



COZEAN PELVIC DYSFUNCTION SCREEN PROTOCOL

- _____ I sometimes have a 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)
- _____ I sometimes experience one or more of the following urinary symptoms
- Accidental loss of urine
 - Feeling unable to completely empty my bladder
 - Having to void within a few minutes of a previous void
 - Pain or burning with urination
 - Difficulty starting or frequent stopping of urine stream
- _____ I often or occasionally have to get up to urinate two or more times at night
- _____ I sometimes have a feeling of increased pelvic pressure or the sensation of my pelvic organs slipping down or falling out
- _____ I have a history of pain in my lower back, hip, groin or tailbone or have had sciatica
- _____ I sometimes experience one or more of the following bowel symptoms
- Loss of bowel control
 - Feeling unable to completely empty my bowels
 - Straining or pain with a bowel movement
 - Difficulty initiating a bowel movement
- _____ I 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