

Frequently Asked Questions

What is a pelvic exam?

A [pelvic exam](#) is a physical examination of your pelvic organs. These include your external genitals, such as the [vulva](#) , and your internal organs, such as the [vagina](#) , [cervix](#) , and [uterus](#) .

A pelvic exam is one of many ways to assess your sexual and reproductive health. This exam can be done by an [obstetrician–gynecologist \(ob-gyn\)](#) or other health care professional.

What happens during a pelvic exam?

A typical pelvic exam only lasts a few minutes. You undress below the waist and cover your lower body with a sheet or gown. You lie down on the exam table with your legs raised in foot rests or leg rests called stirrups.

A pelvic exam generally has three parts:

- 1. Looking at the vulva**—Your ob-gyn looks at your external [genitals](#) .
- 2. Looking at the vagina and cervix**—Your ob-gyn inserts a [speculum](#) into your vagina. This tool keeps the walls of your vagina open during the exam. This is when a [Pap test](#) (also called a Pap smear) or a test for [human papillomavirus \(HPV\)](#) may be done, if you need [cervical cancer screening](#).
- 3. Checking the internal organs with a gloved hand**—Your ob-gyn removes the speculum, places one or two gloved fingers into your vagina, and pushes their

fingers up toward your cervix. The other hand presses on your abdomen from the outside. This helps your ob-gyn feel your internal organs, including your uterus and ovaries.

Sometimes you also may need a [rectovaginal exam](#) . This may be done to check for cancer or other health problems. For a rectovaginal exam, your ob-gyn will insert one gloved finger into your vagina and another into your rectum.

When should I have a pelvic exam?

A pelvic exam can be recommended for several reasons, including the following:

- **If you have symptoms**—Symptoms such as abnormal bleeding, abnormal vaginal discharge, pelvic pain, or pain during sex could point to a gynecological problem. A pelvic exam can help your ob-gyn diagnose the issue.
- **As part of a pelvic procedure**—Pelvic exams are recommended when getting an [intrauterine device \(IUD\)](#) or having an [endometrial biopsy](#) .
- **When you're pregnant**—A pelvic exam is typically performed at your first [prenatal care](#) visit.
- **If you have a history of gynecological conditions**—Certain conditions, such as cervical [dysplasia](#) , may require regular screenings.

When is a pelvic exam not needed?

A pelvic exam is not needed to screen for [sexually transmitted infections \(STIs\)](#) . You also don't need one to get [birth control](#) , other than an IUD.

Adolescents usually don't need a pelvic exam at their first gynecologic visit unless they are having problems.

Do I need an annual pelvic exam if I don't have any symptoms?

There is not much research on the usefulness of annual pelvic exams for women who aren't pregnant, experiencing symptoms, or at risk for gynecological conditions. The American College of Obstetricians and Gynecologists (ACOG) recommends women have pelvic exams only when they have symptoms or have a medical history that requires it.

Ultimately, you and your ob-gyn or other health care professional should make this decision together. Discuss your medical history and the risks and benefits of a pelvic exam.

What are the benefits of a routine pelvic exam?

The potential benefits of a routine pelvic exam include:

- Possible early detection of treatable conditions, such as infections or cancer
- Detection of other problems, such as changes to the skin in your pelvic area
- A better understanding of your body
- Reassurance about your sexual and reproductive health

What are the risks of a routine pelvic exam?

There is not much research on the potential harms of pelvic exams. There is some evidence that a pelvic exam may cause some women fear, anxiety, embarrassment, or pain and discomfort. Talk with your ob-gyn if you have concerns about getting a pelvic exam.

Does a pelvic exam hurt?

A pelvic exam may feel strange if you have not had one before. There may be minor discomfort, but it should not be painful. Tell your ob-gyn right away if you have pain during the pelvic exam. They may be able to make the exam more comfortable. Relaxing your body also may help ease your discomfort.

Who will be in the room during a pelvic exam?

There may be a chaperone in the exam room. This person usually is a nurse or medical assistant. You may be given a chaperone automatically. If you are not given a chaperone, you can ask for one. ACOG recommends that a chaperone be present for all breast, genital, and rectal exams.

If you do not want a chaperone in the room, make your wishes known. You also can have a partner, friend, or family member with you during the exam.

What else should I know before getting a pelvic exam?

Pelvic exams can be triggering or painful for survivors of [sexual abuse](#) . If this is true for you, let your ob-gyn know. The following may help make the pelvic exam easier:

- Your ob-gyn should explain what they will be doing ahead of time. They also should be able to talk you through the steps as they happen.
- Your ob-gyn should always ask permission before touching you.
- You may want to have a partner, friend, or family member in the room during the exam.
- You may feel more in control if you can direct the pace of the exam, see more of the exam (such as with a mirror), or put your hand over the ob-gyn's hand to guide the exam.
- Remember that you can ask to stop the exam at any time.

If you think one or more of these steps might help, let your ob-gyn know.

Do I still need to see my ob-gyn if I don't need an annual pelvic exam?

Experts recommend that you visit your ob-gyn at least once a year for a [well-woman visit](#) . The purpose of this checkup is to help you stay healthy and prevent health problems at all stages of life.

Well-woman visits are an important part of your health care, even if you do not need a pelvic exam. They are a chance for you and your ob-gyn to talk about sex, birth control, planning for pregnancy, and more.

Glossary

Birth Control: Devices or medications used to prevent pregnancy.

Cervix: The lower, narrow end of the uterus at the top of the vagina.

Dysplasia: A noncancerous condition that happens when normal cells are replaced by a layer of abnormal cells.

Endometrial Biopsy: A procedure in which a small amount of the tissue lining the uterus is removed and examined under a microscope.

Genitals: The sexual or reproductive organs.

Human Papillomavirus (HPV): The name for a group of related viruses, some of which cause genital warts and some of which are linked to cancer of the cervix, vulva, vagina, penis, anus, mouth, and throat.

Intrauterine Device (IUD): A small device that is inserted and left inside the uterus to prevent pregnancy.

Obstetrician–Gynecologist (Ob-Gyn): A doctor with special training and education in women’s health.

Pap Test: A test in which cells are taken from the cervix (or vagina) to look for signs of cancer.

Pelvic Exam: A physical examination of a woman’s pelvic organs.

Prenatal Care: A program of care for a pregnant woman before the birth of her baby.

Rectovaginal Exam: An exam in which an ob-gyn or other health care professional checks the muscles and tissues between a woman’s vagina and anus.

Sexual Abuse: Sex acts that are forced on one person by another.

Sexually Transmitted Infections (STIs): Infections that are spread by sexual contact. Infections include chlamydia, gonorrhea, human papillomavirus (HPV), herpes, syphilis, and human immunodeficiency virus (HIV, the cause of acquired immunodeficiency syndrome [AIDS]).

Speculum: An instrument used to hold open the walls of the vagina.

Uterus: A muscular organ in the female pelvis. During pregnancy, this organ holds and nourishes the fetus.

Vagina: A tube-like structure surrounded by muscles. The vagina leads from the uterus to the outside of the body.

Vulva: The external female genital area.

Well-Woman Visit: An annual checkup with a health care professional that focuses on a woman's sexual, reproductive, and overall health.

If you have further questions, contact your ob-gyn.

Don't have an ob-gyn? [Learn how to find a doctor near you.](#)

FAQ518

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