



Dover Women's Health, P.A.
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Your First Visit for Pelvic Floor Physical Therapy

Your first visit with our Nurse Practitioner will take approximately one hour. Please bring your complete paper work with you. At your visit the Nurse Practitioner will review your health history and perform an examination to evaluate the cause for your bladder problem. If you have not recently had a urine test performed you should come expecting to give a specimen. An abdominal and pelvic examination is then performed on female patients to ensure there is no secondary cause for the bladder problem.

Following the examination, muscle testing of the pelvic floor muscle will be performed. This procedure is not uncomfortable.

This is done one of two ways. (1) A small sensor is placed in the vaginal opening and you will be asked to tighten the muscles of the pelvic floor using various coaching technique, such as trying to lift the muscle up and in, or tighten the rectal muscle as if you were trying to stop passing gas.. (2) A small sensor is placed in the rectum and the same instructions are given as above.

The muscle testing is important because no two people are exactly alike. The level of exercise we recommend will be based on the muscle testing. If too many exercises are performed it may actually fatigue the muscle. If not enough are performed the muscle will not improve.

Additional treatments, which may be incorporated, are:

1. Biofeedback: The sensors used above to assess the muscle activity of the pelvic floor are transferred to a graph on a computer screen in real time. The nurse practitioner may work on coaching you to contract and relax the muscle in various ways to help improve the isolation, strength or rest with the use of the image on the screen to help you contract and relax the muscle.

2. Stimulation to the muscle. This is done with the vaginal sensor in women, which is inserted like a tampon. You will feel a gentle tapping sensation and feel the muscle contract. This is not uncomfortable for most people. This is the same type of therapy used for people who have difficulty with urgency and frequency by helping control the bladder.
3. Dietary habits will be reviewed. We find some patients have bladders that are very sensitive to certain types of drinks or foods. Dietary changes may be recommended.
4. Bladder Retraining: Our bladder is a muscle and various types of urinary issues can be improved by working on retraining the bladder muscle to hold more or less urine. The nurse practitioner will review in more detail if this technique will be used as a part of your therapy program.

We find 75-80% of the patients we see will attain significant improvement or cure with this type of therapy alone. As with any form of treatment there are some patients who do not benefit from non-surgical therapy. We recommend appointments every one to two weeks initially depending on your symptoms or progress. The average number of visits is 6-8. There are some people that require less visits and of course those who sometimes require more. Change in our symptoms should be noticed in 3-4 visits if non-surgical therapy is going to be successful to you. This does not mean you will be cured in 3-4 visits but you should notice gradual progress.

Remember loss of bladder control did not just happen overnight. We are working with the same muscles that have become weak so success does take some time and most importantly it requires specific exercises and recommendations be followed. Occasionally we will also recommend medications if we feel they are warranted.

We encourage our patients to continue any vacations or travels you may have planned. Instructions maybe given to keep your status of rehabilitation until you can return. Follow-up visits usually take 30-60 minutes.

If you need to reschedule your appointment we ask that you do so 24 hours in advance, per our No Show Policy.

Once benefits have been checked we will be happy to schedule your visit. We look forward to seeing you!