Who Should Get an Exam?

- If you are sexually active, desire birth control or have other concerns, you should schedule a women’s health visit.
When to Schedule Your Appointment

- Your appointment should not be made during your period.

- You should not have unprotected sexual intercourse, or insert creams or tampons in the vagina within 2 days prior to your appointment.
What to Expect During Your Annual GYN Exam

- A GYN exam is a physical examination including a breast exam and may include a pelvic exam. A pelvic exam is when an instrument (a speculum) is inserted into the vagina to allow the health care provider to examine the vagina and cervix. Another part of the pelvic exam is the bimanual exam. During this part, the health care provider inserts a finger into the vagina and feels the lower abdomen to check the reproductive organs (uterus, fallopian tubes, ovaries). Some women may not need a pelvic exam.

- The American College of Obstetricians and Gynecologists recommends a pap smear (a cervical cancer screening test) for any woman 21 years of age or older.

**If you have symptoms you are concerned about, let your health care provider know.**
The Dreaded Part of the Appointment...

- You will be asked to completely undress and put on a gown that opens in the front. If you need a pelvic exam, you will need to slide down to the end of the exam table and put the heels of your feet into stirrups. You will be provided a sheet to put over your knees for privacy.

**The main thing to remember is to try to relax. The health care professionals at the health center perform GYN exams daily and are very skilled at what they do.**
The Pelvic Exam Step by Step

Step 1: External Genital Exam

With gloves on, the health care professional will feel for cysts and look for signs of redness, irritation, discharge, cysts, genital warts, or other conditions.

Step 2: Speculum Exam

In order to examine your cervix, the health care professional will use an instrument called a speculum. The speculum is inserted into your vagina in order to hold the walls of your vagina apart. While examining your cervix, a sample may be collected for a pap smear or other tests.
Step 3: Bimanual Exam

During the bimanual exam, the health care provider will insert one or two gloved fingers into your vagina. With the other hand the health care provider will press down on your lower abdomen, feeling the internal organs. The purpose of this part of the exam is to feel for the size/shape/position of the uterus, an enlarged uterus, tenderness or pain which might indicate infection/enlarged ovaries/cysts/ or tumors.
Your health professional will examine each breast, underarm, and collarbone area for changes in breast size, skin changes, or signs of injury or infection, such as bruising or redness. You will be asked to lie flat on the table and put your arm behind your head while your health professional checks your breast tissue.

Your health professional will gently press on the breast tissue from about 1 in. below the breast up to the collarbone. He or she also will examine your armpit and your neck for swollen glands. Your health professional will likely press gently on your nipple to check for any discharge.
Birth Control Information

- Consistent and correct use of your birth control method are key to effectiveness.

- Find a method that works well for you and fits your lifestyle the best.
CONTRACEPTIVE METHODS

Barrier Methods
- Condoms (Male and Female)
- Diaphragm
- Spermicides

Hormonal Methods
- Oral Contraceptives
- Nuva Ring
- Depo Provera Injection
- Implant

Intrauterine Devices (IUDs)
- Copper T IUD
- Mirena Intrauterine System (IUS)

Emergency Contraception

You will have the opportunity to discuss contraceptive options during your appointment. Please keep in mind that all methods listed are not available at Student Health Services.
Barrier Methods
Male & Female Condom

- **Male condom**—Worn by the man, a male condom keeps sperm from being transmitted into a partner’s body. Latex condoms, the most common type, help prevent pregnancy and HIV and other STDs as do the newer synthetic condoms. “Natural” or “lambskin” condoms also help prevent pregnancy, but may not provide protection against STDs, including HIV. Male condoms are 85–98% effective at preventing pregnancy. Condoms can only be used once, and are most effective when used consistently and correctly. You can buy condoms, KY jelly, or water-based lubricants at a drug store. Do not use oil-based lubricants such as massage oils, baby oil, lotions, or petroleum jelly with latex condoms. They will weaken the condom, causing it to tear or break.

- **Female condom**—Worn by the woman, the female condom helps keeps sperm from getting into her body. It is packaged with a lubricant and is available at drug stores. It can be inserted up to eight hours before sexual intercourse. Female condoms are 79–95% effective at preventing pregnancy when used consistently and correctly, and may also help prevent STDs.
Condoms & Oral Sex

- Many Sexually Transmitted Infections (STIs) can be transmitted during oral sex on either a male or female partner. Due to the risk of transmitting or contracting an STI, it is strongly encouraged that you use condoms and dental dams as barriers when engaging in mouth-to-genital or mouth-to-anus contact. Also talk to your partner about your sexual histories and get tested for STIs!

- For protection during mouth-to-penis contact it is best to use a non-lubricated latex condom, or try using a flavored latex condom! The steps for placing a condom on the penis are the same as when using a condom for vaginal or anal intercourse.

- For protection during mouth-to-vulva or mouth-to-anus contact you can use a latex dental dam (a square or rectangular piece of latex). If you don’t have a dental dam, you can turn a condom into a dental dam. Tips: try using lubricant on the non-mouth side of the dam. It will increase sensation and help hold the dam in place. But sometimes dams slip! Remember to have one partner help hold the dam in place with their fingers.
Condoms & Anal Sex

- The risk of STI transmission is high for individuals who engage in anal intercourse. The anal tissue is very fragile and can bleed easily. The high risk of tearing of mucous membranes during anal intercourse makes it easier for STIs to be transmitted. For protection during anal intercourse, latex condoms are recommended, although research has been limited regarding their effectiveness during this type of intercourse. Couples who have anal intercourse are strongly encouraged to use a condom and a water-based lubricant in order to decrease the risk of condom breakage.

- Also remember to talk to your partner about your sexual histories and get tested for STIs!
You may take 3 condoms for free when visiting the Student Health Center. You do not need an appointment. There is a bowl of condoms in the lobby and a basket of condoms in each exam room. Please limit to 3 per visit.

You may purchase condoms from the Student Health Center. You may call 683-3132 ext. 3 or simply stop by the Health Education Office at the health center.

- 12 Regular Trojan Condoms = $1.00
- 12 Magnum Trojan Condoms = $3.00
- 6 Non-Latex (Polyurethane) Condoms = $5.00
Diaphragm — This type of barrier method is placed inside the vagina to cover the cervix to block sperm. The diaphragm is shaped like a shallow cup. Before sexual intercourse, you insert it with spermicide to block or kill sperm. The diaphragm is 84–94% effective at preventing pregnancy. Visit your doctor for a proper fitting because diaphragms come in different sizes.

Spermicides — These products work by killing sperm and come in several forms—foam, gel, cream, film, suppository, or tablet. They are placed in the vagina no more than one hour before intercourse. You leave them in place at least six to eight hours after intercourse. You can use a spermicide in addition to a male condom, diaphragm, or cervical cap. Spermicides alone are about 71–82% effective at preventing pregnancy. They can be purchased in drug stores.
Hormonal Methods
- **Oral contraceptives**—Also called “the pill,” it contains the hormones estrogen and progestin. A prescription is needed to obtain the pill. A pill is taken at the same time each day. If you are older than 35 years and smoke, or have a history of blood clots, or high blood pressure, breast cancer, or endometrial cancer, your doctor may advise you not to take the pill. The pill is 92–99% effective at preventing pregnancy.

- **Mini pill**—Unlike the pill, the mini-pill only has one hormone, progestin, instead of both estrogen and progestin. A prescription is needed to obtain the mini pill. It is taken at the same time each day. It is a good option for women who can’t take estrogen or for women who have a risk of blood clots. They are 92–99% effective at preventing pregnancy.
- **Hormonal vaginal contraceptive ring**— The NuvaRing releases the hormones progestin and estrogen. You insert the ring inside your vagina to go around your cervix (the opening to your womb). You wear the ring for three weeks, take it out for the week you have your period, and then put in a new ring. It is 92–99% effective at preventing pregnancy.

- **Injection or “depo shot”**— Women get shots of the hormone progestin in the buttocks or arm every 12 weeks from their doctor. It is 97–99% effective at preventing pregnancy.

- **Implant**— The implant is a single, thin rod that is inserted under the skin of a women’s upper arm. The rod contains a progestin that is released into the body over 3 years. It is 99 percent effective at preventing pregnancy. *Not available at Student Health Services.*
Emergency Contraception
Emergency contraception -- is NOT a regular method of birth control. Emergency contraception should only be used if no regular birth control was used, or if the birth control method failed, such as if a condom broke.

Emergency contraception requires you to take a dose of a hormonal pill. You have to take the pill within three days (72 hours) after having unprotected sex. Emergency contraception pills are sometimes referred to as “morning after” pills, even though they can be used up to three days later. Plan B is about 87.5% effective at preventing pregnancy. Plan B is available over-the-counter for purchase by anyone 17 years and older. Plan B is available by prescription for women under 17 years old. (Plan B is the brand name of one product approved by the Food and Drug Administration for use as emergency contraception.)
Plan B is available over the counter at local pharmacies and at Student Health Services for women 17 and older. You do not need to make an appointment to receive Plan B from Student Health unless you are under age 17. You may pick it up at the front desk for $12.00 (beginning May 11, 2010 the price will increase to $16). You will need to show your student ID. Plan B may be purchased by males as well as females.
Other Methods of Birth Control

- For more information about the following methods of birth control, visit http://www.cdc.gov/reproductivehealth/UnintendedPregnancy/Contraception.htm
- Hormonal Patch
- Intrauterine Devices
- Permanent Birth Control Options
CONTRACEPTIVES - FEE AMOUNT

- **Apri (generic for Desogen)**
  - 3/$29; 6/$51; 10/$81; 13/$103

- **Aviane-28 (generic for Alesse)**
  - 3/$45; 6/$84; 10/$135; 13/$174

- **Nortrel (generic for Modicon)**
  - 3/$42; 6/$78; 10/$125; 13/$160

- **Ortho Tri-Cyclen**
  - 3/$37; 6/$68; 10/$108; 13/$138

- **Velivet (generic for Cyclessa)**
  - 3/$42; 6/$78; 10/$125; 13/$160

- **Medroxyprogesterone acetate Injection (generic DepoProvera)**
  - $31

- **Plan B (Levonorgestrel)**
  - $12 (price will increase to $16 after May, 10, 2010)

- **Condoms (Regular/Large) (Non-latex)**
  - (12 for $1-$3) (6 for $5)
Pregnancy Test Fees at Student Health Services

- Urine Pregnancy (HCG)
  - No Charge

- Serum (Blood) Pregnancy
  - $15
Sexually Transmitted Infections

Unfortunately, sexually transmitted infections are common. If you are experiencing symptoms, it is best to seek treatment earlier rather than waiting. Student Health Services provides STI testing and offers treatment for those STIs that can be treated.

**If you are going to be sexually active, use protection (a condom) consistently and correctly every time! Some STIs do not have visible symptoms - a partner may appear “clean” and still pass an infection to you.**
Herpes Simplex I and II (viral infection)

- Transmission: contact with an infected person's lesions (hand-to-genital, genital-to-genital, or oral-to-genital) - although the virus can be spread even in the absence of lesions.

- Symptoms: blisters on the skin on or surrounding the genitals

- Treatment: Although antiviral drugs can be taken to reduce the severity of the outbreak, there is no cure for this virus.

- Prevention: Abstinence from sexual contact and monogamy; Barrier methods should be used for all acts of oral, anal, or vaginal intercourse, however they may only partially protect against this virus as lesions may exist in places where the condom or other barrier does not cover. Additionally, the virus may be transmitted when no symptoms are present.
Sexually Transmitted Infections

Chlamydia (bacterial infection)

- Transmission: contact of mucous membranes (cervix, urethra) with an infected person's fluids (semen and mucus). Can be transmitted through oral, anal, or vaginal sex.

- Symptoms: Chlamydia is known as a "silent" disease because about three quarters of infected women and about half of infected men have no symptoms. If symptoms do occur, they usually appear within 1 to 3 weeks after exposure. Women might have an abnormal vaginal discharge, burning sensation when urinating, lower abdominal pain, low back pain, nausea, fever, pain during intercourse, or bleeding between menstrual periods.

  Men might have a discharge from their penis or a burning sensation when urinating. Men might also have burning and itching around the opening of the penis. Pain and swelling in the testicles are uncommon.

- Treatment: Antibiotics - both partners must be treated.

- Complications: If left untreated, Chlamydia can lead to Pelvic Inflammatory Disease in women, as well as infertility and increased risk of tubal pregnancy. In men, it can lead to infertility.

- Prevention: Abstinence, monogamy, and consistent and correct use of latex condoms. Remember to get tested and ask your partner to get tested too!
Sexually Transmitted Infections

Gonorrhea (bacterial infection)

- Transmission: contact of mucous membranes with an infected person's fluids, most commonly through oral, anal, or vaginal sex.

- Symptoms: similar to Chlamydia

- Treatment: Antibiotics - both partners must be treated.

- Complications: In women, tubal scarring, higher risk of tubal pregnancy, infertility and Pelvic Inflammatory Disease can occur. In men, epididymitis, a condition that can lead to infertility.

- Prevention: Abstinence, monogamy, and consistent and correct use of latex condoms. Remember to get tested and ask your partner to get tested too!
Syphilis

- Transmission: direct contact with a syphilis sore. Sores occur mainly on the external genitals, vagina, anus, or in the rectum. Sores also can occur on the lips and in the mouth. Transmission of the organism occurs during vaginal, anal, or oral sex.

- Symptoms: Many people infected with syphilis do not have any symptoms for years, yet remain at risk for late complications if they are not treated. The primary stage of syphilis is usually marked by the appearance of a single sore (called a chancre), but there may be multiple sores. Skin rash and mucous membrane lesions characterize the secondary stage. The latent (hidden) stage of syphilis begins when primary and secondary symptoms disappear.

- Treatment: Syphilis is easy to cure in its early stages. A single intramuscular injection of penicillin, an antibiotic, will cure a person who has had syphilis for less than a year. Additional doses are needed to treat someone who has had syphilis for longer than a year. For people who are allergic to penicillin, other antibiotics are available to treat syphilis.

- Link between syphilis and HIV: Genital sores (chancres) caused by syphilis make it easier to transmit and acquire HIV infection sexually. There is an estimated 2- to 5-fold increased risk of acquiring HIV if exposed to that infection when syphilis is present.

- Prevention: Abstinence, monogamy, and consistent and correct use of latex condoms. Remember to get tested and ask your partner to get tested too!
Transmission: The parasite is sexually transmitted through penis-to-vagina intercourse or vulva-to-vulva (the genital area outside the vagina) contact with an infected partner.

Symptoms: Most men with trichomoniasis do not have signs or symptoms; however, some men may temporarily have an irritation inside the penis, mild discharge, or slight burning after urination or ejaculation.

Some women have signs or symptoms of infection which include a frothy, yellow-green vaginal discharge with a strong odor. The infection also may cause discomfort during intercourse and urination, as well as irritation and itching of the female genital area. In rare cases, lower abdominal pain can occur. Symptoms usually appear in women within 5 to 28 days of exposure.

Treatment: Trichomoniasis can usually be cured with prescription drugs, either metronidazole or tinidazole.

Prevention: The surest way to avoid transmission of sexually transmitted diseases is to abstain from sexual contact, or to be in a long-term mutually monogamous relationship with a partner who has been tested and is known to be uninfected. Latex condoms, when used consistently and correctly, can reduce the risk of transmission of trichomoniasis.
Sexually Transmitted Infections

HPV (Human Papillomavirus)/Genital Warts (viral infection)

- Transmission: vaginal, oral, anal intercourse with an infected person. It is thought that HPV is also be spread by skin to skin contact.

- Symptoms: Most of the time no symptoms occur. Lesions that show-up externally may itch and can be raised or flat. Lesions on the cervix are usually invisible to the naked eye.

- Treatment: Some infections may clear with no treatment. Removal of lesions can occur using several methods, including freezing, surgical incision and laser removal as well as a topical treatment. Removal of lesions does not guarantee eradication of the virus from the body.

- Complications: HPV is the number one cause of cervical cancer in women.

- Prevention: Abstinence from genital contact and monogamy; Barrier methods should be used however, they only partially protect against this virus, as lesions may exist in places where the condom or other barrier does not cover. A new vaccine is now available to guard against strains of HPV that lead to 70% of cervical cancer cases and 90% of genital warts cases.
Sexually Transmitted Infections

Hepatitis B (viral infection)

- Transmission: contact of mucous membranes (cervix, urethra) with an infected person's fluids (semen, saliva, blood and mucus). The most common exposure is through oral, anal and vaginal sex.

- Symptoms: usually asymptomatic at first

- Treatment: None

- Complications: Cirrhosis, liver cancer, liver failure, death.

- Prevention: Vaccination (3 injections over 6 months), abstinence, monogamy; avoid contact with blood, needles, etc. (Note: in addition to receiving all three injections at the Student Health Center, the vaccine can be started at the Student Health Center and finished elsewhere or finished at the Student Health Center if you started it elsewhere)
Sexually Transmitted Infections
HIV/AIDS (viral infection)

- Transmission: contact of open skin with an infected person's body fluids (blood, mucus, semen). The most common exposure is through oral, anal or vaginal sex.

- Symptoms: many people with HIV infection do not know they are infected for years. Testing is the only way to know for sure that you're not infected.

- Treatment: Antivirals and other medications - there is NO CURE.

- Complications: Symptoms of AIDS, death.

- Prevention: Abstinence, monogamy, and consistent and correct use of latex condoms. Remember to get tested and ask your partner to get tested too! Avoid contact with needles, particularly IV drug use.
Student Health Services

STI Testing Fees

- Chlamydia swab or urine
  - $13
- Gonorrhea swab or urine
  - $14
- Chlamydia & Gonorrhea swab or urine
  - $27
- Herpes Culture
  - $21
- STS (Syphilis)
  - $12
- Syphilis & HIV
  - $25
- HIV test
  - $20
For more information:

- All information included in this presentation about sexually transmitted infections and birth control can be found on the Center for Disease Control’s website at [www.cdc.gov](http://www.cdc.gov).
- If you have a question about scheduling an appointment, call 683-3132.
- If you have questions about services available or costs, visit the Student Health Services website, [http://studentaffairs.odu.edu/healthservices](http://studentaffairs.odu.edu/healthservices).