



A Female Empowerment Project:

Implementing a Vaginal Self-Swab Protocol at a Teen Sexual Health Clinic

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Background

- Vaginal speculum exams can inflict discomfort, anxiety, and psychological traumatization, particularly in adolescents^{1,2}.
- Vaginal speculum exams are not always necessary to diagnose and treat bacterial vaginosis and yeast infections³. Specimens collected by self-swab are adequate for diagnosis by wet prep⁴.
- Lack of a protocol for specimen collection by vaginal self-swab is a system barrier to providers consistently offering the option of specimen collection by self-swab.

Purpose

- Increase the number of vaginal specimens collected by self-swab for wet preps and decrease number of speculum exams performed and thereby:
 - Decrease barriers to screening
 - Increase patient satisfaction
 - Empower women in their health

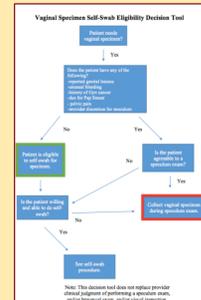
Context

- Teen sexual and reproductive health clinic in metropolitan area.
- Patient population: Adolescents and young adults 25 or younger.
- Staff (includes volunteers): RNs, MDs, NPs, PAs.
- 663 wet preps performed in 2017, traditionally the specimens are collected by speculum exam.

Methods

Protocol Development

- Protocol consisted of two tools:



Tools created based on:

Literature synthesis ❖ Expert opinion ❖ Input from Medical Director and Providers ❖ Clinic population

Protocol Implementation

- Sent protocol and project plan via e-mail to participating providers (pilot study included three providers).
- In-person training during staff meeting.
- Eligibility decision tool and self swab procedures placed in every exam room.

Data Collection

Wet Prep Data

1. Is the patient clinically eligible for self-swab? Y/N
2. Did the patient self-swab? Y/N
3. Was the sample adequate? Y/N

Patient survey

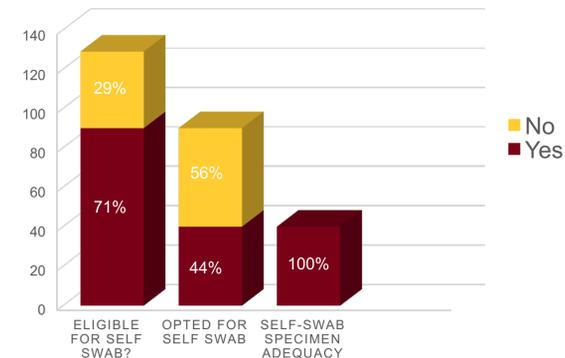
1. Did you prefer doing the self-swab rather than having a speculum exam? Y/N/Not sure
2. Did you think it was easy to self swab? Y/N/Not sure
3. Did you feel empowered/in charge of your health by self-swabbing? Y/N/Not sure

Provider Survey

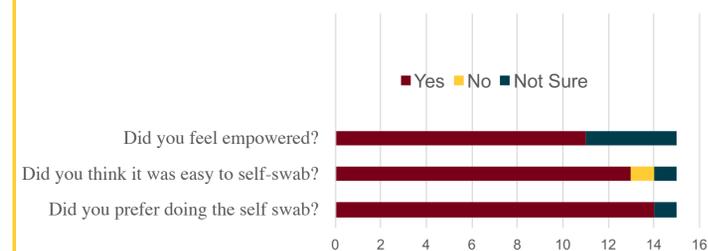
1. Did the self-swab protocol save you time? Y/N
2. Would you like to continue using this protocol? Y/N

Results

WET PREP DATA



Patient Survey



Comments received from women who self-swabbed:

Self swabbing is alot more comfortable & convenient
I liked it! Keep going, this is great

It hurt less when I self swabbed. I felt more comfortable

I'm really happy & shocked about this self-swabbing first one I've been to that does this

Provider Survey

- Anonymous provider comment: "This project changed the way I practice. So glad that we can offer an approach that empowers women and provides us with an adequate sample."

Discussion

Conclusions

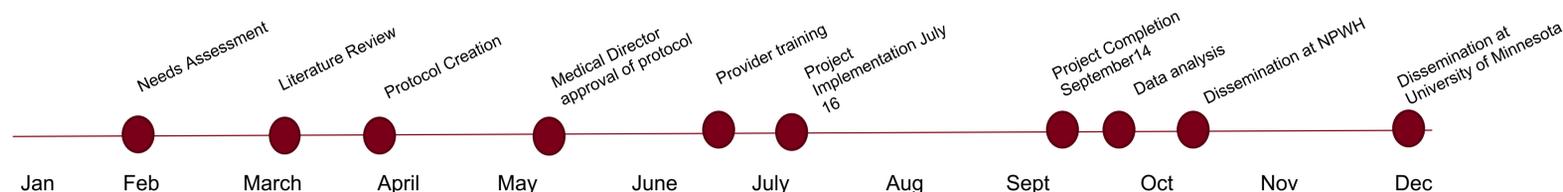
- With a clear procedure in place, specimens were adequate for wet prep 100% of the time.
- 73% reported that self-swabbing made them feel empowered and in charge of their health.
- Of the patients that self-swabbed and filled out a survey, it was nearly unanimous that they preferred doing the self-swab over a speculum exam and thought it was easy.
- The Vaginal Self-Swab Protocol was feasible with the workflow of the clinic as evidenced by positive provider feedback.

Limitations

- Over half of the patients that screened eligible for self-swab, opted *not* to do the self-swab and have a speculum exam instead. Reasons for this may have included:
 - Fear of doing it incorrectly
 - Feeling uncomfortable touching herself
 - Desire for provider reassurance that "everything looks okay" during a speculum exam
- Barriers existed to providers giving the written self-swab procedure to patients who opted to self swab, leading to inconsistent instructions on how to self swab.

Implications

- Adolescents are great candidates to perform vaginal self-swab.
- Increasing self-swabs can decrease the frequency and harms of speculum exams.
- Performing a self-swab instead of vaginal speculum exam frees up more provider time with the patient to discuss health maintenance and prevention.
- Providers are open to this change in practice, can be explored in other clinic settings.



Acknowledgements

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References

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