Assessment and Health
Promotion of the
Reproductive System
Napa Valley College
ADN Program
Unit XX

Objective 1: Differentiate between findings that are within normal limits (wnl) and those that represent an alteration in the reproductive system of male or female.

Reproductive System - Normal Function - Female

Reproductive System - Normal Function - Male
### History and Interview

#### Female

- Menstrual history
  - Age at menarche
  - LMP (Last Menstrual Period)
  - Character, length, regularity of menses
  - Dysmenorrhea (nature, severity, tx)
  - Premenstrual changes
  - Sexual history
  - Contraceptive history
  - Obstetric history
    - 1. Gravity and Parity
  - Date of last Pap smear
  - Use of these products
    - Douche, sprays, deodorants, antiseptic soaps, talcum powd, steroids
  - Recent change in any of the following
    - Bleeding
    - Pain
    - Vaginal Discharge
  - Urinary function
    - Dysuria
    - Urinary urgency, frequency
    - Hematuria
    - Urinary incontinence
    - Chronic infections related to coitus
  - Risk factors for AIDS
    - Safe sex practices
    - Multiple partners
    - IV drug use

#### Male

- Pts age
- Diet, use of alcohol
- Frequency, urgency, dysuria, nocturia
- Difficulty stopping or starting stream
- Hematuria; discharge
- Pain, lesions or masses on penis, scrotum, inguinal area
- Circumcised
- Contraceptive use
- Medications that affect sexual function
- Swelling of scrotum
- Sexually transmitted infections (STIs)
- Risk factors for AIDS
- Self-examination techniques, (TSE) frequency
- Erectile dysfunction
- History of infections

### Physical Examination - Female

- General
  - Genital sores
  - Signs of sexual assault
- Inspection
  - Hair
  - Labia
  - Discharge
- Palpation
  - Masses, swelling, loss of muscle tone
Physical Examination-Male

Genital sores
Assault
Inspection
Hair, skin of penis, scrotum, inguinal area, penis—note foreskin, glans, circumcision, position of urinary meatus

Palpation
Masses, swelling, discharge

Male Genitals
Circumcised Penis Shown

Circumcision, the surgical removal of the foreskin.

Objective #2 explain those factors that influence the assessment of the reproductive system

Influencing Factors on Assessment

- Age
- Sexually active
- Childbearing
- BPH
- Menopause
- Health
- Lifestyle
- Diet
- Medication

- Family
- Culture and Society
- Sex/ gender roles
- Sex practices
- Body image
Objective #3 Explain those factors that influence the success of the assessment.

**Influencing Factors on Outcome of Assessment**

- Communication skills
- Feelings and attitudes of the nurse
- Values
  1. Nurse
  2. Patient
- Acceptance of others
- Stigma
- Environment

Objective #4 Identify nursing interventions before, during and after diagnostic tests of the reproductive system

**Diagnostic Tests**

- Mammography
- CBE
- Pap/HPV testing
- Prostate specific antigen (PSA)
- TSE/Ultrasound
- Pelvic examination
- Endometrial Biopsy
- Tumor Markers - ca125

**Screening for Breast Cancer**

- Yearly mammograms are recommended starting at age 40 and continuing for as long as a woman is in good health.
- Clinical breast exam (CBE) about every 3 years for women in their 20s and 30s and every year for women 40 and over.
- Women should know how their breasts normally look and feel and report any breast change promptly to their health care provider. Breast self exam (BSE) is an option for women starting in their 20s.
- Some women - because of their family history, a genetic tendency, or certain other factors - should be screened with MRI in addition to mammograms. (The number of women who fall into this category is small: less than 2% of all the women in the US.)

Mammography cont...

- Comfort
- Breast size
- Traditional vs. Digital Mammography and Computer Aided Detection.

Traditional vs. Digital

Cervical Cancer Screening

- Cervical cancer screening (testing) should begin at age 21. Women under age 21 should not be tested.
- Women between ages 21 and 29 should have a Pap test every 3 years. Now there is also a test called the HPV test. HPV testing should not be used in this age group unless it is needed after an abnormal Pap test result.
- Women between the ages of 30 and 45 should have a Pap test plus an HPV test (called "co-testing") every 5 years. This is the preferred approach, but it is also OK to have a Pap test alone every 3 years.
- Women over age 45 who have had regular cervical cancer testing with normal results should not be tested for cervical cancer. Once testing is stopped, it should not be started again. Women with a history of a serious cervical pre-cancer should continue to be tested for at least 20 years after that diagnosis, even if testing continues past age 65.
- A woman who has had her uterus removed (and also her cervix) for reasons not related to cervical cancer and who has no history of cervical cancer or serious pre-cancer should not be tested.
- A woman who has been vaccinated against HPV should still follow the screening recommendations for her age group.
- Some women - because of their history - may need to have a different screening schedule for cervical cancer.
Prostate Specific Antigen (PSA)

- Prostate-specific antigen (PSA) is a substance made by cells in the prostate gland (both normal cells and cancer cells). PSA is mostly found in semen, but a small amount is also found in the blood. Most healthy men have levels under 4 nanograms per milliliter (ng/mL) of blood. The chance of having prostate cancer goes up as the PSA level goes up.
- When prostate cancer develops, the PSA level usually goes above 4. Still, a level below 4 does not guarantee that a man doesn’t have cancer – about 15% of men with a PSA below 4 will have prostate cancer on a biopsy. Men with borderline PSA level between 4 and 10 have about a 1 in 4 chance of having prostate cancer. If the PSA is more than 10, the chance of having prostate cancer is over 50%.

Prostate Specific Antigen (PSA)

- Starting at age 50, men should talk to a doctor about the pros and cons of testing so they can decide if testing is the right choice for them. If they are African American or have a father or brother who had prostate cancer before age 65, men should have this talk with a doctor starting at age 45. If men decide to be tested, they should have the PSA blood test with or without a rectal exam. How often they are tested will depend on their PSA level.

Objective #5 Describe some common findings that suggest an alteration in the reproductive system.

Common Findings with Alterations

- Lesions, rashes
- Parasites
- Bleeding
- Infections
- Vaginal or urethral discharge
- Dysmenorrhea
- Phimosis
Parasites

- Crab/Pubic Lice
- SCABIES
  Some burrows appear along areola of breast, belt line, buttocks and inner thigh

Herpes Type 1 and 2

Genital Warts
Objective 6: Formulate nursing diagnoses based on assessment

**Nursing Diagnoses**

- Infection, high risk for
- Urinary elimination, altered pattern
- Altered sexuality patterns
  - Dysfunction
- Altered comfort
  - Pain, acute or chronic
- Altered health maintenance
  - Self care deficit, bathing/hygiene

Objective 7: Describe nursing interventions that will assist a pt. to maintain a healthy reproductive system

**Nursing Interventions**

- Patient Education
  - Good hygiene and prevention of infection
  - Testicular self exam (TSE)
  - Prevention of sexually transmitted infections (STIs)
  - Rectal exam after 40
  - Pap smear schedule
  - Breast self exam (BSE)
  - Kegel Exercise

**TSE - Testicular Self Exam**

- Most MD’s recommend monthly TSE
- Best performed after a warm bath or shower
- One testis generally larger than the other
- Lumps, bleeding, breast enlargement, or other changes should be checked by a Physician
- Risk factors include: family hx, undescended or late descending testicle, mumps, injury to the scrotum
BSE Breast Self Exam

- ACS recommends occasional checks for self awareness
- Best time is 2-3 days after menstruation
- Post-menopausal check same time each month

Objective 8. Compare the methods of contraception & sterilization in relation to efficacy, action and side effects.

Contraception Methods

- Barriers
- IUDs/ IUS
- Oral Contraceptives (OC’s)
- Contraceptive Injection
- Contraceptive Implants
- Contraceptive Patch
- Family Planning
- Emergency - Day After
- Sterilization

- http://www.fda.gov/forconsumers/byaudience/forwomen/ucm118465.htm#barr

Documentation

- Reproductive Health Assessment
Dealing with Inappropriate Behavior

- Directly state that the behavior is not acceptable
- State your feelings
- State the behavior you expect
- Set limits
- Refocus the client from the inappropriate behavior to the underlying concerns