We’re here for you.

At UCLA Arthur Ashe Student Health and Wellness Center, we understand that some medical examinations and procedures are more sensitive than others. We want to make sure that you are comfortable during all exam and procedure types.

Our trained chaperones help ensure that sensitive exams and procedures are completed in a safe, comfortable and considerate manner. If you ever feel uncomfortable or you need more information about what is taking place or will happen during your exam, please let us know. We are here to help.
What is considered to be a sensitive exam or procedure?

A sensitive examination or procedure may involve a physical examination of breasts, genitalia or rectum.

Examples include: Clinical breast exams, pubic/groin region and hernia exams, vulva and vaginal exams, penile and scrotal exams, and rectal exams.

What does the chaperone do?

The chaperone is a specially trained member of the Ashe clinical team. Their job is to enhance the patient’s and the provider’s comfort, safety, privacy, security and dignity during sensitive exams or procedures. During the exam or procedure, the chaperone will stand in a location where it is possible to observe what is going on and assist as needed.

Can I request a chaperone for examinations that are not sensitive in nature?

Yes. A chaperone may be requested for any type of examination.

Can I decline to have a chaperone present during my exam or procedure?

Yes. Patients who are 13 years and older and can make their own medical decisions have the right to decline the presence of a chaperone during their sensitive exam or procedure. Patients can opt out when they arrive at their appointment.

Can I request a chaperone of a specific gender?

Yes. If you prefer a chaperone of a specific gender, please let us know when you arrive for your appointment. If your preferred gender chaperone is available, we will do our best to accommodate your request.

If you have any questions or concerns, please speak to a member of the scheduling team.
We value your privacy and respect your right to maintain dignity during all examinations. As a patient at The Ashe Center, you should expect:

1. The door will be closed during your examination. Only the people involved in your examination should be present during your care.

2. The provider and/or staff member will wash their hands or use hand sanitizer before and after delivering care. Gloves will be worn whenever there is potential to come into contact with open wounds, blood and/or bodily fluids.

3. The provider and/or staff member will explain the examination or procedure. They may ask questions to gather your medical history that is pertinent to the examination or procedure.

4. The provider and/or staff member will ask permission prior to touching you. They will explain what to expect during your visit.

5. To be provided a medical chaperone during sensitive examinations and procedures, and as requested.

We encourage you to speak up if you feel uncomfortable or notice any abnormal behavior during your examination or procedure.
Breast examination.

A clinical breast examination is performed in order to evaluate the breasts for any changes or abnormalities, such as a lump. The provider will visually check your breasts and then feel your breasts, underarm area, and the area below your breast bone as part of the examination. At times, a provider may need to squeeze your nipple to see if there is discharge.

- An explanation should occur before all breast examinations.
- Breast examinations should be conducted in a serious and private manner.
- Outside of a medical condition or concern, it is inappropriate for a provider to comment on the aesthetic appearance of a patient’s natural or surgically altered breasts.
- Patients only need to disrobe from the waist up for a breast exam.
- It is common for a provider to NOT wear gloves for a breast exam.
- A provider may need to move the patient’s hair behind the shoulders or move jewelry to the back to better see the breasts. These gestures should be explained to the patient.
- The provider should never make sexual innuendos or sexually provocative remarks.
- You are in charge and have the right to refuse any portion of an examination or stop the examination at any time.
Examination of the vulva & vagina.

The examination of the vulva and vagina is often referred to as a pelvic examination. It may involve both an external inspection as well as an internal visualization and palpation. Pelvic examinations are used to screen for cancer, collect specimens if an infection is suspected, or to help in diagnosis when there is bleeding, pain or other symptoms.

- An explanation should occur before all pelvic examinations.
- Pelvic examinations should be conducted in a serious and private manner.
- Routine invasive vaginal exams are typically not required until age 21, unless the patient has specific symptoms, conditions or medical risk. The patient’s doctor should discuss this risk with them prior to conducting the examination.
- Outside of a medical condition or concern, it is inappropriate for a provider to comment on the aesthetic appearance of a patient’s vulva or vagina.
- You should be given privacy to undress and not be asked to undress in front of a provider or other staff member.
- You should be given a gown/drape for extra privacy.
- The provider SHOULD wear gloves.
- The provider should NOT repeatedly move their fingers in and out of the patient’s vagina.
- A duck bill-shaped plastic or metal instrument, called a speculum, is often used for the internal vaginal exam. The provider should inform you before inserting it. It should be gently inserted and opened to provide visual access into the vagina.
• The provider should never make sexual innuendos or sexually provocative remarks.

• During pregnancy, pelvic exams are routinely performed during the first intake visit, during the last trimester, and in case of any changes in the patient’s health conditions or those of the baby.

• You are in charge and you may refuse any part of the examination or ask for the examination to be stopped at any time.

Rectal examination.

A rectal examination may be necessary to make a clinical diagnosis for patients who have symptoms such as abdominal pain, blood in their stool, changes in bowel habits or for urinary symptoms. It may also be necessary to collect a specimen to run a test for suspected sexually transmitted diseases of the rectum.

A rectal examination may be conducted with a patient lying on their back, lying on their side, lying face down or kneeling on or over an examination table.

External examination

The provider will examine the anus and the area surrounding the anus. They will look for sores, rashes or other lesions. The chaperone or a medical assistant may be asked to position a light so that the provider can see the area better. If the provider is testing for infections, then a swab may be placed about 1 inch into the anus/rectum, rotated gently, and then removed.

Digital examination

The provider will insert one gloved and lubricated finger into the anus to feel for any lumps or other abnormalities. The provider may also push firmly on the prostate gland, if present, to check for pain or tenderness.

Anoscope examination

To examine the rectal canal, the provider may insert a lubricated rigid, hollow instrument, called an anoscope, into the patient’s anus. The chaperone or medical assistant may be asked to position a light so that the provider can see the area better.

You are in charge and you may refuse any part of the examination or ask for the examination to be stopped at any time.
Examination of the penis, scrotum, & testicles.

Examination of the penis, testicles and/or scrotum may be performed if a patient is experiencing pain, swelling or discharge; has sores or other symptoms; or as part of a normal skin and structural exam. It may also be performed to check for a hernia.

- An explanation should occur before all examinations.

- The examination should be conducted in a serious and private manner.

- Outside of a medical condition or concern, it is inappropriate for a provider to comment on the aesthetic appearance of a patient’s penis, scrotum or testicles.

- The provider SHOULD wear gloves when feeling the penis and testicles.

- The provider should never make sexual innuendos or sexually provocative remarks.

- You are in charge and you may refuse any part of the examination or ask for the examination to be stopped at any time.

Penile examination

- During this portion of examination, the provider will perform a visual and manual examination of the penis, including the skin, foreskin, glans and urethra.

- If the patient is uncircumcised, the provider may ask them to retract the foreskin or the provider may retract the foreskin, to look for sores and lesions.

- The provider may feel and press all surfaces of the penis, checking for sores or irregularities.

- The provider may examine the opening of the urethra, called the urethral meatus, and may use a swab to collect a sample of any discharge.

- The provider may press along the shaft of the penis to express fluid.

CONTINUED ON NEXT PAGE
Scrotal & testicular examination

• During this portion of examination, the provider will perform a visual and manual examination of the testicles and scrotum.

• The provider may feel the testicles for size, irregularities and tenderness. They may also feel along the spermatic cord, which contains the spermatic artery and vein, looking for any abnormalities.

Examination of the pubic or groin region.

Public/groin region (hernia examination)

• The provider will completely perform a visual examination of the scrotum, groin and hip crease to look for any abnormalities.

• The provider will then feel the groin, inner upper thigh crease, lower abdomen, hip area where there are lymph nodes, testicles, and the spermatic cord connected to the testes inside the scrotum.

• During a hernia examination, the provider will place their fingers up against the abdominal wall and scrotum while the patient is standing or lying down. The provider may ask the patient to cough or bear down to increase the abdominal pressure for assessment.

• Gloves may or may not be worn when the provider feels the patient’s abdominal wall.

• You are in charge and you may refuse any part of the examination or ask for the examination to be stopped at any time.
University of California Notice of Nondiscrimination.

The University of California and The Ashe Center are committed to treat each community member with respect and dignity.

At The Ashe Center and across UCLA campus, discrimination and harassment are prohibited, including sexual assault and other forms of sexual harassment. The Ashe Center provides equal opportunities for all patients, applicants, employees, faculty and students regardless of sex, gender identity or expression, sexual orientation, or other legally protected characteristics.

For more on the University’s commitment to integrity, accountability and respect for all members of our community, please see the University’s Statement of Ethical Values and Standards of Ethical Conduct at compliance.ucla.edu/statement-of-ethical-values.

How to report sexual harassment

If you have experienced sexual harassment, please report it. To speak with a Title IX officer, please call 310-206-3417. You may also submit an online report at sexualharassment.ucla.edu.

The UCLA Title IX Office protects people’s privacy, while also fulfilling its obligations to respond appropriately to all reports it receives. In some situations, certain laws and University policies may require disclosure of reports to others, such as other University officials, licensing boards, law enforcement, or other agencies. If you are unsure if you want to file a report, we recommend contacting one of the following confidential resources first for advice and support:

- careprogram.ucla.edu
- sexualviolence.ucla.edu/Get-Help
- da.lacounty.gov/sexual-assault

These offices are not required to report instances of sexual harassment to the University. The University reviews all reports of sexual harassment in accordance with the University’s Sexual Violence and Sexual Harassment Policy and other applicable policies. See additional reporting options available to you: www.studenthealth.ucla.edu/patient-feedback/reporting-sexual-misconduct
UCLA Patient Care.

The Ashe Center is interested in hearing about your overall care experience.

To provide general feedback about your visit or experience with an Ashe provider or to communicate any complaint about unprofessional conduct, please submit feedback at www.studenthealth.ucla.edu/patient-feedback.

To obtain your medical records
You may obtain a copy of your medical records in person or by mail. For detailed instructions, visit our Medical Records page at www.studenthealth.ucla.edu/contact/medical-records.

For language, hearing, and visual access assistance
We provide free aids and services to people with disabilities to communicate effectively with us. We also provide free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages. If you need these services, please contact us at ashecaremanager@ashe.ucla.edu or our appointment line at 310-825-4073.

Reporting obligations of UC personnel
All University employees are responsible for creating and maintaining a safe, supportive and respectful environment for patients and colleagues. Under some circumstances, UCLA faculty and staff members are required by University policy to immediately report possible sexual harassment to the Title IX office.

Even those who are not subject to a mandate are urged to immediately report information regarding possible sexual harassment directly to the Title IX office or anonymously to the compliance hotline. For more information about your responsibility to report sexual harassment as a member of the UC community, go to equity.ucla.edu/about-us/our-teams/civil-rights-office/title-ix.