BIMANUAL VAGINAL (PV) EXAMINATION
Bimanual or PV examinations are performed for a number of clinical reasons e.g. problems relating to menstruation, irregular bleeding, dyspareunia, abnormal vaginal discharge or pelvic pain.

For the purpose of examinations you will be provided with a mannequin, however you should pretend it is a real patient and talk to it as such, which will also form part of the marking scheme.
Subject steps

• Introduce yourself to the patient and clarify her identity. Explain what you would like to do and obtain consent.

• Explain she should feel little, if any, discomfort and that the examination should be over fairly quickly.
the patient should be exposed from the waist down. Ask her to lie on her back, ankles together and to let her knees fall apart as much as possible. You should try and remain some of her modesty by putting a cover over her.
3. Wash your hands, put on some gloves and inspect the outside of the vagina. Check the labia and clitoris looking for any obvious abnormalities such as erosions.
4. Lubricate the index and middle finger of your right hand. Explain to the patient that you are about to start the procedure.
• Use the thumb and index finger of your left hand to separate the labia majora and firstly insert your index finger, checking for any cervical excitation. If none is present, then insert your middle finger.
• Palpate all of the vaginal walls as you advance your fingers feeling for any obvious abnormalities.
• Using your fingertips, palpate the cervix effacement, dilation, ischial spine, presenting part, membrane anterior fontanel.
• Once complete, remove your fingers, check your glove for any discharge or blood, and then discard your gloves in the clinical waste bin.
• Offer the patient a tissue, cover them up and thank them. You should now report your findings back to the examiner.
Thank you