

Name: \_\_\_\_\_ MGH # \_\_\_\_\_ Date of Birth: \_\_/\_\_/\_\_ Date: \_\_/\_\_/\_\_

**Facing Pelvic Pain  
TREATMENT MAP**

This tool will allow you to communicate and map treatment over time. Your health care providers can use this information to understand your diagnosis and to plan future treatments. This document is based on official guidelines as well as multidisciplinary provider experience.

**My primary symptoms are:**

Special considerations I wish to communicate (exam anxiety, gender, requests):

Timeline and story of symptoms:

<b>I Have the Following Conditions:</b>	<b>Yes</b>	<b>Suspected</b>	<b>No</b>
<b>Pelvic Conditions:</b>			
Pelvic/ lower abdominal pain			
Urethra and bladder pain:			
<input type="checkbox"/> Pain as my bladder fills with urine that is relieved by urination			
<input type="checkbox"/> Pain during urination			
<input type="checkbox"/> Pain that worsens after urination			
<input type="checkbox"/> Pain on the skin / vulva / tip during urination			
Perineum (bicycle seat) pain			
Vulvar/ vaginal pain			
Clitoral pain or unwanted arousal			
Testicular/ penile pain			
Anal/ rectal pain (incl. pain with bowel movement)			
Pain with sitting relieved by standing			
Lubrication or erection trouble			
Sexual pain			
Pain with menses			
Endometriosis			
Irritable bowel syndrome			
Pelvic floor muscle dysfunction			
Recurrent urinary tract infections			
History of sexually transmitted infection			

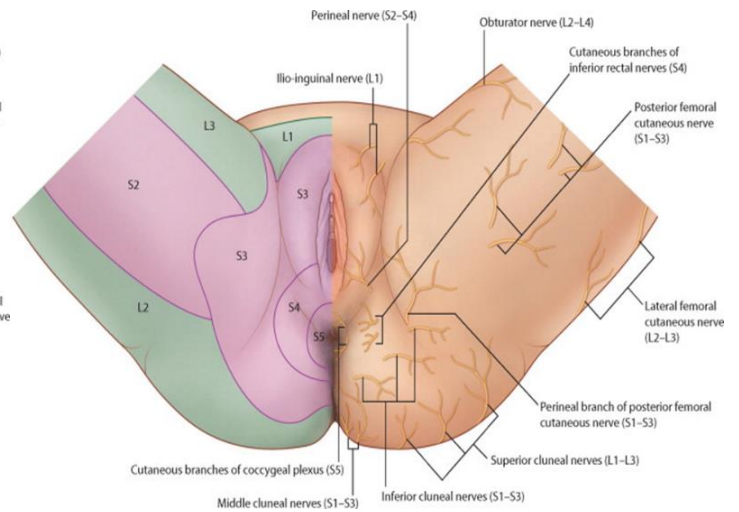
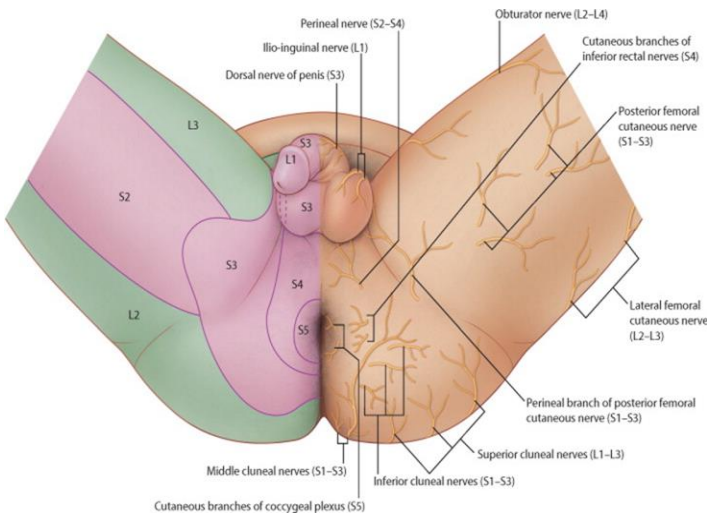
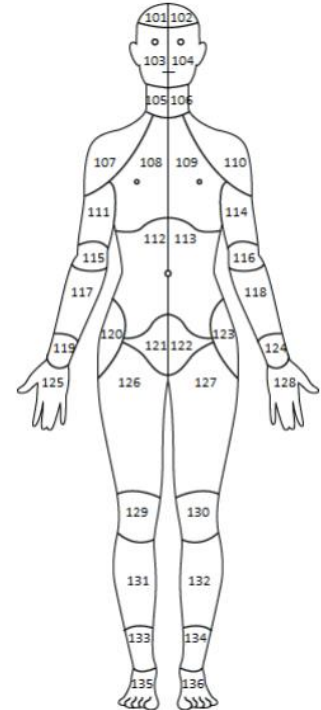
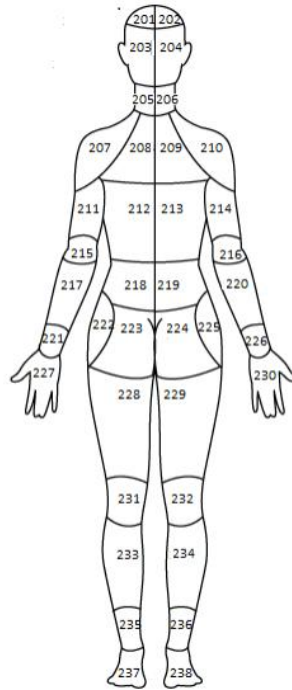
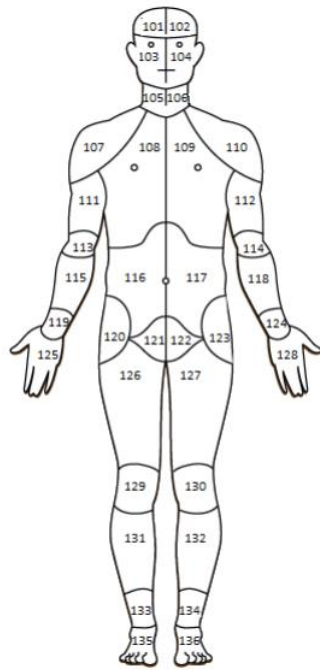
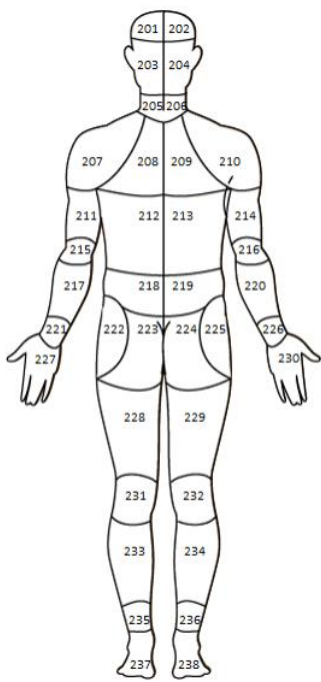
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Pelvic cancer			
Urinary incontinence			
Bowel incontinence			
Constipation			
Blood in the stool			
Pelvic organ (bladder, rectum, uterus) prolapse			
Prostate problems			
Difficulty starting urine stream			
Incomplete emptying of the bladder			
Urinary urgency, frequency, nighttime urination			
Blood in the urine			
Neurogenic bladder or bowel			
Balance problems or leg or arm weakness			
Varicose veins on <input type="checkbox"/> legs <input type="checkbox"/> buttocks <input type="checkbox"/> privates			
Other pelvic conditions:			
<b>Conditions Affecting other Areas of the Body:</b>	<b>Yes</b>	<b>Suspected</b>	<b>No</b>
GERD (heartburn)			
Migraines			
Fibromyalgia			
TMJ (jaw pain)			
Nerve pain – spine or back, or sciatica			
Nerve pain – peripheral e.g. sensitive feet			
Loss of hair on extremities			
Palpitations (rapid heart beat)			
Ringing in the ears			
Asthma or respiratory problems			
Nausea			
Dizziness			
All over body pain or joint pains (where?)			
Vision Changes			
Depression or anxiety			
History of sexual abuse or other trauma			
Dependence on medication alcohol or drugs			
<b>Other Medical Problems or Surgical History:</b>	<b>Year of Diag</b>	<b>Doctor</b>	<b>Comments</b>

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Please mark ALL areas on the body maps (not just the pelvis) where you have had pain in the last week.

Area # or letters	Left Right or Center	No Pain										Pain as bad as you can imagine 10	
		0	1	2	3	4	5	6	7	8	9		



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MAPPII Interactive CHOIR Body Map <https://choir.stanford.edu>  
 Gray's Atlas of Anatomy. Drake et al. Pages 211-289. © 2015.  
 Dermatomes and cutaneous nerves of perineum in men.  
 Gray's Atlas of Anatomy. Drake et al. Pages 211-289. © 2015.  
 Dermatomes and cutaneous nerves of perineum in women.

Name: \_\_\_\_\_ MGH # \_\_\_\_\_ Date of Birth: \_\_/\_\_/\_\_ Date: \_\_/\_\_/\_\_

<b>Prior Medications Tried:</b>			
<b>Bladder Relaxing Medications</b>	<b>Tried?</b>	<b>Relief?</b>	<b>Still Using?</b>
Oxybutynin (Ditropan®)			
Oxybutynin Gel (Gelnique®) transdermal sachet daily			
Oxybutynin Transdermal Patch (Oxytrol®) over counter			
Tolterodine (Detrol®)			
Fesoterodine (Toviaz®)			
Trospium (Sanctura®)			
Darifenacin (Enablex®)			
Solifenacin (Vesicare®)			
Mirabegron (Myrbetriq®)			
Hyoscyamine (Levsin®)			
<b>Medications to Open Bladder Outlet</b>			
Terazosin (Hytrin®)			
Tamsulosin (Flomax®)			
Doxazosin (Cardura®)			
Alfuzosin (Uroxatral®)			
Silodosin (Rapaflo®)			
<b>Bladder Pain Medications</b>			
Pentosan Polysulfate Sodium (Elmiron®)			
Phenazopyridine (Pyridium®)			
Amitriptyline (Elavil®), Nortriptyline (Pamelor®)			
Uribel® (methenamine, sodium phosphate monobasic, phenyl salicylate, methylene blue, and hyoscyamine sulf)			
Allergy Medications: Hydroxyzine (Atarax®) Diphenhydramine (Benadryl® Genahist®, Somnex®, Unisom®), Cimetidine® (Tagamet®), Cetirizine hydrochloride (Zyrtec®), Fexofenadine (Allegra®), Loratidine (Claritin®)			
Bladder instillations (heparin, lidocaine, sodium bicarbonate, antibiotic)			
Bladder instillation (Dimethyl sulfoxide, DMSO/Rimso-50®)			
Cyclosporine A (Gengraf®, Neoral®, Sandimmune®)			
<b>Infection Management</b>	<b>Tried?</b>	<b>Relief?</b>	<b>Still Using?</b>
Oral or IV Antibiotics (doses and # days)			
Proanthocyanidins (Ellura®, Theracran®) or other cranberry extract			
D-Mannose			
Methenamine (Hiprex®, Mandelamine®, Urex®)			
Probiotics			
Antibiotic Instillation in the Bladder			
Other:			

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<b>Vulvar / Vaginal Treatments</b>	<b>Tried?</b>	<b>Relief?</b>	<b>Still Using?</b>
Avoidance of Irritants (select toilet paper, soap)			
Vaginal creams, ointments, etc.:			
<input type="checkbox"/> Barrier cream/ointment (type):zinc oxide, dimethicone, petroleum)			
<input type="checkbox"/> Estrogens (commercial or compounded)			
<input type="checkbox"/> Anti-yeast/antifungal agents			
<input type="checkbox"/> Antibacterial agents for bacterial vaginosis			
<input type="checkbox"/> Steroid (clobetasol, hydrocortisone)			
<input type="checkbox"/> Diazepam (Valium®) vaginal Suppositories			
<input type="checkbox"/> Baclofen (Lioresal®)			
<input type="checkbox"/> Lidocaine			
<input type="checkbox"/> Gabapentin (Neurontin®)			
<input type="checkbox"/> Amitriptyline (Elavil®)			
<input type="checkbox"/> Tacrolimus (Prograf®)			
<input type="checkbox"/> Naltrexone - low dose (Vivitrol®)			
<input type="checkbox"/> Douches			
<input type="checkbox"/> Other Inserts			
<input type="checkbox"/> Wipes			
<b>Hormonal Medications</b>	<b>Tried?</b>	<b>Relief?</b>	<b>Still Using?</b>
Vaginal estrogen cream, tablet or ring			
Estrogen / progesterone pills or patches			
Hormone-secreting intrauterine device (Mirena®, Liletta®, Skyla®)			
Medroxyprogesterone acetate (Depo-Provera®) injection			
Etonogestrel (Nexplanon®) progesterone implant			
Aygestin (northindrone)			
Elagolix (Orilissa®)			
Leuprolide Acetate (Lupron Depot®)			
Aromatase inhibitors: -Anastrozole (Arimidex®) -Letrozole (Femara®)			
Testosterone injections or implants			
Testosterone applied to skin (Testim®, AndroGel®)			
<b>Specific Penile/ Testicular Pain Medications</b>	<b>Tried?</b>	<b>Relief?</b>	<b>Still Using?</b>
Penile injection medications for pain - Collagenase clostridium histolyticum (Xiaflex®)			
Other			
<b>Anorectal Pain Medications</b>	<b>Tried?</b>	<b>Relief?</b>	<b>Still Using?</b>
Sitz bath			
Barrier cream/ointment:e.g. zinc oxide, corn starch, dimethicone, petroleum			
Wipes			
Loperamide (Imodium®)			

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Sphincter relaxing ointments: nifedipine or diltiazem (calcium channel blockers) and glyceryl nitrate (GTN)			
Lidocaine numbing gel or cream			
Anti yeast creams, ointments or oral medications			
Agents to soften stool: Docusate sodium (Colace®), Psyllium (Metamucil®) or other fiber			
Agents to bulk stool: Psyllium (Metamucil®) or other Fiber			
<b>Immune and Anti-Inflammatory Medications</b>	<b>Tried?</b>	<b>Relief?</b>	<b>Still Using?</b>
NSAIDs: Ibuprofen, Celecoxib, Diclofenac, Indomethacin, Naproxen, Oxaprozin, Piroxicam			
Mesalamine (Pentasa®, Asacol®, Apriso®, Delzicol®, Lialda®)			
Steroids			
Immunosuppressants: Azathioprine (Azasan®, Imuran®), Remicade (Infliximab®), Ustekinumab (Stelara®), and Monoclonal antibodies: Humira (Adalimumab®), Vedolizumab (Entyvio®)			
Immunomodulators Interleukins (IL-1, IL-17) Tumor necrosis factor alpha TNF-α			
IV immunoglobulin (IVIG)			
<b>General Pain Medications</b>	<b>Tried?</b>	<b>Relief?</b>	<b>Still Using?</b>
Acetaminophen (Tylenol®)			
Carbamazepine (Tegretol®)			
Gabapentin (Neurontin®)			
Pregabalin (Lyrica®)			
Topiramate (Topamax®)			
Fluoxetine (Prozac®)			
Duloxetine (Cymbalta®), Lamotrigine (Lamictal®), Oxcarbazepine (Trileptal®), Lacosamide (Vimpat®), Venlafaxine (Effexor®), Milnacipran (Savella®), Sertraline (Zoloft®)			
Amitriptyline (Elavil®)			
Nortriptyline (Pamelor®)			
Imipramine (Tofranil®)			
Opioids: Oxycodone (OxyContin®), Hydrocodone (Vicodin®), Codeine, Meperidine (Demerol®), Morphine (Roxanol®), Methadone, Hydromorphone (Dilaudid®), Tramadol (Ultram®), Fentanyl (Duragesic®, Onsolis®, Fentora®)			
<b>Oral Muscle Relaxants</b>			
Baclofen (Kemstro®, Lioresal®)			
Tizanidine (Zanaflex®)			
Cyclobenzaprine (Flexeril®, Amrix®, Fexmid®)			
Benzodiazepines (Valium®, Xanax®, Ativan®)			
<b>Blood Thinners</b>			
Aspirin			
Clopidogrel (Plavix®)			
Cilostazol (Pletal®)			

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<b>Other Medications (list):</b>	<b>Tried?</b>	<b>Relief?</b>	<b>Still Using?</b>
<b>Surgery (cite hospital and surgeon, obtain op note):</b>	<b>Year:</b>	<b>Relief?</b>	<b>Details</b>
Laparoscopy, fulguration, or excision of endometriosis			
Hysterectomy (removal of uterus)			
Myomectomy (uterine fibroid removal)			
Ovarian cyst removal			
Ovary removal			
Caesarian section			
Prolapse surgery, vaginal or rectal (details):			
Urinary incontinence surgery			
Urinary incontinence injection (e.g. Collagen, Macroplastique®, Coaptite®)			
Urethral diverticulum or fistula surgery			
Cystoscopy (may include biopsy)			
Urethral dilation			
Bladder hydrodistension			
Kidney stone surgery (shock wave or telescopic)			
Prostate surgery			
Testis surgery (including vasectomy)			
Ejaculatory duct surgery			
Bowel or rectal surgery			
Anal surgery			
Lysis of Adhesions			
Sacral nerve stimulation (Interstim®)			
Spinal stimulator (type and level if known)			
Medication pump (e.g. baclofen or pain medication)			
Release of nerve entrapment			
Surgical denervation (cutting of nerves)			
Back surgery			
Hip, knee or foot surgery			
Pelvic bone surgery			
Blood vessel surgery			
Botulinum toxin: OnabotulinumtoxinA (Botox®), RimabotulinumtoxinB (Myobloc®), AbobotulinumtoxinA (Dysport®) to:			
<input type="checkbox"/> Bladder detrusor muscle			
<input type="checkbox"/> Bladder exit (sphincter)			
<input type="checkbox"/> Pelvic floor muscles (trigger point)			
<input type="checkbox"/> Skin surface (e.g. vulva, scrotum)			
<input type="checkbox"/> Spermatic cord (nerves to testis)			

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<input type="checkbox"/> Anal sphincter			
<input type="checkbox"/> Hip / leg muscle			
<input type="checkbox"/> Iliopsoas muscle			
Other surgery:			
<b>Procedures and Treatments</b>	<b>Tried?</b>	<b>Relief?</b>	<b>Details</b>
Acupuncture			
Massage			
Nerve blocks or injections (name nerves and what medication was used if known):			
Pessary			
PTNS			
TENS Unit			
Radiofrequency Ablation			
Cryoablation (freezing) e.g. nerves of Spermatic Cord			
Vaginal Laser Therapy			
Blood vessel embolization or stenting			
Emsella® Chair			
Other Treatments			
<b>Bladder Management</b>	<b>Tried?</b>	<b>Relief?</b>	<b>Details</b>
<input type="checkbox"/> Bladder empties naturally			
<input type="checkbox"/> Timed voids by the clock			
<input type="checkbox"/> Intermittent catheterization ___ times per day			
<input type="checkbox"/> Indwelling tube changed every ___ weeks			
<input type="checkbox"/> Supply information:			
<b>Pelvic Floor Physical Therapy</b>	<b>Tried?</b>	<b>Relief?</b>	<b>Details</b>
Pelvic Floor Physical Therapy in general (any type)			
<input type="checkbox"/> Hands on work / joint and tissues mobilization			
<input type="checkbox"/> Stretching or yoga exercises			
<input type="checkbox"/> Aerobic exercises			
<input type="checkbox"/> Strength exercises: abdominal, legs			
<input type="checkbox"/> Biofeedback			
<input type="checkbox"/> Body mechanics and posture training			
<input type="checkbox"/> Physical Therapy focused on pain management			
<input type="checkbox"/> Physical therapy for back, knees, hips, etc.			
<b>Lifestyle and Behavior Changes</b>			
Diet alteration to avoid irritants			
Avoidance of Caffeine, Sweeteners, Tea			
Fluid alteration to target 1500-2500 cc per 24 hours			
Attention to seat surface and ergonomics at work, commute, home			
Avoidance of vulvar or scrotal irritants			



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<b>Counseling and Psychological Therapies</b>	<b>Tried?</b>	<b>Relief?</b>	<b>Details</b>
Meditation, Relaxation Strategies			
Any psychotherapy			
Individual therapy			
Cognitive behavioral therapy			
Mindfulness-based therapy			
Group therapy			
Couples therapy			
Formal Sex Therapy			
Other:			
<b>Testing completed</b>	<b>Approx Date</b>	<b>Location/ Institution</b>	<b>Results</b>
Urinalysis and Culture			
Urine cytology			
Urine Ureaplasma and Mycoplasma			
Testing for genital infections			
Pregnancy test			
Blood tests			
Stool Test			
Completion of a Voiding Diary			
Measurement of post void residual (PVR) urine volume (the amount remaining after urinating)			
CT Scan of:			
<input type="checkbox"/> Spine			
<input type="checkbox"/> Head			
<input type="checkbox"/> Abdomen			
<input type="checkbox"/> Pelvis			
Ultrasound of:			
<input type="checkbox"/> Abdomen			
<input type="checkbox"/> Kidneys			
<input type="checkbox"/> Pelvis			
<input type="checkbox"/> Scrotum/Vagina			
<input type="checkbox"/> Veins			
MRI of:			
<input type="checkbox"/> Spine/ sacrum			
<input type="checkbox"/> Head			
<input type="checkbox"/> Abdomen			
<input type="checkbox"/> Pelvis			
Spine Xray (type)			
Pelvis Xray			
Defacography (bowel movement under X-ray with dye)			

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Anal manometry (bowel movement with measurement of pressure in rectum)			
Upper GI Study (X-ray after swallowing dye)			
Cystogram, voiding cystourethrogram (VCUG), urethrogram (X-ray with dye in bladder or urethra)			
Angiogram (X-ray with dye in artery)			
Cystoscopy (small camera passed into bladder)			
Ureteroscopy (small camera passed into ureter)			
Urodynamic testing (pressure measurement during void)			
Endoscopy (small camera passed into throat)			
Colonoscopy / Proctoscopy / Sigmoidoscopy (small camera passed via anus)			
Sitzmark Study (X-ray or beads passing through GI tract)			
Laparoscopy (small camera passed into abdominal wall)			
EMG (test of nerve response to stimulation)			
Autonomic testing (tilt table testing)			
Nerve biopsy (for small fiber polyneuropathy)			
Other:			
<b>Types of Health Care Providers Seen:</b>	<b>Name</b>	<b>Location</b>	<b>Current provider?</b>
<input type="checkbox"/> Allergy			
<input type="checkbox"/> Cancer Medicine			
<input type="checkbox"/> Cardiology			
<input type="checkbox"/> Colorectal Surgery			
<input type="checkbox"/> Gastrointestinal Medicine			
<input type="checkbox"/> Gynecology			
<input type="checkbox"/> Infectious Disease			
<input type="checkbox"/> Neurology			
<input type="checkbox"/> Ophthalmology			
<input type="checkbox"/> Orthopedics			
<input type="checkbox"/> Pain Management			
<input type="checkbox"/> Physical Therapy			
<input type="checkbox"/> Primary Care			
<input type="checkbox"/> Psychology/ Psychiatry			
<input type="checkbox"/> Pulmonology			
<input type="checkbox"/> Rehabilitation Medicine (Physiatrist, PMR)			
<input type="checkbox"/> Rheumatology			
<input type="checkbox"/> Urology			
<input type="checkbox"/> Other			

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Current working diagnoses:	Details
<input type="checkbox"/> Unsure of diagnosis	
<input type="checkbox"/> Bladder obstruction	
<input type="checkbox"/> Overactive bladder	
<input type="checkbox"/> Underactive bladder	
<input type="checkbox"/> Neurogenic bladder	
<input type="checkbox"/> Interstitial cystitis	
<input type="checkbox"/> Incontinence of urine	
<input type="checkbox"/> Recurrent urinary tract infections (UTIs)	
<input type="checkbox"/> Vulvar atrophy	
<input type="checkbox"/> Vulvodynia or chronic vaginitis	
<input type="checkbox"/> Endometriosis	
<input type="checkbox"/> Erectile dysfunction	
<input type="checkbox"/> Peyronie's disease	
<input type="checkbox"/> Prostatitis	
<input type="checkbox"/> Pelvic floor muscle dysfunction	
<input type="checkbox"/> Prolapse	
<input type="checkbox"/> Constipation, diarrhea, IBD or IBS	
<input type="checkbox"/> Anal fissures or hemorrhoids	
<input type="checkbox"/> Incontinence of bowel	
<input type="checkbox"/> Neurogenic bowel	
<input type="checkbox"/> Nerve pain - spine	
<input type="checkbox"/> Nerve pain - peripheral nerves	
<input type="checkbox"/> Systemic pain syndrome	
<input type="checkbox"/> Autoimmune disease	
<input type="checkbox"/> Rheumatologic disease	
<input type="checkbox"/> Other:	
<b>Next Steps:</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	