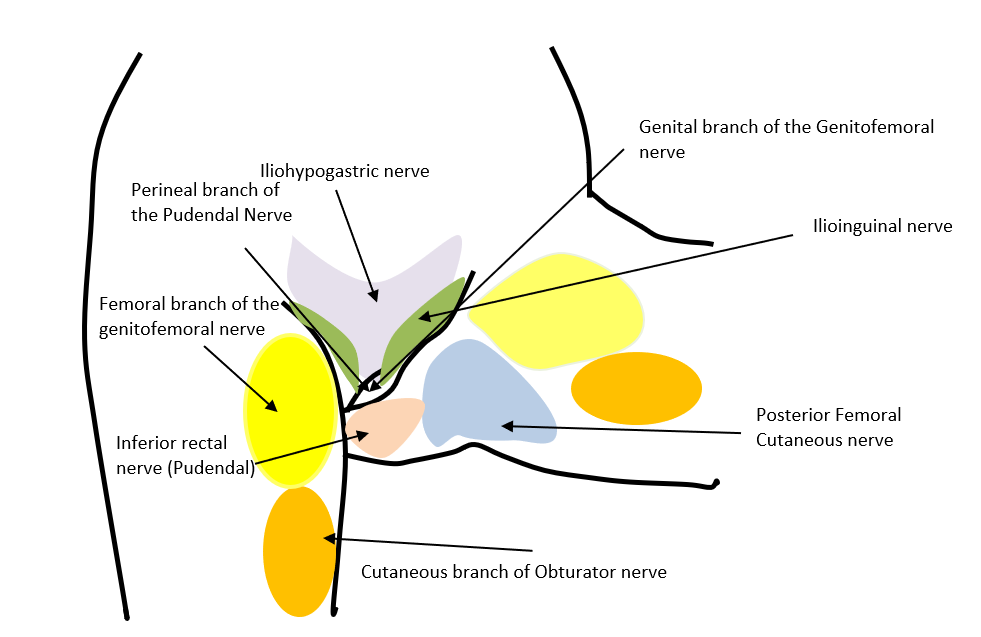
Other, including pain severity and radiation patterns, describe all abnormalities here:Click or tap here to enter text.

**Musculoskeletal (External):**

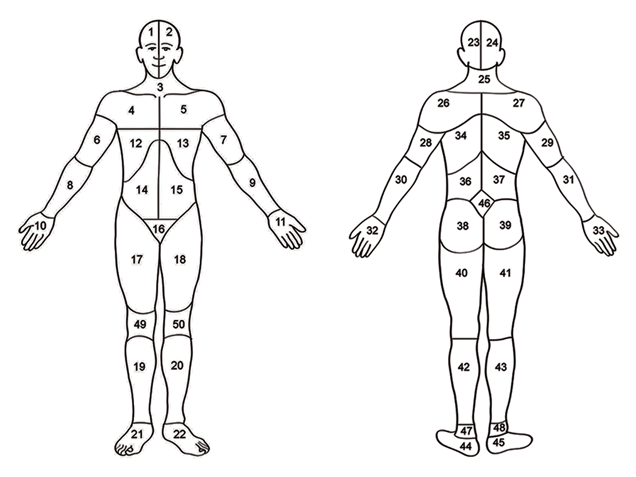
|  |  |  |
| --- | --- | --- |
| Lumbar range of motion | Normal | Painful with flexion  Painful with extension  Painful with rotation  Painful with side bending |
| Sacroiliac joints | Normal | Painful right  Painful left |
| Pubic symphysis | Normal | Painful with palpation |
| Active straight leg raise test | Normal | Painful right  Painful left |
| Hip flexion | Normal | Painful right  Painful left |
| Hip Ab/Adduction | Normal | Painful right  Painful left |
| Posture | Normal | Altered |
| Gait | Normal | Knee pain  Leg discrepancy  Other:Click or tap here to enter text. |
| Other abnormalities noted:Click or tap here to enter text. | | |

**Neurologic (External):**

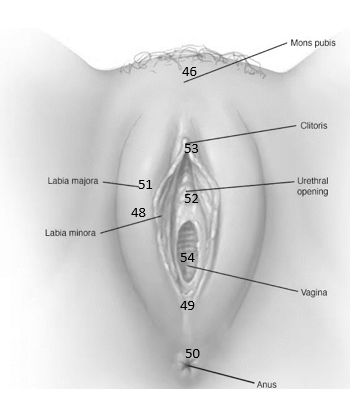
|  |  |  |  |
| --- | --- | --- | --- |
| **Distribution** |  | **Right** | **Left** |
| Iliohypogastric | Normal | Allodynia  Hyperalgesia | Allodynia  Hyperalgesia |
| Ilioinguinal | Normal | Allodynia  Hyperalgesia | Allodynia  Hyperalgesia |
| Genitofemoral | Normal | Allodynia  Hyperalgesia | Allodynia  Hyperalgesia |
| Posterior femoral cutaneous | Normal | Allodynia  Hyperalgesia | Allodynia  Hyperalgesia |
| Lateral femoral cutaneous | Normal | Allodynia  Hyperalgesia | Allodynia  Hyperalgesia |
| Pudendal | Normal | Allodynia  Hyperalgesia | Allodynia  Hyperalgesia |
| Obturator | Normal | Allodynia  Hyperalgesia | Allodynia  Hyperalgesia |
| Anal wink reflex | Normal | Absent |  |

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**Body Pain Map:**

**List the numbers of all the sites where the patient reports pain:**Click or tap here to enter text.

**Add comments, including pain severity and radiation patterns**:Click or tap here to enter text.

**External Visual Examination of Genitalia:**Normal Atrophy

Discharge Bleeding

Masses, Lesions; Describe:Click or tap here to enter text.

12 o’clock

Hyperkeratosis; Location: Click or tap here to enter text.

Tenderness; Location:Click or tap here to enter text.

Vestibular erythema; Location:Click or tap here to enter text.

Posterior fourchette (49)

Allodynia; Location:Click or tap here to enter text.

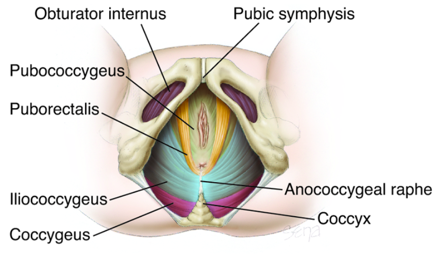
Hyperalgesia; Location:Click or tap here to enter text.

6 o’clock

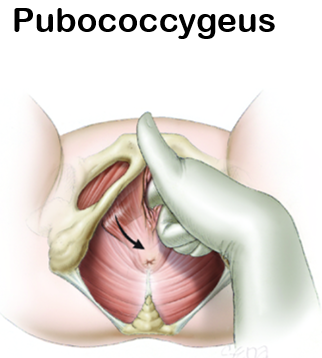
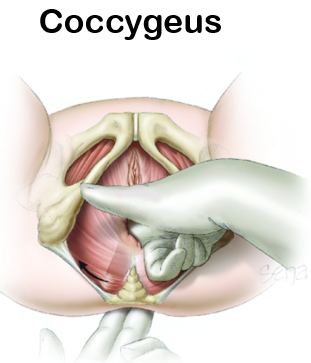
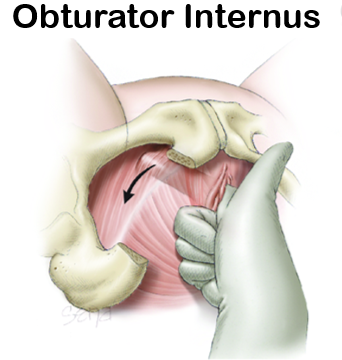
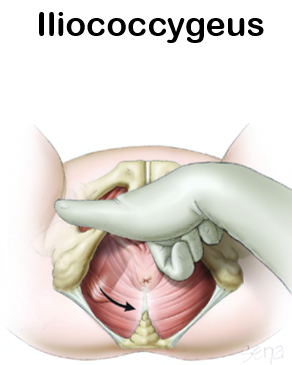
**Note, describe pain location, radiation and abnormalities in further detail here using location numbers**:Click or tap here to enter text.

**Single Digit Pelvic Floor Muscle Examination** **(Note- assess tenderness, tone, strength and voluntary control):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Muscle** | **Tenderness**  **(0-4)** | **Baseline Tone (0-4)** | **Strength (0-4)** | **Voluntary control** |
| Right obturator internus | 0 1  2 3 4 | 0 1  2 3 4 | 0 1  2 3 4 | Present  Absent |
| Left obturator internus | 0 1  2 3 4 | 0 1  2 3 4 | 0 1  2 3 4 | Present  Absent |
| Right Pubococcygeus | 0 1  2 3 4 | 0 1  2 3 4 | 0 1  2 3 4 | Present  Absent |
| Left Pubococcygeus | 0 1  2 3 4 | 0 1  2 3 4 | 0 1  2 3 4 | Present  Absent |
| Right Coccygeus | 0 1  2 3 4 | 0 1  2 3 4 | 0 1  2 3 4 | Present  Absent |
| Left Coccygeus | 0 1  2 3 4 | 0 1  2 3 4 | 0 1  2 3 4 | Present  Absent |
| Right Iliococcygeus | 0 1  2 3 4 | 0 1  2 3 4 | 0 1  2 3 4 | Present  Absent |
| Left Iliococcygeus | 0 1  2 3 4 | 0 1  2 3 4 | 0 1  2 3 4 | Present  Absent |
| Right bulbocavernosus | 0 1  2 3 4 | 0 1  2 3 4 | 0 1  2 3 4 | Present  Absent |
| Left bulbocavernosus | 0 1  2 3 4 | 0 1  2 3 4 | 0 1  2 3 4 | Present  Absent |

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Click or tap here to enter text.

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**Coccyx:** Tender Non-tender

**Tenderness with compression of ischial spine:** Non-tender right Tender right

Non-tender left Tender left

***If tender, is the pain in the distribution of the pudendal nerve*** when the ischial spine is compressed (Valleix sign): Yes No

**Internal Pelvic Examination:**

|  |  |  |
| --- | --- | --- |
| Cervix | Normal | Tender; Describe:Click or tap here to enter text.  Mass; Describe:Click or tap here to enter text. |
| Urethra | Normal | Tender; Describe:Click or tap here to enter text.  Mass; Describe:Click or tap here to enter text. |
| Bladder | Normal | Tender; Describe:Click or tap here to enter text.  Mass; Describe:Click or tap here to enter text. |
| Rectovaginal vault | Normal | Tender; Describe:Click or tap here to enter text.  Mass; Describe:Click or tap here to enter text. |
| Vaginal apex (if cervix is absent) | Normal | Tender; Describe:Click or tap here to enter text.  Mass; Describe:Click or tap here to enter text. |

**Bimanual Examination:**

***Uterus:*** Normal Absent

Tender Anterior location Posterior location

Enlarged size, enter size: Click or tap here to enter text.

Irregular shape Fixed Firm

Prolapse, describe stage: Click or tap here to enter text.

***Adnexa:*** Normal Absent right Absent left

Tender right Tender left

Fixed right Fixed left

Enlarged right: Click or tap here to enter text.

Enlarged left: Click or tap here to enter text.

**Rectal:** Normal Nodules Hemoccult positive

Tenderness Hemorrhoids Other:Click or tap here to enter text.

**Additional Comments:** Click or tap here to enter text.

***ASSESSMENT AND PLAN***

**Suspected Initial Diagnosis** ***(Check all that apply)***

|  |  |  |
| --- | --- | --- |
| **Uro-Gynecologic** | | |
| Endometriosis  Adenomyosis | Dysmenorrhea | Fibroids |
| Ovarian cyst(s) | Ovarian remnant | Pelvic congestion syndrome |
| Dyspareunia | Premenstrual Syndrome | Genitourinary syndrome of menopause |
| Pelvic organ prolapse  Cystocele  Rectocele  Cervical prolapse  Uterine prolapse | Vulvodynia  Generalized  Localized  Spontaneous  Provoked | Vulvar pain with known etiology, list: |
| IC/BPS | Urinary urgency | Urinary frequency or Overactive Bladder |
| Urinary incontinence | Urinary tract infection | Urethral mass |
| Prostatitis (bacterial or non-bacterial) | Urethritis | Prostate mass or BPH |
| Sexually transmitted infection | Orchitis, Scrotal pain | Urethral or bladder stones |
| **Gastroenterologic** | | |
| IBS-Diarrhea | IBS-Constipation | IBS-Mixed |
| Diarrhea | Constipation | Fecal incontinence |
| Dyschezia | Inflammatory bowel disease | Diverticulosis/itis |
| **Neurologic** | | |
| Neuralgia  List site: | Pudendal neuropathy |  |
| **Non-Genital Pain Syndromes** | | |
| Chronic fatigue | Fibromyalgia | Migraines / Headaches |
| TMD | Chronic low back pain |  |
| **Musculoskeletal** | None | |
| Pelvic floor muscle dysfunction | Myalgia |  |
| **Psychosocial** | | |
| PTSD | Sexual trauma / abuse | Physical abuse |
| Depression | Anxiety | Suicide ideation or intent |
| Sleep disorder | Catastrophizing | Rumination |
| Substance abuse | Opioid use Opioid abuse Opioid side effects |  |
| **Pain Descriptors** | | |
| Pelvic Pain | Chronic pelvic pain | Chronic pain syndrome |

**Other Diagnoses not listed above:**

**Recommended treatments**

Acupuncture Massage Nutrition/Diet Physical Therapy Biofeedback

Trigger Point Injections TENS Unit Botox Injections Nerve Blocks

Epidural Sex Therapy Joint Injections Neurostimulation

Mental Health Bladder instillations Aqua Therapy Radio Frequency Ablation

Cognitive Behavioral Therapy Percutaneous Tibial Nerve Stimulation NONE

Hormonal treatment-- if yes, what type of hormonal treatment? (***Check all that apply)***

Pills Patch Ring  Injections Estrogen Progesterone

Other treatments:Click or tap here to enter text.

**Recommended Pharmacotherapy**

|  |  |  |
| --- | --- | --- |
| Medication | Dose | Instructions for use |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

NONE

**Recommended Surgery**

|  |  |
| --- | --- |
| Surgery Name | Primary Indication for surgery |
|  |  |
|  |  |
|  |  |

NONE

**Referrals**

Gastroenterology Urology Urogynecology Reproductive Endocrinology and Infertility

Endocrinology Medicine Primary care Pain management NONE

Other:Click or tap here to enter text.

**Additional psychosocial or medical factors contributing to pain:**

Click or tap here to enter text.

**Additional medical co-morbidities that impact pain not listed above in the ‘diagnosis’ section:** Click or tap here to enter text.

**Shared Decision Making and Goal Setting**

**Patient goals (should be focused and attainable)**

Short-term:Click or tap here to enter text.

Long-term:Click or tap here to enter text.

Potential obstacles to attaining goals identified by patient and the provider:Click or tap here to enter text.

**Shared decision making**

Patient selected therapies: Click or tap here to enter text.

Treatments recommended by the provider but not accepted by the patient: Click or tap here to enter text.