

UC San Diego Chaperone Policy

At UC San Diego Student Health Services, our mission is to facilitate the retention, academic advancement and graduation of students by maintaining their maximum health and well-being. One way to do this is through our Chaperone Policy*, which sets a consistent standard for patient care.

A chaperone is a trained healthcare professional who may assist patients and providers (Physician, Nurse Practitioners or Physician Assistant) in completing sensitive exams and procedures in a consistent, safe and respectful manner. A chaperone will always be present during sensitive exams/procedures for all adult and vulnerable patients as defined in our policy. Individuals may decline a chaperone if they wish. A chaperone is always available for any patient to utilize during any exam/procedure.

A trained chaperone is present in order to provide comfort and reassurance through the exam/procedure.

- This includes assuring the patient is appropriately gowned or covered, communicating to the patient what will happen and why, monitoring the patient for signs of discomfort during the exam/procedure and assisting with other patient needs such as dressing/undressing.

Every effort will be made to ensure the chaperone is the gender that the patient feels most comfortable with.

**Policy updated 3/17/22*

Online
Chaperone
Policy



Clinical Breast Exam (CBE)

A CBE is performed when there is a breast concern such as pain or lumps. Providers may also offer screening CBEs to patients ages 25+ based on personal and family risk assessment. CBEs may include:

- **Visual Exam:** Patients 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. May be conducted in a seated position lying on an exam table.
- **Manual Exam:** The provider uses the pads of the finger to palpate 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.

Pelvic Exam Patients typically have a first pelvic exam upon experiencing symptoms such as discharge or pain, or at the age of 21. Pelvic exams may include:

- **External Exam:** Visual inspection and palpitation of 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 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. Additional fluid may be collected for STI testing, evaluating vaginal discharge, or diagnosing infection.
- **Diagnosing Causes of Pain/Unusual Symptoms—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 1-2 gloved fingers into the vagina while using the other hand to gently apply pressure and palpate 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 Exams

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 visually examine the anus and surrounding area to look 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.

Urogenital Exams (Sensitive Exams of the Penis and Scrotum)

Urogenital exams may be performed to check for 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:** A visual examination and palpitation of 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 fingers through the patient's scrotum while the patient is standing.
- **Diagnosing Causes of Pain or Unusual Symptoms—Penile 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. The provider may also examine the opening of the urethra and may use a swab to collect a lab sample, possibly pressing along the shaft to express potential fluid. Patients may swab the area themselves if they are comfortable and prefer to do so. Providers may on occasion check for scarring (Peyronie's disease) by squeezing the muscle of the penis.



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