**Well Woman Care**

Study Group Module

**Learning Objectives**

Review the following Learning Objectives as an organized beginning to your study of this module. As you read the Learning Objectives, note key words which will aid you in finding the information in the texts. When you complete the module, revisit this list and check for areas that require further investigation.

* Review the Physical Assessment module.
* Review the Prenatal Lab Work and Assessment module.
* Review the Female Sexuality and Fertility & Conception modules.
* Review the Embryology and Fetal Development module, particularly the pregnancy termination section.
* Review the Post Partum Care module, particularly the birth control section.
* Identify the best time during a woman’s monthly cycle to perform a well woman exam.
* Understand risks of DES exposure.
* Identify risk factors for cervical, ovarian and breast cancers.
* Identify the recommendations for cervical and breast cancer screening.
* Review vaginal speculum use.
* Learn the PAP smear technique.
* Review manual breast exam and self breast exam.
* Identify methods of emergency contraception.
* Identify methods of contraception and their rates of effectiveness.
* Identify community resources for consultation and referral for birth control, pregnancy testing and counseling, emergency contraception and abortion.
* Identify community resources for HIV and Hepatitis testing.
* Review safer sex practices and use of latex barriers.
* Identify when a woman is at risk for STI (sexually transmitted infection.)
* Identify the tests for Bacterial Vaginosis, Trichomonas, Gonorrhea, Chlamydia, Herpes and HIV.
* Identify the symptoms of STIs.
* Identify the onset and cycle of menopause.
* Choose an appropriate pregnancy test for use with your well woman clients.
* Practice several well woman care interviews, charting each one.
* Identify volunteer or job opportunities in the county public health services and community/women’s clinics in your area.
* Create or adapt a well woman care chart for use in your own practice.
* Determine the regulations in your state regarding midwives providing well woman care.
* Demonstrate your well woman care skills.

Draft practice guidelines for providing well woman care in your own practice.**Study Sources**

The following texts are recommended for completion of this module. Use them to cross reference and build a more comprehensive understanding.

Using key words from the Learning Objectives, search the index. Read those pages listed, and read the chapter in which they are found. Establish a context for the information so that you understand how other topics are related. In addition, read the chapter headings in the Table of Contents, and flip through each text to familiarize yourself with the content of chapters. As you work through Study Group modules, you will eventually read each text in its entirety.

* New View of a Woman’s Body, Gage
* Understanding Diagnostic Tests in the Childbearing Year, Frye
* Varney’s Midwifery
* Contraceptive Technology, Hatcher, Trussell, Stewart and Kowal

Additional Suggested Reading

* Healing Choice by Candace De Puy, Ph.D and Dana Dovitch, Ph.D.
  + “This is a book for any woman who feels psychological pain from her abortion... this is not a book about judgment, politics, or religion.” - from the authors’ introduction

**Related Topics**

* Breast Feeding
* Cesarean and VBAC
* Digestion
* Diversity Awareness
* Ectopic Pregnancy
* Embryology and Fetal Development
* Female Sexuality
* Fertility and Conception
* Grieving
* Herpes
* Homeopathic Remedies
* Hypertension
* Liver
* Nutrition
* Pharmacology for Midwives
* Physical Assessment
* Physical and Sexual Abuse
* Post Partum Care
* Prenatal Lab Work and Assessment
* Renal System
* Stillbirth and Miscarriage
* Substance Abuse

Urinary Tract Infection **Well Woman Care Questions**

1. Imagine a group of 100 women. All of these women are experiencing normal fertility cycles. They are also having consensual, fun, heterosexual sex with loving partners. Although each woman states that she doesn’t intend to become pregnant, none of them are using contraception. If we track them for one year, how many of the 100 will likely conceive during that time?
2. How effective is coitus interuptus at preventing pregnancy?
3. How effective is the use of condoms in preventing pregnancy?
4. When is condom use indicated?
5. What barrier products can you recommend to someone concerned about latex sensitivity?
6. Is it ok to use baby oil or olive oil as a lubricant with latex condoms?
7. When is the use of spermicidal foam, cream or gel indicated?
8. How do the mortality risks of toxic shock syndrome (TSS) with the use of female barrier contraceptives compare to the risks of pregnancy related mortality?
9. What is the current theory explaining the effectiveness of IUD contraception?
10. What is done to provide surgical sterilization for women? For men?
11. Why is it important that women have PAP tests?
12. Why is it important that a woman learn and perform self-breast exams?
13. What do you recommend to a woman who was exposed in utero to DES?
14. How often are PAPs recommended?
15. What types of cells cover the cervix and vagina?
16. In the context of cervical cancer, where does abnormal cell growth generally occur?
17. What seems to be the main contributing factor in cervical cancer?
18. How does smoking effect a woman’s cervical cancer risk?
19. List the risks currently identified for cervical cancer.
20. How does HIV infection effect cervical cancer risk?
21. What indicates that a woman is at risk for STIs?
22. Do most women who have contracted a sexually transmitted infection experience symptoms?
23. Does oral sex expose one to STIs?
24. How do you determine if a client has chlamydia? Gonorrhea?
25. How is Trichomonas typically detected?
26. How might Gardnerella (or bacterial vaginosis) effect the outcome of a woman’s pregnancy?
27. What test is routinely done to rule out syphilis?
28. What follow up is necessary if you detect an STI with a client?
29. What are the risks for contracting hepatitis B?
30. Will you attend (as a midwife advocate) gyn follow up appointments with your clients, for example, if your client needs a biopsy or colposcopy procedure?
31. How will you counsel someone who is unsure about keeping her baby, and who may be considering abortion?
32. What is the leading cause of GYN cancer deaths among women?
33. How does oral contraceptive use effect ovarian cancer risk?
34. Does hysterectomy or sterilization remove ovarian cancer risk?
35. What is the frequency of breast cancer?
36. What are the risk factors for breast cancer?
37. How many women diagnosed with breast cancer actually fall into the breast cancer risk groups?
38. When is the ideal time in a woman’s cycle to perform a breast exam?
39. What are the recommendations regarding mammograms?
40. How important is contraception during menopause?
41. What is the recommended calcium intake for women during and after menopause?

**Essay**

1. What are the emergency contraception methods currently available and what are the guidelines for their application? How do they provide contraception?
2. How effective are emergency contraception methods?
3. Describe menopause and its onset.
4. Discuss the pros and cons of estrogen replacement treatment.

**Projects**

(send completed projects with the rest of your course work for this module)

1. Create or adapt a well-woman care chart for use in your own practice. Include reference to your medical consultation and referral plan for clients who need antibiotic treatment or gyn follow up. Submit this draft and include it later in your Practice Guidelines projects (in the Charting and Practice Guidelines Module.)
2. Draft practice guidelines for providing pregnancy testing to well woman clients, through referral or within your own practice. Submit this draft and include it later in your Practice Guidelines projects (in the Charting and Practice Guidelines Module.)
3. What referral resources will you utilize for a client choosing abortion?
4. Research in your community and identify services for HIV and Hepatitis testing . Make a referral list for clients.
5. Interview some friends to find out which condoms are their favorite; consider how you could make condom and latex glove samples available to clients.

**Projects**

( No course work for these items, just practice.)

1. If you have limited experience with condoms, practice putting one on a banana.
2. The Handshake Game Here we liken handshaking with unprotected sex. Get together with some friends, the more the better. Each person is given a small card; one or two of these cards have a blue spot on them. Ask people to mill about the room, shaking hands with people as they meet. When people shake hands, they also show each other their cards. After a few minutes of this handshaking, ask how many people met someone with a blue spot on their card. If the blue spots were STIs, how many people would have risked being exposed to an STI?

**Skills**

Following are excerpts from the NMI forms for assessment of midwifery skills, which include all skills identified and required by NARM. Review the following skills and consider how they each relate to the content of this module. If you are currently working with a preceptor, take this opportunity to focus on these areas. During Supervised Primary Care you will formally evaluate these skills together using the NMI form Preceptor Evaluation/Student Self-Assessment of Midwifery Skills.

1. Midwifery Counseling, Education and Communication:

J. Provides education, counseling and/or referral, where appropriate for:

7. Sexually transmitted diseases

2. General Health care Skills:

D. Demonstrates the use of instruments and equipment including:

19. Speculum

27. Vaginal culture equipment

3. Maternal Health Assessment:

C. Estimates due date based upon:

1. Date of mother’s last menstrual period

2. Last normal menstrual period

3. Length of cycles

4. Changes in mucus condition or ovulation history

5. Postpartum

G. Performs maternal four- to six-week post-partum chech-up assessing for:

1. Post partum subjective history

2. Lochia

3. Return of menses

4. Physical condition by performing an examination including assessment of:

a) vital signs,

b) systems function,

c) breastfeeding, condition of breast and nipples,

d) muscle prolapse of vagina and rectum (cystocele, rectocele, etc.), e) strength of pelvic floor,

f) condition of uterus, ovaries and cervix,

g) condition of the vulva, vagina, perineum and anus

6. Well-Women Care

A. Obtains a client history including:

1. Identifying information/demographics,

2. Personal history, including religion, occupation, education, marital status, economic status, changes in health or behavior and woman’t evaluation of her health and nutrition,

3. Potential exposure to environmental toxins,

4. Medical condition,

5. Surgical history

6. Reproductive history including:

a) menstrual history,

b) gyn history,

c) sexual history,

d) childbearing history,

e) contraceptive practice,

f) history of STIs,

g) history of behavior posing risk for STI exposure

7. Family midical history,

8. Psychosocial history,

9. History of abuse,

10. Mental health history,

11. Relationship with significant other

B. Performs a general physical examination including assessment of:

1. General appearance,

2. General symptoms,

3. Skin condition,

4. Torso, extremeties for bruising, abrasions, moles, unusual growths,

5. HEENT (head, eyes, ears, nose, throat) including:

a) hair and scalp,

b) eyes: pupils, whites, conjunctiva,

c) thyroid by palpation,

d) lymph glands of neck, chest and under arms,

e) mouth, teeth, mucous membranes and tongue,

6. Weight and height,

7. vital signs,

8.breast condition by examination,

9.heart and lungs (auscultate),

10. Abdomen (palpage and auscultate),

11. (CVAT) Costovertable Angle Tenderness,

12. Deep tendon reflexes of the knee,

13. lower extremeties for varicosities,

14. extremeties for edema

C. Performs urinalysis

D. Provides gynecological examination including assessment of:

1. External genitalia

2. The cervix by speculum (observe)

3. Vulva, vagina,anus, perineum, urethra, clitoris, Bartholin’s and Skeene’s glands 4. Vaginal discharge: a)odor, b)color, c)consistency, d)amount, e)obtain PAP smear and cultures

E. Provides education and communicates about:

1. Nutrition

2. Female reproductive anatomy and physiology: a)monthly breast self examination techniques (BSE), b)implications for the nursing mother, c)prevention of HIV/AIDS and other STIs,

d)the practice of Kegel exercises

F. Assesses client's family planning history and needs: counsels/prescribes

G. Provides opportunity for client to discuss problems or concerns

H. Refers client to other health care professionals, services, agencies, or other, as indicated