
Form Instructions - Pelvic Exam Diagrams (non-CRF)	
Purpose:	This form is used to document all variants of normal and all abnormal findings observed during study pelvic exams (screening through termination/study exit).
General Information/ Instructions:	This form is completed at the Screening Visit, Enrollment Visit, Visit 4.0, Visit 6.0, Visit 7.0, Visit 9.0, Visit 10.0, Visit 11.0, and whenever a pelvic exam is clinically indicated during the study. Transcribe information on the appropriate Pelvic Exam CRF and store this form in the participant's chart notes.
Item-specific Instructions:	
Findings:	<p>All variants of normal (normal findings) and all abnormal findings must be documented on this form. Variants of normal should only be recorded on this form and not on the Pelvic Exam CRF. The following findings are considered normal variants:</p> <ul style="list-style-type: none">• anatomic variants• gland openings• Nabothian cysts• mucus retention cysts• Gartner's duct cysts• blood vessel changes other than disruption• skin tags• scars• cervical ectopy <p>If there are no abnormal findings observed, mark the 'no abnormal findings observed' box.</p>
Documenting findings on the cervix:	If helpful, draw the os in the center of the diagram labeled "Cervix" (lower right corner).