

# Chapter 4: Counseling and Education

On completion of this section, the learner will be able to:

1. Describe reasons why an eligible client may not want to obtain a Pap test.
2. Describe communication and counselling strategies that are important to consider before, during and after a Pap test.

## Learning Objectives

Clients have different reactions to having a Pap test. Some are quite calm and relaxed, while others are extremely apprehensive, embarrassed or fearful and find the examination very uncomfortable. Past experiences with pelvic exams, comfort with one's body and sexuality, and the attitudes and behaviors of the HCP during an exam can all affect a client's level of anxiety during a Pap test.<sup>1</sup>

### Reasons why an eligible client may not want to obtain a Pap test:

- Lack of information and understanding of Pap test
- Fear of the test
- Fear of cancer
- Fear of pain
- Embarrassment
- Modesty
- Lack of access to HCP
- One or more negative experiences
- Religious, cultural and/or social factors
- Inability to understand an invitation to participate in Pap test clinic because:
  - It is in a language they do not understand
  - They are unable to read and/or write in their own language
  - Due to education level they are unable to understand relevance and importance
- Difficulty in communicating with some HCPs
- History of assault or trauma
- Lack of childcare facilities
- Accessibility issues
- Other peoples' attitudes regarding the Pap test (i.e. partner, family, religious leaders)<sup>2</sup>

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To make the Pap test a positive experience, it is important that the HCP performing the Pap test talk to the client before, during, and after the exam in a level of language that is understandable to the client. The HCP should have a non-judgmental, gentle, sensitive, and caring attitude and create an atmosphere of trust, privacy, and respect. Communication is important. A good HCP-client relationship will help the client to relax, reduce their anxiety, enhance their learning, and decrease their discomfort. Give the client control of the situation.

### **Chaperones**

To understand the recommendations surrounding intimate exams in a clinical setting, HCPs in Winnipeg should review the Winnipeg Regional Health Authority's Primary Care Practice Guideline, "Patient Chaperones in Primary Care Clinics", Guideline Number: PCPG8.

HCPs practicing outside of Winnipeg should refer to their clinic or region policy regarding the presence of a chaperone or attendant during the Pap test examination.

### **Before the Exam<sup>1</sup>**

- Introduce yourself to the client before they change for the exam. Meeting them before the exam when they are dressed and sitting, as opposed to lying in the lithotomy position in a gown, will help them to feel less vulnerable and more in control of the situation.
- Use open-ended questions to assess the client's learning needs. For example, "what have your friends told you about Pap tests?" or "what has been your experience with your previous Pap tests?"
- Explore sexual and reproductive issues. For example, you could ask, "how do you protect yourself against sexually transmitted infections?"
- Listening is important. Focus on the client's feelings, fears and concerns, and dispel any myths. Never talk down to the client. Be sure to acknowledge each concern seriously and professionally.

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- Explain each of the following in simple, concise lay terms:
    - Female anatomy
    - Optional positions for the exam (e.g., Lithotomy, M-Shaped, Knee-Chest Position – see Chapter 8 for a brief explanation of each position)
    - Purpose of the exam
    - Instruments
    - Procedure (external, speculum exam and Pap test)
    - Length of procedure and sensations (pressure, mild cramps, no pain) experienced during the Pap test
    - That there may be some minor painless spotting a day or two following the Pap test
  - Tell the client that you will tell them what you are going to do before you do it and that if they feel any pain or anxiety at any time during the Pap test that you will stop what you are doing until they feels more comfortable. If the client cannot speak, suggest that they raise a hand to indicate to stop the exam.
  - Use language that is consistent with the client’s developmental age and educational level.
  - Visual aids can benefit some clients. Show the client a speculum and how it will be inserted into the vagina to visualize the cervix and a wooden spatula and cytobrush. Allow them to handle the speculum if desired. Give the client written information on Pap tests. Consider using the CervixCheck Image Gallery to explain the test.
  - Assess the client’s need or desire for a chaperone. The presence of a chaperone during these procedures may comfort the client and protect them and the HCP from physical, emotional, or legal problems. Inform the client of relevant chaperone policy pertaining to your facility or region. The HCP can offer the client the option of bringing a friend into the examination, however, the chaperone would also need to be present in these circumstances.
  - Ensure privacy. Make sure that the drapes and the door to the exam room are closed.

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## During the Exam<sup>1</sup>

- Create an environment that is comfortable. Ask the client if they would like the head of the exam table raised. Provide reassurance throughout the exam.
- Tell the client what you are going to do before you do it, e.g. “I am now going to examine the outside of your labia.”
- Reinforce to the client that if at any time they feel uncomfortable, you will stop the test.
- Avoid comments that may have sexual overtones, such as “spread your legs, dear.” “I am going to stick it in now” and “I am coming out now.” Be aware that the word “touch” is often associated with physical intimacy, and should be avoided being used by the HCP. Avoid referring to the size of the speculum.
- Offer the client a mirror to visualize what you are doing and to learn about their anatomy. Emphasize normal anatomical structures.
- Normalize the client’s feelings and experience. Ask them “How are you feeling about coming to have your Pap test today?” If the client indicates feeling nervous or embarrassed the HCP can normalize their feelings and discuss the root of their concerns.

## After the Exam<sup>1</sup>

This is a great opportunity to reinforce learning and to answer any questions that the client may have. Ask the client to sit up on the exam table and if time permits, inform the client that you will leave the room while the client gets dressed and that you will return in a few minutes to discuss follow-up. If time does not permit, proceed to summarize and discuss the exam findings with the client. Discuss any concerns or findings that may need follow-up by another HCP or any specialist referral.

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HCPs need to be aware of their individual scope of practice and when consultation is required. All abnormal findings need to be investigated appropriately or referred to a specialist.

**Important Information**

- Indicate how the client will receive the Pap test results. Pap test results usually go to the Pap test provider for any necessary follow up. It is the Pap test provider's responsibility to ensure processes are in place at their facility for normal and abnormal results, referrals etc. Clients should be encouraged to contact their HCP and/or CervixCheck for results. A client can request her own cervical cancer screening history on the CervixCheck website at <https://www.cancercare.mb.ca/screening/cervix>
- Elicit and respond to the client's questions and provide written information and instructions as appropriate. Provide the client with relevant [CervixCheck resources](#) to reinforce learning.

**Recommended Reading**

**CervixCheck Resources**

**The College of Physicians and Surgeons of Manitoba**  
[Standards of Practice of Medicine](#)

**The Winnipeg Regional Health Authority**  
Primary Care Practice Guideline: Patient Chaperones During Intimate Physical Examinations, [Guideline Number: PCOG #7](#)

1. Why might an eligible client not want to obtain a Pap test?
2. What communication and counselling strategies are important to consider before, during, and after conducting a Pap test?

**Chapter 4 Self-Test**

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## References

<sup>1</sup> Saskatchewan Institute of Applied Science and Technology, Faculty of Primary Care Nurse Practitioner Program. (2000). Pap Testing and Bimanual Exam. Adapted with permission.

<sup>2</sup> National Health Services Cervical Screening Program. (1998). Resource pack for training smear takers. United Kingdom.