Pelvic Organ Prolapse Referral

<u>Diagnosis/Definition</u>	
	Displacement of pelvic organs resulting in protrusion into the vaginal or rectal wall. Symptoms of pelvic organ prolapse may include a sensation of vaginal pressure, fullness or heaviness; pelvic, vaginal, bladder, rectal, lower abdominal or sacral back pain; vaginal bleeding or spotting; coital difficulty; and voiding and defecatory difficulties. The patient often feels a bulge in the lower vagina or the cervix protruding through the vaginal introitus Pelvic organ prolapse noted on physical exam.
Indicat	cions for Referral
	Symptomatic Pelvic Organ Prolapse: Sexual dysfunction, voiding difficulty, urinary frequency, urgency, or incontinence; dyspareunia, constipation, hydronephrosis; obstructive nephropathy, and patient desires intervention, e. g., wants GYN therapy.
<u>Specia</u>	Ity Care Referral
To be	completed prior to placing referral:
	Complete women's health exam Ensure cervical cancer screening is current. If not obtain screening sample Provide comprehensive cervical screening history Assess the impact of symptoms on patient's quality of life. Prolapse that is not bothersome to the patient may not require treatment. Postvoid residual urine volume If chronically constipated, then address constipation management Encourage smoking cessation Referral to Nutrition and Exercise, if BMI > 30 If postmenopausal bleeding is present – obtain pelvic US
Provid	er Information
	Recommendations to decrease the chance of progression of the prolapse include Kegel exercises (See Pelvic Floor Strengthening below), weight loss if necessary, smoking cessation, and attention to lifting of heavy objects.
	Therapy may include expectant management, physical therapy, pessary fitting, or surgery. Patient must be tobacco free for 8 weeks, if she becomes a candidate for certain reconstructive surgeries
	If symptomatic rectal prolapse — a separate referral to General Surgery is indicated

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Pelvic Floor Muscle Strengthening

Helpful Instructions for Doing Kegel Exercises

Kegel exercises are frequently discussed in childbirth classes or written about in magazine articles. Unfortunately, because pelvic muscles are hidden from view, it is difficult to know if you are doing them correctly. Some tips that can help you find the right muscles include:

- Try to stop your urinary stream. If you succeed, then you have identified the right muscles to exercise. This is a learning tool. Do not stop your urine frequently as there is concern that this may create problems with bladder emptying.
- Imagine you are going to pass gas, then, squeeze the muscles that would prevent that
 gas from escaping from your rectum. Exercising the muscles around the rectum will also
 strengthen those around the vagina and under the bladder.
- Use a hand mirror to look at your vaginal opening and the perineum (the muscle wall between the vagina and rectum). You should see the perineum lift when you contract your pelvic muscles.
- While lying or sitting, place one finger inside your vagina. Squeeze as if you were trying
 to stop urine from coming out. You should feel your finger lifted and squeezed if you are
 correctly contracting your pelvic muscles.
- Do not hold your breath while exercising.
- Remember not to tighten your stomach and back muscles or squeeze your legs together. Those areas should be relaxed as you isolate and contract *just* your pelvic muscles.
- You don't have to do this alone! If you are just not sure that you are doing the exercises
 correctly ask your doctor or their nurse at a pelvic exam to check if your squeeze is
 working the right muscles.

GET A PERSONAL TRAINER FOR YOUR PELVIC FLOOR!

Ask your doctor or nurse for a referral to a physical therapist with expertise in pelvic floor muscle rehabilitation. They are trained to evaluate your back and abdominal strength, your gait and your posture. These all effect how your pelvic muscles work.

Recommended Routine

- Start by pulling in and holding a pelvic muscle squeeze for 3 seconds then relax for an equal amount of time (3 seconds).
- Do this for 10 repetitions three times a day
- Increase your contraction hold by 1 second each week until you are contracting for a 10 second squeeze.
- Remember to rest and breathe between contractions.
- When you start, do the exercises while lying down. As you get stronger; do an exercise set sitting and standing.