Checklist for Pelvic Floor Therapy



If you CHECK OFF any of the following questions, you may benefit from a pelvic floo therapy evaluation with a pelvic OT/PT:	
Do you leak urine with any activity	y or exercise? (Coughing, sneezing, etc)
Do you go to the toilet sooner the	an every 2 hours?
Do you have a strong urge to go	to the bathroom and difficulty holding it in?
Do you have difficulty starting the	e stream of urine?
Are you unable to completely em	pty your bladder?
Do you experience constipation	and require to strain to empty your bowels?
Do you have ANY pain with sex? I	Keep in mind that 'pain' can range from mild in.
Does prolonged sitting make your	r symptoms worse?
Do you feel any heaviness or pres	ssure in the vagina or rectum? Have you noticed a something 'falling out'?
Do you have pain in any of the fo tailbone, butt, hip or groin that isn't get	llowing: pubic bone, sciatica, lower back, tting better on its own?
Did you experience tearing or sti Cesarean/C-section birth?	tches during birth? Did you have a
Do you want to learn about Diast eel you have a weak core?	asis recti management and prevention? Do you
Would you like to prepare your peuture pelvic floor dysfunction?	elvic floor and body for birth to prevent tears and
Have you recently had a baby and he care and attention it needs to recover	d want to make sure you are giving your own body ver postpartum?