

Are you experiencing difficulty with your bowel, wind or urinary urges? If yes, please state which?	yes	no
Do you lose control when laughing, sneezing, coughing or jumping or moving quickly?	yes	no
Are your bowel movements or urination painful?	yes	no
Do you experience a sensation of pressure in your vagina or rectum or notice any protrusions from your orifices? Has anyone ever said you have a prolapse? If yes, please give further detail.	yes	no
Do you ever experience pain with intercourse or sexual stimulation? If yes, please give details.	yes	no
Do you ever experience pain in your genitals with or without sexual intercourse?	yes	no
Do you ever experience pain in the joints of the pelvis?	yes	no
Do you currently or have you ever had to wear incontinence pads?	yes	no
Are you currently pregnant?	yes	no
Have you recently or ever had a baby? Do you have abdominal separation?	yes	no
Are you going or been through the menopause?	yes	no
Have you ever undergone gynaecological surgery? Hysterectomy, fibroids etc	yes	no
Are you or have you ever been an elite athlete?	yes	no
Do you have a history of low back pain or any other type of back pain?	yes	no
Have you ever sustained an injury to the pelvic region?	yes	no
Do you suffer from constipation or regularly strain to go to the toilet?	yes	no
Do you or have you ever had a chronic cough or respiratory / breathing dysfunction?	yes	no
Are you overweight?	yes	no
Do you frequently lift heavy weights?	yes	no
Are you incontinent overnight?	yes	no

If you answered Yes to any of the above you would benefit from an assessment with a Womens Health Physio before commencing an exercise programme.

Contact me:
Wendy Brown 0220306639
wendy@positivelyyou.co.nz