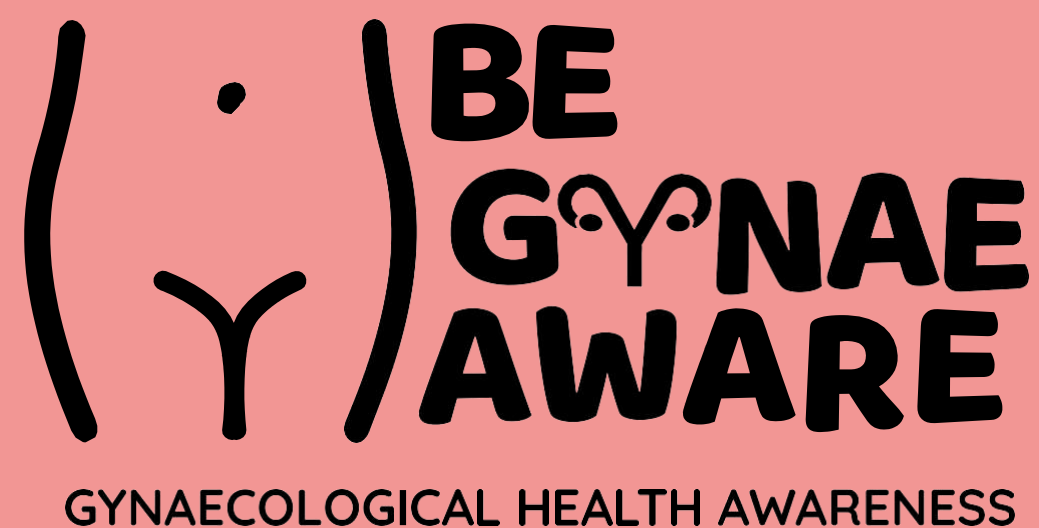




Supporting patients with extra barriers at a gynaecological health appointment

Gynae health is often still a taboo subject, and some patients might feel embarrassed, afraid or nervous when they make an appointment to discuss gynae concerns.

Everyone can help play a role in supporting patients who make gynae appointments



GSK and The Eve Appeal have launched a campaign, called Be Gynae Aware, to encourage more people to be aware of their gynaecological anatomy and seek help from their GP for new or concerning symptoms. This means there may be some people making appointments who might previously have been reluctant.

To help equip your surgery to make these patients feel as comfortable as possible, **we've created a practical guide with tips for the whole practice.**

Some of the GPs and nurses in your surgery may have specialised gynae training. However others, including key patient touch points such as surgery support staff, may not.



For more information about the Be Gynae Aware campaign, and to read our corresponding patient guide, visit:
eveappeal.org.uk/begynaeaware

Co-created and sponsored by GSK
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Reception / Triage:



When the patient first makes contact to book an appointment, they may feel embarrassed, afraid or nervous. While many surgeries may have an online booking system, some people may prefer to book via a phone call. In this case, some individuals may seem reluctant to explain what the appointment would be for. Consider giving them some options to say 'yes' or 'no' to or give them time to find a private space before answering.



When booking either a routine or urgent appointment for gynae symptoms, where possible, let the patient know if they have the option to request a female GP or nurse. If this is not possible, explain the situation with respect and provide assurances that a female chaperone will be present.



If it sounds like the patient may need some more time with the GP or nurse, perhaps due to nervousness, consider offering to book them a double appointment. However, if waiting for a double appointment would considerably delay the patient being seen, try to reassure them and encourage them to take the first available appointment. It is important for patients to be seen as early as possible.



Remind the patient that (unless COVID restrictions don't allow) they are able to bring someone they trust with them to the appointment, which may help them feel more at ease during the consultation.



You may also want to advise the patients that the appointment may involve a physical examination and wearing loose clothing can make it more comfortable for them to prepare for the exam.

GPs / Nurses



When you begin a gynae appointment, you might find it helpful to introduce yourself and let the patient know your pronouns, and then ask the patient what their pronouns are. You may also wish to remind them of your experience with this type of appointment to help put them at ease.



If a patient needs a physical examination, this can lead to discomfort and anxiety.

For example, patients who have experienced sexual trauma, who are transgender, have vaginismus or vulvodynia, or anyone from a religious / cultural background with teachings around modesty. In these scenarios, you may wish to run through why an examination is necessary and explain exactly what will be involved before you begin, so they can mentally prepare and tell you about any concerns they may have.



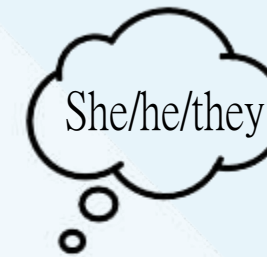
You may wish to ask if the patient would be happy for you to explain what you're doing at each step of the assessment, or if they would rather not be spoken to whilst being examined. You can reiterate that they are in control during any examinations and if they feel uncomfortable, it can be stopped at any time. It is worth asking for consent before touching the patient even if you may have already asked before the patient got undressed and use as gentle touch as possible. If a speculum is required during a vaginal / cervical examination, you may wish to suggest that the patient helps guide the speculum in themselves if it would make them feel more comfortable.



Some patients will outright refuse an examination. If this should occur, explain the examination thoroughly, and if the patient still refuses, then this should be treated sensitively.



When you have completed your examination, give the patient time to re-dress before inviting them to sit down to discuss the findings. Explain the likely cause of their symptoms (visual aids may help the patient to better understand), any other investigations they may need and the next steps, giving the patient the opportunity to ask any questions.



Some patients may have past trauma that could make the appointment more difficult. Keep an eye on the patient's body language and whether they seem elusive and quiet. If they seem uncomfortable, it may be appropriate to ask some gentle open questions to try to understand the cause of this.



Some people might have preferred words for parts of the gynae anatomy.

If this is the case, it may be useful to clarify what the patient means by their preferred words (e.g., does 'down there' mean vagina or anus?), this way it ensures the correct regions are being examined.

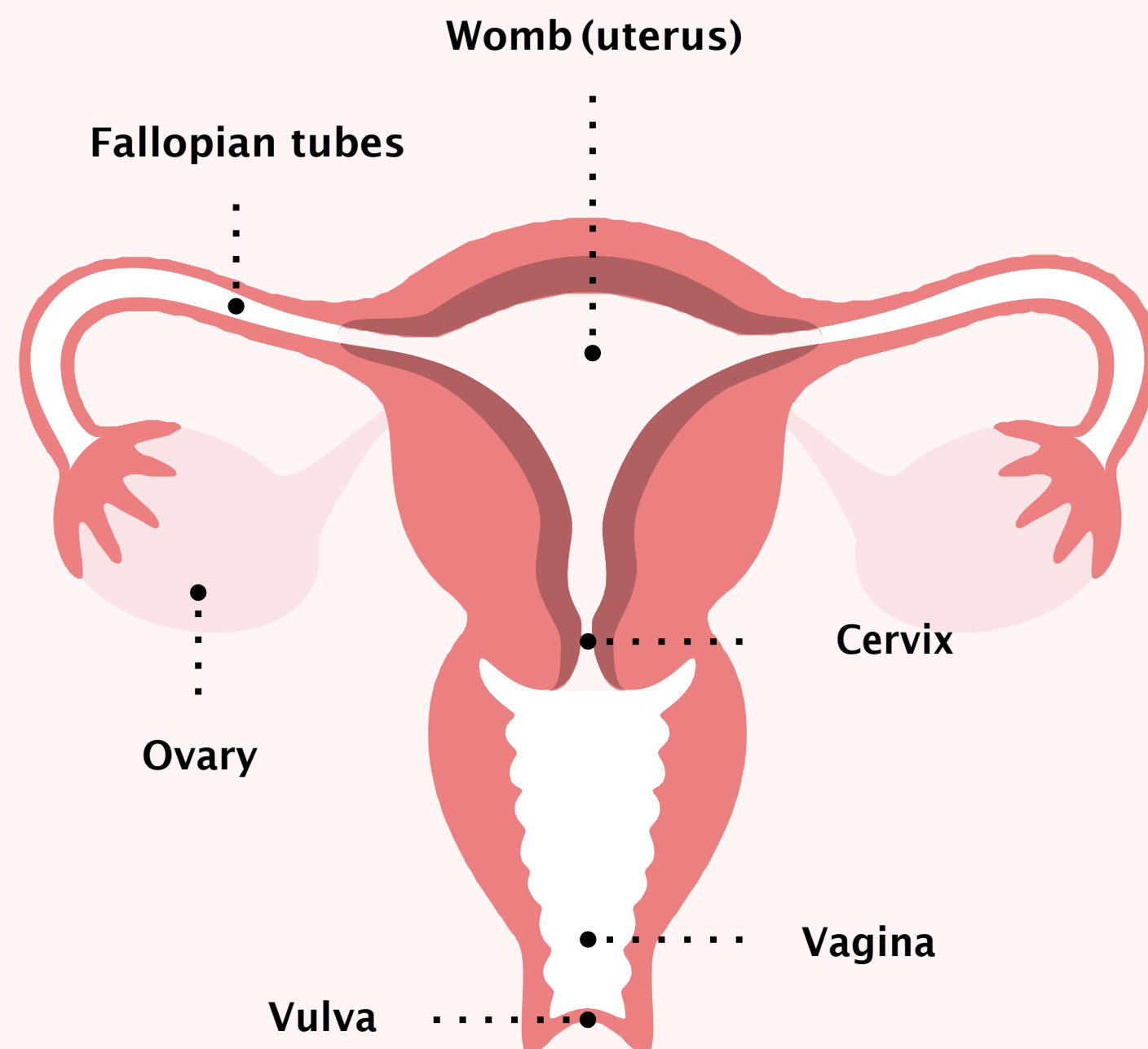
It's really important that your patient leaves the appointment with a clear idea of what will happen next.

These are just a few ways your surgery can champion gynae health - for more tips to help accommodate people with additional barriers visit:
<https://eveappeal.org.uk/news-awareness/tips-for-hcps-supporting-your-patients-with-extra-barriers/>

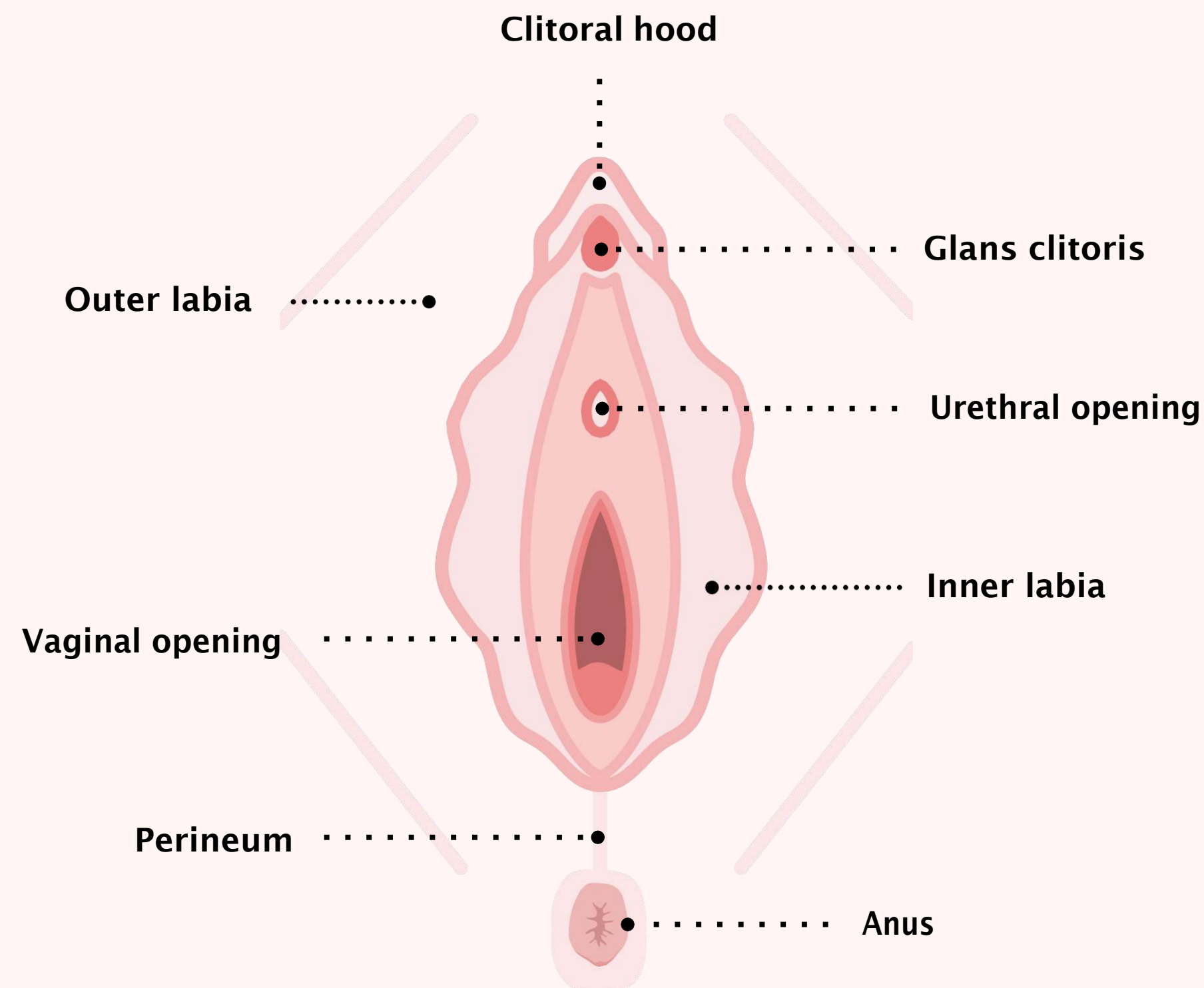
Know Your Gynaecological Anatomy

When explaining a diagnosis to a patient it may be helpful to use the diagrams below to help them understand their gynaecological anatomy.

Internal reproductive organs



External reproductive organs - vulval



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