Cozean Pelvic Dysfunction Screening Protocol

Instructions: Check all that apply

☐ Sometimes have pelvic pain (in genitals, perineum, pubic, or bladder area, or pain with urination) that exceeds a '3' on a 1-10 pain scale with 10 being the worst pain imaginable.

☐ I can remember falling onto my tailbone, lower back, or buttocks (even in childhood).

☐ Sometimes experience one or more of the following urinary symptoms:
  o Accidental loss of urine
  o Feeling unable to completely empty my bladder
  o Having to void within a few minutes of a previous void
  o Pain or burning with urination
  o Difficulty starting or frequent stopping/starting of urine stream

☐ I often or occasionally have to get up to urinate two or more times a night.

☐ I sometimes have a feeling of increased pelvic pressure or the sensation of my pelvic organs slipping down or falling out.

☐ I have history or pain in my low back, hip, groin, or tailbone or have had sciatica.

☐ Sometimes experience one or more of the following bowel symptoms:
  o Loss of bowel control
  o Feeling unable to completely empty my bowel movements
  o Straining or pain with a bowel movement
  o Difficulty initiating a bowel movement

☐ Sometimes experience pain or discomfort with sexual activity or intercourse.

☐ Sexual activity increases one or more of my other symptoms.

☐ Prolonged sitting increases my symptoms.

If you checked 3 or more boxes, pelvic floor dysfunction is likely.

You may benefit from an examination with a Pelvic Health Physiotherapist. For more information including common questions, costs and how to book an appointment visit [WSP - Pelvic Health Physiotherapy](#)

Pelvic Dysfunction Screening Protocol form by Nicole Cozean, PT, DPT, WCS, CSCS* and Jesse Cozean, MBA

Working together - Te mahi tahi

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