What to expect during a routine sensitive exam
Frequently asked questions
At UCR Student Health (SHS), we know some medical exams and procedures are more sensitive than others. We want you to be comfortable during all exams and procedures.

We have trained chaperones to help make sure sensitive exams and procedures are done in a safe, comfortable, and professional way.

If you ever feel uneasy or need more information about what will happen during your exam, please ask us. We are here to help.
What is considered a “sensitive” exam or procedure?

Any physical exam of the male or female genitals or rectum or female breasts is considered “sensitive.” These include exams of:

- Female breasts
- Vulva and vagina
- Rectum
- Pubic/groin region (for a hernia)
- Penis and scrotum

What does the chaperone do?

The chaperone is a specially trained member of the SHS team. Their job is to ensure patient and provider comfort, safety, privacy, security and dignity during these exams or procedures. The chaperone will stand in a location where he or she can observe what is going on and assist as needed.

Can I request a chaperone for exams that are not sensitive in nature?

Yes. You can request a chaperone for any type of exam.

Can I decline to have a chaperone present during my exam or procedure?

Yes. Adults and patients who are 16 years and older and can make their own medical decisions can decline a chaperone. Patients can opt out when they arrive at their appointment.

The health care provider may also decide not to perform an exam or procedure unless a chaperone is present.

Can I request a chaperone of a specific gender?

Yes. If you prefer a chaperone of a specific gender, let us know when you arrive for your appointment. We will do our best to honor your request.

If you have any questions or concerns, please speak to the clinic manager.
Your privacy

We value your privacy and respect your right to dignity during all exams.

As a patient at SHS, you should expect:

1. The door will be closed during your exam. Only the people involved in your exam should be present during your care.

2. The provider and/or staff member will wash their hands or use hand sanitizer before and after delivering care. Gloves will be worn whenever there is a chance to encounter open wounds, blood and/or bodily fluids. Gloves are not required for touching skin only.

3. The provider and/or staff member will explain the exam or procedure to you. They may ask questions about your medical history that are related to the exam or procedure.

4. The provider and/or staff member will ask permission prior to touching you. They will explain what to expect during your visit.

5. A medical chaperone will be provided for all sensitive exams and procedures, and if requested.

Please speak up if you feel uncomfortable or notice any odd behavior during your exam or procedure.
Sensitive exams

Sensitive exams involve the breasts (in female patients), rectum and/or genitals in any patient. They should always be done in a serious and private way. If you feel uneasy at any time, speak up.

For ALL sensitive exams, you should expect:

• An explanation of the exam, including why it is needed, what the provider will do, and what it may feel like.
• Privacy to undress. You should NOT be asked to undress in front of a provider or other staff member.
• You should be offered a covering (gown or sheet/drape) if your body is exposed.
• The provider should NEVER make sexual remarks, hints, or jokes.
• You have the right to refuse any portion of an exam or stop it at any time. You are in charge of your body.

Below are more detailed descriptions of what to expect during each of the sensitive exams.

Breast exam

A clinical breast exam is done to evaluate the breasts for changes or problems. The provider will first look at your breasts and then feel your breasts, your underarm area, and the area below your breastbone as part of the exam. At times, a provider may need to squeeze your nipple to check for discharge.

• Expect an explanation before all breast exams.
• Unless a medical condition or concern exists, it is not appropriate for a provider to comment on the aesthetic appearance of breasts.
• Patients only need to undress from the waist up for a breast exam.
• Providers do NOT need to wear gloves for a breast exam.
• A provider may need to move your hair behind your shoulders or move a necklace to the back to better see your breasts. These gestures should be explained to you.
• You have the right to refuse any portion of an exam or stop it at any time. You are in charge of your body.
Exam of the vulva and vagina (pelvic exam)

An exam of the vulva and vagina is often called a pelvic exam. It may involve both an external and internal inspection as well as touching. Pelvic exams are used to screen for cancer, collect samples if an infection is suspected or to help diagnose if there is bleeding, pain, or other symptoms.

- Expect an explanation before all pelvic exams.
- Unless there is a medical condition or concern, it is not appropriate for a provider to comment on the aesthetic appearance of a patient’s vulva or vagina.
- The provider will wear gloves.
- The provider should NOT repeatedly move their fingers in and out of the patient’s vagina.
- A duck bill-shaped plastic or metal instrument, called a speculum, is often used for the internal vaginal exam. The provider should inform you before inserting it. It should be gently inserted and opened to provide visual access into the vagina.
- Routine vaginal exams (with a speculum) are typically not required until age 21, unless the patient has specific symptoms, conditions, or medical risks. The patient’s doctor should discuss risks with them prior to the exam.
- During pregnancy, pelvic exams are routinely performed during the first visit, during the last trimester, and if there are any changes in the patient’s health or that of the baby.
- You may refuse any part of the exam or ask for it to be stopped at any time. You are in charge.

In some instances, a bimanual or digital vaginal exam may be clinically indicated to be performed prior to the speculum exam.
Rectal exam

A rectal exam may be necessary to make a diagnosis for patients who have symptoms, including but not limited to, pain in the abdomen, blood in their stool, changes in bowel habits, or urinary symptoms. It may also be necessary to collect a sample to run a test for suspected sexually transmitted diseases of the rectum.

A rectal exam may be done with a patient lying on their back, lying on their side, lying face down, or kneeling on or over an exam table.

External exam

The provider will examine the anus and the area around the anus. They look for sores, rashes, or other lesions. The chaperone or a medical assistant may be asked to move a light so the provider can see the area better. If testing for infections, a swab may be placed about 1 inch into the anus/rectum, rotated gently, and then removed.

Digital exam

The provider inserts one gloved and lubricated finger into the anus to feel for any lumps or anything abnormal. They may also push firmly on the prostate gland, if present, to check for pain, tenderness, or nodules on it.

Anoscope exam

To examine the rectum inside, the provider may insert a lubricated rigid, hollow instrument, called an anoscope, into the anus. The chaperone or medical assistant may be asked to move a light so the provider can see the area better.

You may refuse any part of the exam or ask that it be stopped at any time.
Exam of the penis, scrotum and testicles

The penis, testicles and/or scrotum may be examined if a patient is having pain, swelling or discharge, has sores or other symptoms, or as part of a normal skin and physical exam. It may also be done to check for a hernia.

- Expect an explanation before all exams.
- Unless there is a medical condition or concern, it is not appropriate for a provider to comment on the aesthetic appearance of a patient’s penis, scrotum or testicles.
- The provider will wear gloves when feeling the penis and testicles.
- You may refuse any part of the exam or ask for it to be stopped at any time. You are in charge.

Penis exam

- During this part of the exam, the provider will look and touch the penis. This includes the skin, moving the foreskin, touching the tip and urethra (the urine opening in the penis).
- If the patient is not circumcised, the provider may ask them to pull back the foreskin or the provider may do this to look for sores and problems.
- The provider may feel and press all surfaces of the penis, to check for sores or problems.
- The provider may examine the opening of the urethra, called the urethral meatus. They may use a swab to gently collect a sample of any discharge.
- The provider may press along the shaft of the penis to see if they can press out any fluid.

Scrotum and testicle exam

- During this part of the exam, the provider will do a visual and hand exam of the testicles and scrotum.
- The provider may feel the testicles for size, irregularities, and tenderness. They may also feel along the spermatic cord, which contains the spermatic artery and vein, looking for any problems.
Exam of the pubic/groin area (hernia exam)

A hernia is a weak spot where the bowel might squeeze out. They are common in the groin area.

- The provider will do a complete visual exam of the scrotum, groin, and hip crease to look for any problems.
- The provider will feel the groin, inner upper thigh crease, lower abdomen, and hip area. They will feel the testicles, where there are lymph nodes and the spermatic cord inside the scrotum.
- During a hernia exam, while the patient is standing or lying down, the provider will place his or her fingers up against the abdominal wall and scrotum. The provider may ask the patient to cough or bear down to increase the abdominal pressure to see if they can feel the weak spot or opening.
- Gloves may or may not be worn when the provider feels the patient’s abdominal wall.
- You can refuse any part of the exam or ask that it be stopped at any time. You are in charge.
University of California Notice of Nondiscrimination

The University of California and SHS are committed to treating each community member with respect and dignity.

Across all its locations, including SHS clinical settings, the University prohibits discrimination and harassment, including sexual assault and other forms of sexual harassment.

SHS provides equal opportunities for all patients, applicants, employees, faculty, and students regardless of sex, gender identity or expression, sexual orientation, or other legally protected characteristics.

For more on the University’s commitment to integrity, accountability, and respect for all members of our community, please see the University’s Statement of Ethical Values and Standards of Ethical Conduct at Code of Conduct

How to report sexual harassment

If you have experienced sexual harassment, please report it.

The UCLA Title IX Office protects people’s privacy, while also fulfilling its obligations to respond appropriately to all reports it receives about sexual harassment. In some situations, certain laws and University policies may require disclosure of reports to others, such as other University officials, licensing boards, law enforcement, or other agencies.

To speak with a Title IX officer, please call (951) 827-7070. You may also submit an online report at reporting student harassment

These offices are not required to report instances of sexual harassment to the University. The University reviews all reports of sexual harassment in accordance with the University’s Sexual Violence and Sexual Harassment Policy and other applicable policies.

https://titleix.ucr.edu/reporting
SHS is interested in hearing about your overall care experience. To provide general feedback about your visit or experience with a SHS provider or to communicate any complaint about unprofessional conduct, please submit feedback at shspatientadvocate@ucr.edu

**To obtain your medical records**
You may obtain a copy of your medical records in person or by mail. For detailed instructions, visit the SHS Medical Records page at shsmedrecords@ucr.edu

**For language, hearing, and visual access assistance**
We provide free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats (large print, audio, and other accessible electronic formats)

UCR SDRC

**Reporting obligations of UC personnel**
All University employees are responsible for creating and maintaining a safe, supportive, and respectful environment for patients and colleagues.

Under some circumstances, SHS faculty and staff members are required by University policy to immediately report possible sexual harassment to the Title IX office.

Even those who are not subject to a mandate are urged to immediately report information regarding possible sexual harassment directly to the Title IX office or anonymously to the compliance hotline (951) 827-7070

For more information about your responsibility to report sexual harassment as a member of the UC community, go to reporting student harassment.