



# **Handout III-1: Student Objectives & Agenda Handout**

## **Lesson III: Reproductive Health**

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### **Student Objectives:**

By the end of this lesson, students should be able to:

1. Locate and share two facts learned from sexual health websites (previous assignment).
  2. Perform self-exams and be knowledgeable about appropriate preventive health strategies (including strategies for menstruation).
  3. Understand the functions of the female reproductive system, including ovulation and menstruation.
  4. Understand the functions of the male reproductive system, including sperm production.
  5. Demonstrate an awareness of the stages in the process of human reproduction.
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### **Agenda (a 10-minute break will be included):**

- \_\_\_ Review last week's assignment
- \_\_\_ Instructor explanation of how to perform self-exams and when to have preventive exams
- \_\_\_ Outline of female reproductive organs – what they look like and how they function
- \_\_\_ Outline of male reproductive organs – what they look like and how they function
- \_\_\_ Overview of the process of human fertilization
- \_\_\_ Outline of this lesson's assignment
- \_\_\_ File handouts in binder

Available break activities today are:

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## ***Handout III-2: Steps for Most First Gynecological Exams***

1. Make an appointment. The appointment will last approximately an hour. Schedule your appointment between 10-20 days following the start of your period. If you miscalculated and are bleeding the day of your appointment, call to reschedule.
2. It is important not to apply vaginal medication and/or insert spermicide (foam, cream, jelly, film, suppository, or tablet) for about two days before the exam because they may remove or obscure abnormal cells, preventing the most accurate test reading. Also, avoid sexual intercourse for 24 hours before the appointment.
3. Go to your appointment approximately 15 minutes early to register, provide your insurance card, and fill out informational forms about yourself. Usually, the nurse will check your height, weight, and blood pressure before you see the doctor.
4. The medical assistant will call you into the examination room to gain more information. The questions usually include:
  - a. Are your periods regular, meaning can you predict on what day of the month you will start your period?
  - b. What was the date of your last period?
  - c. Are you sexually active? If so, how many partners do you have? Do you use a condom consistently and correctly every time you have sexual intercourse to stay safe?
  - d. Are you currently on birth control pills or taking any medications?
  - e. Is anything bothering you (this could include uncomfortable cramps, discharge) or do you think you might be pregnant?
5. You may be asked to provide a urine sample. This means you will be given a small plastic cup and be asked to go to the bathroom to urinate into it.
6. The medical assistant will give you a sheet and a gown to put on. Ask her if the doctor prefers to have the gown opening with the ties in the front or the back. After she leaves the examining room, undress and fold your clothes on the chair, put on the gown, and cover yourself from the waist down with the sheet. The examination table likely has a strip of paper covering it. Sit on top of the paper on the examining table and wait for the physician to enter. Usually, the physician will knock before entering. Tell the physician to

come in if you are ready. Say “just a minute” if you need a little extra time. The physician will wait outside the door until you say it is alright to enter.

7. The physician will first do a breast exam. He/she will ask you to lie down on the examination table. He/she will move the gown away from your body to have access to your breasts to do the exam. He/she is feeling for any masses or lumps within your breasts. Pay attention – the way the doctor does a breast exam on you is exactly how you can perform the same exam on yourself each month.
8. If you ever feel a lump in your breast, tell your physician. First your physician will feel the lump. If needed, a mammogram (x-ray of the breast) may be scheduled to look at the lump in greater detail in order to assess whether any further action is required.
9. During the next three parts of the exam, take a slow breath and try to relax. (The exam will be more comfortable if your muscles are relaxed.)
10. For the pelvic exam, the physician will ask you to scoot down to the end of the table, place your feet in the stirrups, and open the space between your knees. He/she will slide a speculum (instrument used to examine the inside) into your vagina, which allows the doctor to see your cervix for the exam. There are different-sized speculums; you can ask for a small one. If the speculum is metal, you can ask the doctor to run it under warm water to bring it to your body temperature, if this has not already been done. This will make the exam a little more comfortable. The physician will move the speculum a bit inside of you in order to look at the cervix.
11. To perform the cervical exam, with the speculum still inside your vagina, the doctor will swab the cervix with a tool that looks like a Q-tip with a long handle. This may feel mildly uncomfortable. This is the pap (or smear) test; it examines cells collected from the cervix to detect cancer or any abnormal cells that may lead to cancer.
12. The speculum will now be removed. The physician will do a manual pelvic examination by placing two fingers into your vagina while the other hand presses on the outside of your body below your pubic bone (below the stomach). This exam checks the pelvic organs to make sure they are in the right place, right size, and feel normal.
13. The last exam is the rectal exam. The physician will put lubricant on the glove and then slowly insert his/her gloved index finger into the vagina and the middle finger into the rectum. A rectal exam can be uncomfortable but will be finished in a short amount of time.

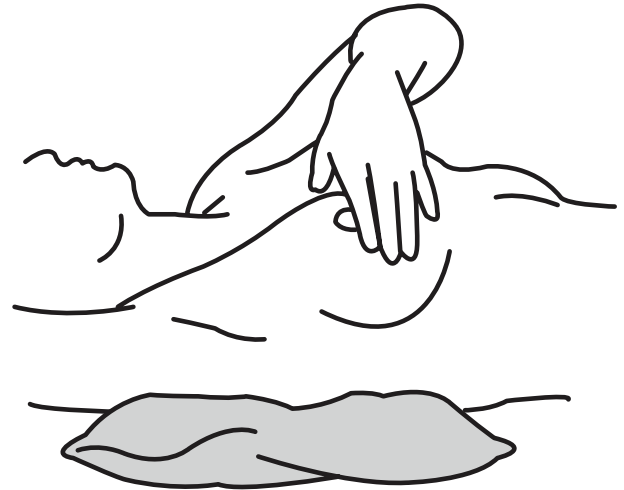
14. The exam is now complete. The physician usually leaves for a while to allow you get completely dressed. You may notice some lubricant and/or vaginal discharge on the examination table paper or on your body. This is normal. The physician will return to the examination room to answer any questions or concerns. You can ask about the procedure for informing you of the results (the results usually take a few weeks) – usually someone will call you with the results or they may be mailed to you.
15. Before leaving the room, leave the sheet and gown on the examination table. (Or there might be a special, labeled trashcan/laundry basket to put them in.) The nurse assistant will clean the room after you leave.
16. Before leaving the office, check in with the desk clerk to find out if you have to pay anything and whether or not you need to make a follow-up appointment.



## Handout III-3: Self Breast Examination

1. Lie down and place your right arm behind your head. The exam is done while lying down, not standing up. This is because when lying down, the breast tissue spreads evenly over the chest wall and is as thin as possible, making it easier to feel all the breast tissue.

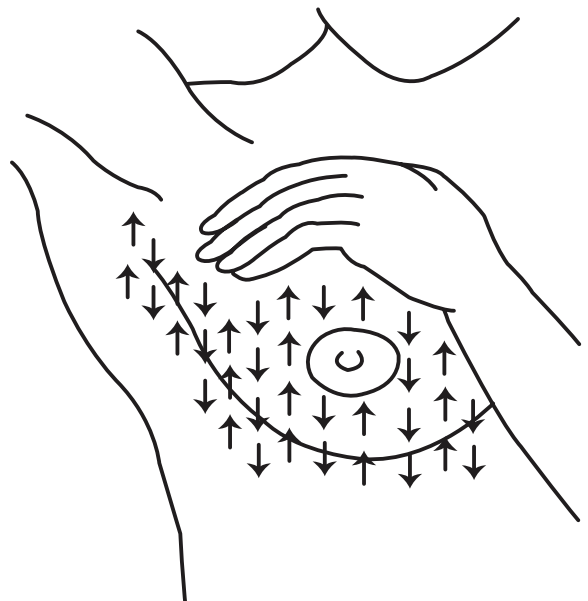
2. Use the finger pads of the three middle fingers on your left hand to feel for lumps in the right breast. Use overlapping coin-sized circular motions of the finger pads to feel the breast tissue.



3. Use three different levels of pressure to feel all the breast tissue. Light pressure is needed to feel the tissue closest to the skin; medium pressure to feel a little deeper; and firm pressure to feel the tissue closest to the chest and ribs. It is normal to feel a firm ridge in the lower curve of each breast, but you should tell your doctor if you feel anything else out of the ordinary. If you're not sure how hard to press, talk with your doctor or nurse. Use each pressure level to feel the breast tissue before moving on to the next spot.

4. Move around the breast in an up-and-down pattern starting at an imaginary line drawn straight down your side from the underarm and moving across the breast to the middle of the chest bone (sternum or breastbone). Be sure to check the entire breast area going down until you feel only ribs and up to the neck or collarbone (clavicle).

- There is some evidence to suggest that the up-and-down pattern (sometimes called the vertical pattern) is the most effective pattern for covering the entire breast without missing any breast tissue.



5. Repeat the exam on your left breast, putting your left arm behind your head and using the finger pads of your right hand to do the exam.
6. While standing in front of a mirror with your hands pressing firmly down on your hips, look at your breasts for any changes of size, shape, contour, or dimpling, or redness or scaliness of the nipple or breast skin. (The pressing down on the hips' position contracts the chest wall muscles and enhances any breast changes.)
7. Examine each underarm while sitting up or standing and with your arm only slightly raised so you can easily feel in this area. Raising your arm straight up tightens the tissue in this area and makes it harder to examine.
8. If you find any lumps or changes, make an appointment to see your physician to have it checked. Most lumps are not cancer, but they need to be checked in case any treatment is needed.

If you want more information about BSEs, cancer treatment, or mammograms, go to the following websites

- Sexuality and U ([www.sexualityandu.ca](http://www.sexualityandu.ca)) is an educational website – has videos of first steps in exam with animation of the procedures.
- Imaginis ([www.imaginis.com](http://www.imaginis.com)) is a women's health resource site – search using the key phrase "Breast Self-Exam video" to see animation of how to examine yourself.
- Young Women's Health ([www.youngwomenshealth.org](http://www.youngwomenshealth.org)) – has a gynecological section with information on many medical conditions and procedures.
- National Cancer Institute ([www.cancer.gov](http://www.cancer.gov)) – has information on detection, facts, and treatment of all types of cancer, including breast and cervical cancer.
- Mayo Clinic ([www.mayoclinic.com](http://www.mayoclinic.com)) – has a video titled Mammogram for Breast Cancer – What to Expect. It is helpful in preparing women to take their first mammogram.

Steps and illustrations are adapted from American Cancer Society, Inc. (2009).



## **Handout III-4: Testicular and Rectal Exam**

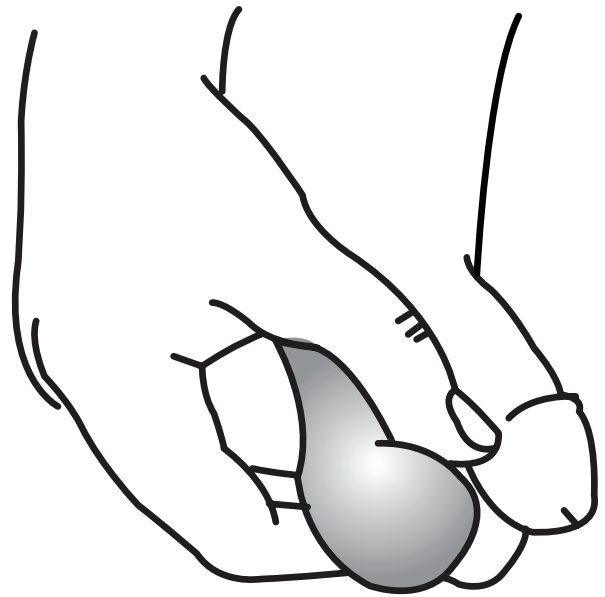
It is recommended that a physician carry out a preventive exam once a year for adult males (or every 2 years for young adults in their 20s) (Parker, n.d.). The exam is usually part of a regular physical and involves the following:

- A manual exam of the penis and testicles to make sure that everything is normal and to check for testicular cancer. During this exam, you may be asked to turn your head and cough. This is because the doctor is checking for a hernia (i.e., an injury where the abdominal wall may allow intestines to poke through). When you cough, the doctor is able to feel a hernia if there is one (this can be fixed with surgery). This manual exam is also likely to be carried out on males who are not yet adults (e.g., ages 15-18) as part of a routine health check-up.
- In men over 50 (or over 40 for African Americans or people with a family history of cancer) or those with any symptoms (e.g., increased need to urinate), a test for an enlarged prostate gland (such an enlargement may be linked to prostate cancer) will be carried out. Like breast cancer, this can be cured, if found early. This involves:
  - The physician will insert his/her gloved lubricated fingers into the anus to inspect for any abnormalities. Then, the physician will spread your buttocks and ask you to take a deep breath in while he/she inserts his/her finger to check the prostate for abnormalities. Like the female exam, the male exam is not painful but may be uncomfortable (less likely if you try to relax) and usually only lasts a couple of minutes (Duke, 2010).
  - A blood test is sometimes given to check the levels of a hormone called PSA that can be an indicator of a prostate problem.
- Self-exams should be carried out monthly as follows ([http://www.ehow.com/how\\_4688583\\_perform\\_testicular-self-exam.html](http://www.ehow.com/how_4688583_perform_testicular-self-exam.html)). It is recommended that the self-exam be performed right after you take a shower or bath as the scrotum is more relaxed.
  1. Place your thumb on top of the testicle and your index and middle fingers underneath. You can use one hand or both.
  2. Gently roll the testicle between the thumb and fingers several times. Repeat with each testicle.

The testicles should feel smooth and soft. If you find a lump make an appointment to report it to your physician. Most lumps are not cancer, but you should have them checked to make sure.

If you want more information on any of these men's health issues, visit these websites:

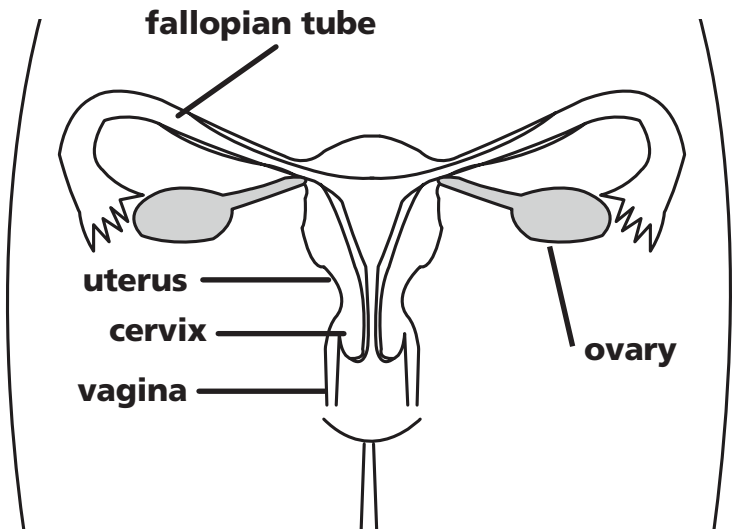
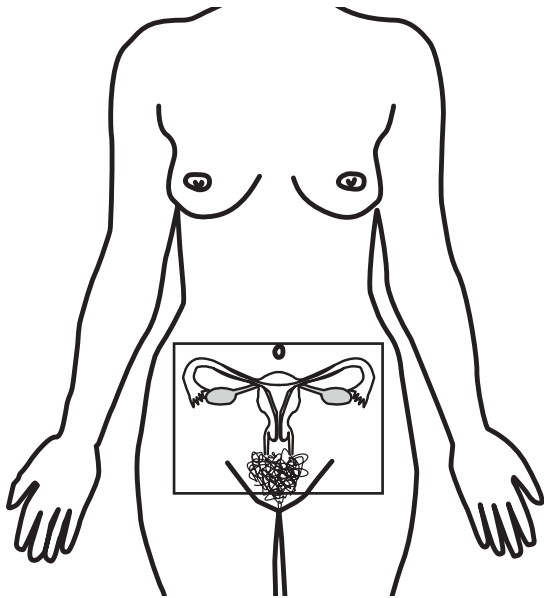
- National Cancer Institute ([www.cancer.gov](http://www.cancer.gov)) has information on all types of cancer, including testicular and prostate.
- 5 Minute ([www.5minute.com](http://www.5minute.com)) has a non-explicit video of someone receiving a prostate exam (with doctors discussing the process and why it is important). Type "Performing a Prostate Exam" into the search box to view video.







## Handout III-5: Vocabulary Chart on Female Reproductive Organs



Common Name	Medically Correct Name	What Does It Look Like? (Refer to diagram)	Function
Womb	Uterus	A hollow muscular organ in the pelvic cavity. Shaped like an upside-down pear. The tapered end connects to the cervix and extends down to the opening of the vagina.	Where menstrual blood develops, or when a woman becomes pregnant, the fetus grows.
Tubes	Fallopian tubes	Two tiny tubes that extend from the top of each side of the uterus towards the ovaries. They are approximately four inches long.	Ovum (egg) travels down fallopian tube to the uterus from the ovary.
Neck of the womb	Cervix	Opening between the uterus and the vagina.	Tiny opening through which menstrual blood and cervical mucus pass. Opens during childbirth to allow baby to pass through.
	Ovaries	Two organs the size and shape of large grapes, located on both sides of the uterus. Sometimes they can be felt cramping during ovulation.	Two functions: 1. stores and releases ova (eggs); 2. produces female hormones needed for reproduction (e.g., estrogen, progesterone and testosterone this is know as male hormone, but females also produce a small amount).

Adapted from The Boston Women's Health Book Collective (2005); Strong, et al. (2005).

From C. Davies & M. A. Dubie, *Intimate Relationships and Sexual Health*. Shawnee Mission, KS: AAPC Publishing. ©2012. [www.aapcpublishing.net](http://www.aapcpublishing.net)



## **Handout III-6: Slang Vocabulary for Terms Used in This Lesson**

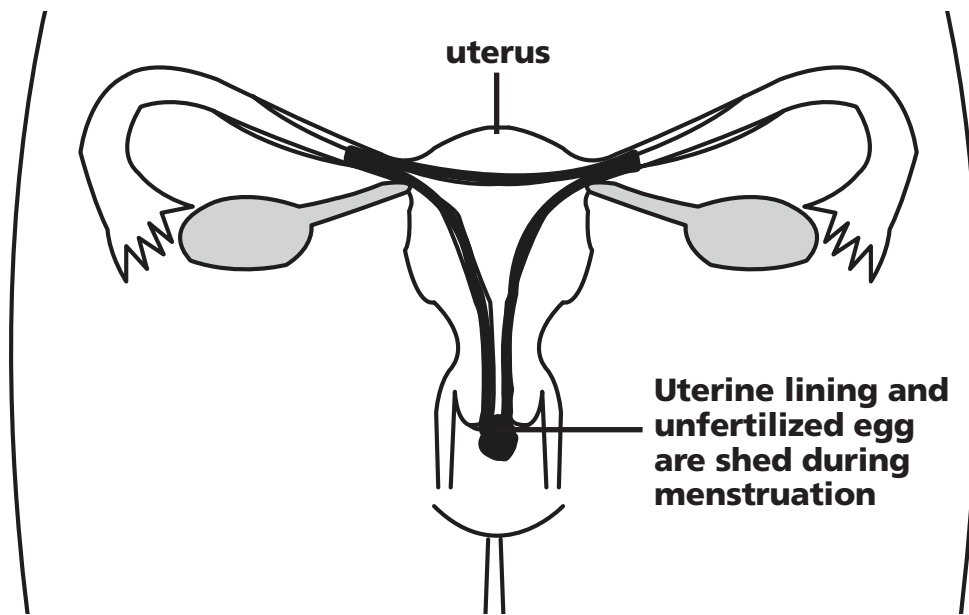
<b>Menstruation</b>	<b>Pregnant</b>	<b>To fertilize (impregnate)</b>
Aunt Flo is visiting	About to drop	Get one past the goalie
Cousin Red is here	In the family way	Do the trick
On the rag	Banged up	Fix her up/knock her up
The red tide is rolling	Knocked up	Spoil her shape
I'm late (no menstruation)	With child	
Ride the cotton pony	Bun in the oven	
Sally	Expecting	
Delicate (verb)	Preggers	
The curse	Up the duff	
Arsenal's playing at home	Waiting for the patter of little feet	
To come-on		
Female trouble		
Have the painters in		
Monthlies		
On the blob		
Period		
Time of the month		

From *Online Dictionary* ([www.onlineslangdictionary.com](http://www.onlineslangdictionary.com)); *Sex Lexis* ([www.sex-lexis.com](http://www.sex-lexis.com)).



## **Handout III-7: Menstruation**

1. During ovulation, an ovum is released from one ovary.
2. A fingerlike structure at the end of the fallopian tube sweeps the egg from the ovary into the tube.
3. The ovum travels through the fallopian tube and down to the uterus.
4. The lining of the uterus expands and thickens. New blood vessels form, along with spongy tissues to cushion the ovum.
5. By the time ovulation occurs, the uterine lining has doubled in thickness.
6. If the ovum is not fertilized, pregnancy does not occur.
7. The ovum does not implant itself in the uterus, but disintegrates after a few days.
8. The uterine lining breaks down and is shed during the menstrual cycle.
9. The tiny cervical canal opens up slightly, allowing the collected blood and tissue to leave the uterus.
10. The menstrual discharge dribbles through the cervical canal, down the vaginal walls, and out the vaginal opening.
11. The blood doesn't come out all at once, but over a period of 3-7 days.





## **Handout III-8: Suggestions for Relieving Menstrual Symptoms**

- Some women (but not all) experience problems like breast tenderness and swelling, abdominal bloating, irritability, cramping, depression, or fatigue at menstruation. Some women also report positive changes such as increased energy, heightened sexual arousal, or a general feeling of well-being.
- Some women can experience problems immediately before menstruation. If these are severe, they are known as premenstrual syndrome (PMS) and can include depression, nervousness, irritability, anxiety, weight gain, headache, fatigue, and food cravings (especially for salt, sugar, or chocolate).

Suggestions to relieve menstrual symptoms include:

- **Modify your diet.** Moderate amounts of protein and substantial amounts of healthy carbohydrates (such as fresh fruits, some vegetables, whole-grain breads and cereals, beans, rice, and pasta) are recommended. Frequent small meals may be better than two or three large meals. Cut back on or avoid caffeine, which is found in tea, coffee, colas, and chocolate. Caffeine elevates estrogen levels that increase symptoms of PMS, including breast tenderness.
- **Drink plenty of water.**
- **Exercise.** Moderate exercise is suggested, but be sure to include a daily regimen of at least 30-45 minutes of movement. Aerobic exercise brings oxygen to body tissues and stimulates the production of endorphins – chemical substances that help promote feelings of well-being.

Suggestions to relieve cramps include:

- Get rest, sleep, and relaxation (e.g., walking, yoga), as these can help reduce pain from uterine and abdominal cramping.
- Apply heat. Use heating pad or take a warm bath to soothe muscles.
- Get a massage. Lower-back massage or acupuncture, shiatsu, or polarity therapy is helpful for many women.
- Try herbal remedies such as herbal teas.
- Over-the-counter pain reliever such as ibuprofen or naproxen sodium, used when you notice the first sign of your period, can help to reduce the severity of cramps.
- If pain cannot be controlled with these methods, seek medical advice. The symptoms may indicate an underlying problem that requires treatment.

If you want more information on any aspect of menstruation, you can go to:

- [www.goaskalice.columbia.edu](http://www.goaskalice.columbia.edu) this is a health question-and-answer Internet resource maintained by Columbia University. Click on "Sexual Health."
- [www.womenshealth.gov](http://www.womenshealth.gov) from The National Women's Health Information Center is a federal government source for women's health information.



## **Handout III-9: Tips to Stay Prepared for Your Menstrual Cycle**

1. Keep an accessible supply of pads/tampons (e.g., in purse, locker, or bathroom closet).
2. Have a change of clean underwear (e.g., in locker, purse, in desk drawer at work) in case you bleed through your clothes.
3. Carry some coins in case you run out of supplies and need to purchase a pad/tampon in the women's restroom.
4. If you do start your period and you don't have a pad/tampon, ask a trusted female if you can borrow an unused one from her.
5. Wear darker-colored clothing and underwear during your period. This helps to disguise any leaks that may happen.
6. Keep track of your menstrual cycle by marking off days on a written calendar, diary, or computer calendar. On the product Kotex website ([www.kotex.com](http://www.kotex.com)), you can find a personal tracker and calculator to predict your next period electronically.
7. Notice when you change your sanitary pad or tampon and the amount of blood absorbed in order to make the necessary adjustments in the thickness of the sanitary pad or tampon you are using. Some women wear a thicker pad/tampon at the beginning of their menstrual cycle and a thinner one at the end of their cycle.
8. To dispose of a sanitary pad or tampon, it is recommended that you wrap it in toilet paper (or the special labeled paper bags provided in some public restrooms for this) and put it in a trash can. Avoid flushing it, as this can often cause plumbing blockages.



## Handout III-10: Sanitary Pads or Tampons, Which Is Best?

Some women use sanitary pads, others use tampons. This is a personal choice. Many women use both at different times of their period. Here are some advantages and disadvantages to think about when choosing products.

	<b>Advantages</b>	<b>Disadvantages</b>
<b>Pads</b>	Easy to use.	Bulkier than tampons to carry in purse or backpack.
	Allow you to become familiar with amount of blood each day to help decide whether to change the type of pad (e.g., wing/no wings and thickness) to use.	If you wear a pad with tight clothes like jeans or tight stretch shorts, it might be visible.
	Some women prefer not to insert an object into their vagina.	You can't go swimming while wearing a pad.
<b>Tampons</b>	Able to swim while wearing a tampon.	Takes more practice to get used to.
	Does not show under any of your clothes.	Can be uncomfortable if you suffer from menstrual cramps or spotty bleeding (due to vaginal dryness but gel lubricants can minimize this feeling)
	Small and, therefore, easy to carry around, even fitting in something as small as a coin purse.	Slight risk of toxic shock syndrome – serious but uncommon bacterial infection caused by not changing tampons regularly or not making sure hands are clean before inserting tampon. Anyone using tampons should be familiar with symptoms and prevention. See Medicine Health ( <a href="http://www.medicine-health.com">www.medicine-health.com</a> ) by searching "Toxic Shock Syndrome" for more information.
	Very comfortable once used to using them.	



## Handout III-11: Vocabulary Chart on Male Reproductive Organs

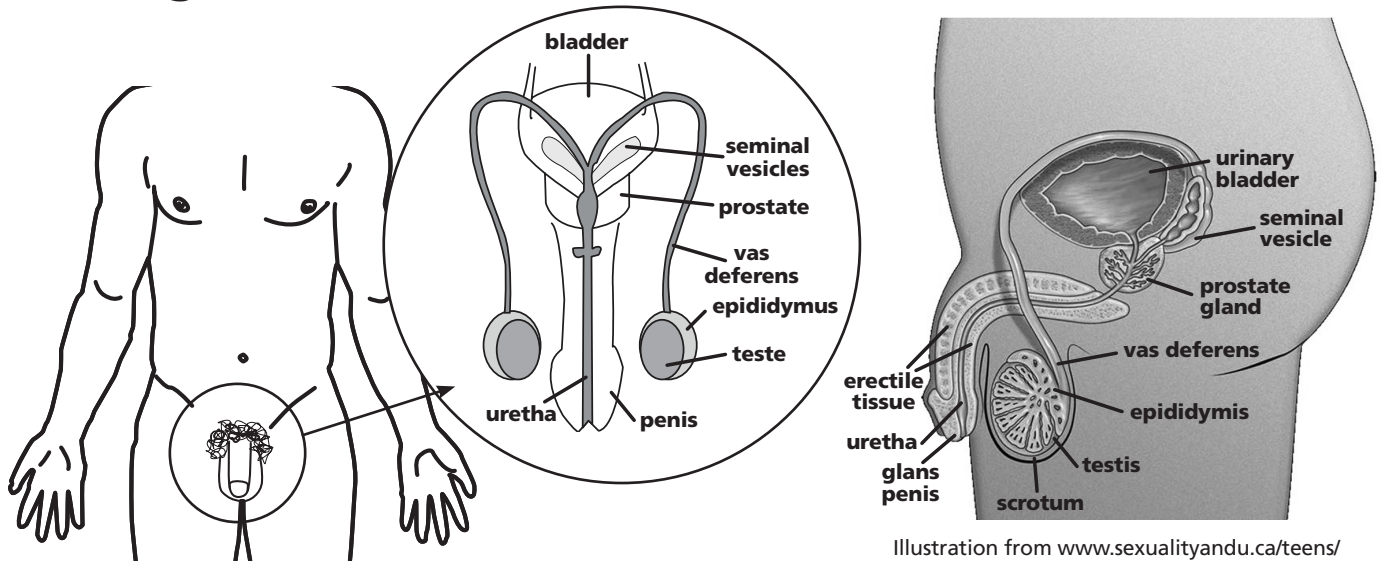


Illustration from [www.sexualityandu.ca/teens/what-6-2.aspx](http://www.sexualityandu.ca/teens/what-6-2.aspx). Used with permission.

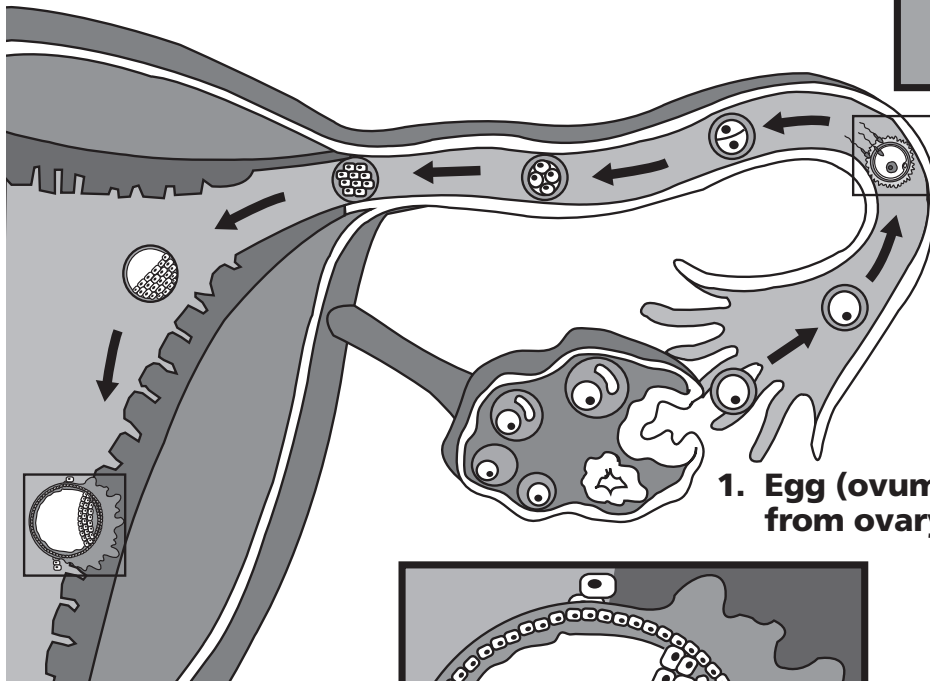
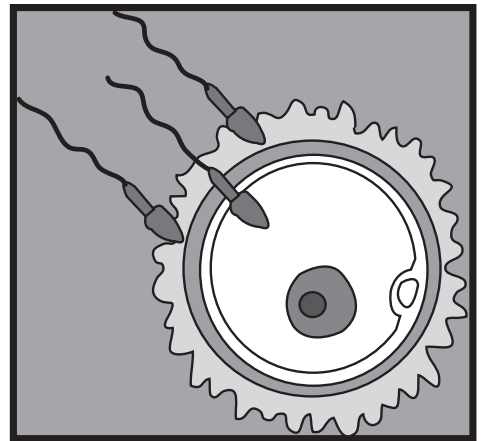
Common Name	Medically Correct Name	What Does It Look Like?	Function
Balls or nuts	Testes (or testicles) (testis singular)	Inside the scrotum; olive-shaped about 1.5 inches long and 1 inch diameter	Sperm and hormone production
	Epididymis	2 coiled tubes connected to each testis (one for each)	Help sperm mature (2 to 12 days) and develop greater swimming ability
	Prostate	A muscular gland about the size and shape of a walnut	Makes some of the fluid in the semen and prevents urine and semen from mixing
Sperm ducts	Vas deferens	Two tubes 12-20 inches long. Each starts at the epididymis and joins the prostate gland before ending at the urethra	Carries sperm from the epididymis to the urethra
	Seminal vesicle	Two glands, each the size and shape of a finger, at the back of the bladder.	Secretes more than half of the fluid that becomes semen.
	Urethra	A long narrow tube	Carries urine from the bladder out through penis; also carries semen out during ejaculation

Adapted from information from Currington (n.d.); Strong et al. (2005).

From C. Davies & M. A. Dubie, *Intimate Relationships and Sexual Health*. Shawnee Mission, KS: AAPC Publishing. ©2012. [www.aapcpublishing.net](http://www.aapcpublishing.net)



## Handout II-12: The Reproductive Process

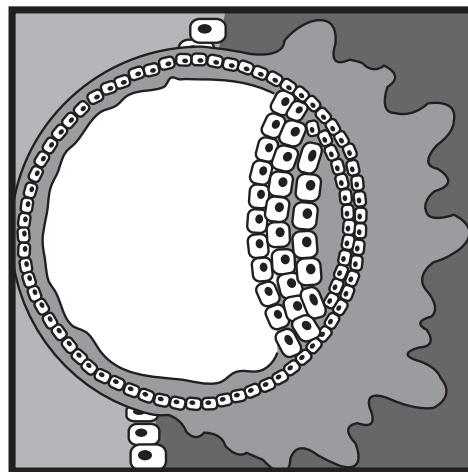


3. Sperm fertilizes the ovum to make a zygote.

2. Male and female have vaginal intercourse.

1. Egg (ovum) released from ovary.

4. Zygote implants into the wall of uterus and becomes an embryo.



5. Over nine months, the embryo grows into a baby.







## **Handout III-13: Assignment**

1. At the start of the next lesson (Lesson IV), we will have a quiz on some of the information we covered in Lessons II and III. It will be a 10-item true-or-false quiz. Review the notes in your binder to prepare.
2. To prepare for the next lesson on contraception, test yourself on what you know about getting pregnant (conception or fertilization).

### **Pregnancy Facts Quiz**

**Circle** True or False for your answer.

1. A woman can only get pregnant if a man penetrates a woman's vagina with his penis and ejaculates inside her. **True or False**
2. When considering whether a condom is safe to use, the only thing you have to look for is whether the package has been opened. **True or False**
3. A woman can't get pregnant the first time she has sexual intercourse. **True or False**
4. Minors can get condoms and other birth control without parental consent. **True or False.**
5. Having sexual intercourse in water (e.g., pool or hot tub) will prevent pregnancy. **True or False**
6. A woman can get pregnant before, during, and immediately after her period. **True or False**
7. There are some things a woman eats that might make the oral contraceptive pill ineffective. **True or False**
8. There is no effective birth control method that can be used once sexual intercourse has been completed. **True or False**
9. If a man withdraws his penis from the woman's vagina before he ejaculates, she will not get pregnant. **True or False**
10. Bathing or douching after sexual intercourse is not effective in preventing pregnancy. **True or False.**