

FREE STARTER PACK

# Perth Pelvic Pain GP Prep Pack

A calm starter pack to help you organise symptoms, records and questions before seeing your GP in Perth or WA.

For pelvic pain, painful periods, possible endometriosis or adenomyosis, bladder or bowel-linked pelvic symptoms, pelvic floor concerns, and complex symptom histories.

**CareBridge Perth helps with appointment preparation, care coordination and patient advocacy.**

We do not diagnose pelvic pain conditions, recommend treatment, prescribe medicines or replace your treating clinicians.

[carebridgeperth.com](https://carebridgeperth.com)

# How to use this pack

This is not homework and it does not need to be perfect. Use it to make your next GP appointment clearer and easier to navigate.

- Start with the 2-minute symptom snapshot.
- Circle what is most important for the GP to know first.
- Bring the completed pages, your medication list and any older reports.
- Use the questions page if you freeze, forget details or feel rushed in appointments.

**This is a starter pack. It helps you see what needs to be organised. CareBridge can help turn scattered notes, old reports and concerns into a clear appointment preparation pack.**

## Urgent symptoms - do not wait for a routine GP appointment

Seek urgent medical care, call 000, or contact Healthdirect on 1800 022 222 if you are unsure what to do. This is especially important if pelvic or lower abdominal pain is sudden, severe, worsening, associated with pregnancy concerns, fainting, fever, heavy bleeding, vomiting, shoulder tip pain, chest pain, confusion, or you feel very unwell.

If you are in immediate danger or crisis, call 000. If this relates to recent sexual assault in WA, you can contact the Sexual Assault Resource Centre through WA Health for crisis support and medical care.

## What this pack helps you prepare

Section	Purpose
Symptom snapshot	A quick summary so the GP can understand the pattern faster.
Pain and cycle tracker	Helps connect pain with periods, ovulation, sex, bladder, bowel or activity.
History and records checklist	Helps you decide which reports, scans and letters may be useful.
Questions for your GP	Helps you ask about next steps, referrals and follow-up clearly.
Referral and task tracker	Helps prevent lost referrals, forgotten results and unclear next steps.

# 1. Two-minute symptom snapshot

Complete this roughly. The goal is to make the appointment easier, not to write a perfect medical report.

Question	Your notes
Main concern today	
When did this start?	
Is it getting worse, better, or changing?	
Where is the pain?	
What does it feel like? e.g. cramp, stabbing, burning, pressure, pulling	
Pain score on a bad day /10	
Pain score on a usual day /10	
What makes it worse?	
What helps, even a little?	
What are you worried might be missed?	

## Function impact - what the GP needs to understand

Area	Impact
Work / study	
Exercise / walking / sitting	
Sleep and fatigue	
Sex / intimacy	
Mood, anxiety or distress	
Caring responsibilities	

## 2. Pain pattern and symptom tracker

Use this for 1-2 weeks if you can. If your appointment is soon, fill in the last few days from memory.

Date	Cycle day / bleeding	Pain /10	Location	Triggers	Bladder / bowel / sex symptoms	Medication or strategy used

### Symptoms to mention if relevant

Symptom prompts	Tick or add notes
Severe period pain that stops normal activities	
Pelvic pain outside your period	
Deep pain during or after sex	
Pain opening bowels or passing urine	
Bloating, constipation, diarrhoea or bowel changes	
Heavy periods, clots or irregular bleeding	
Lower back, hip, groin or leg pain	
Fatigue around your cycle	
Difficulty becoming pregnant or fertility concerns	
Pain flares after exercise, sitting or stress	

### 3. What to bring to your GP appointment

Bring what you have. Do not delay care because you cannot find every document.

Bring if available	Notes
Previous pelvic ultrasound, MRI, CT or X-ray reports	
Previous gynaecology, ED, urology, gastroenterology or pain clinic letters	
Operation reports, laparoscopy reports or discharge summaries	
Pathology results if relevant, including iron studies if heavy bleeding	
Medication list: prescribed, over-the-counter, supplements, pain relief	
Contraception or hormonal medication history	
Allergies and medication reactions	
Menstrual history notes if relevant	
Your top 3 appointment goals	

### Simple medical history prompts

Topic	Your notes
Periods: regularity, heaviness, pain, clots, missed periods	
Pregnancy history or possibility of pregnancy	
Cervical screening, STI testing, infections if relevant	
Past diagnoses: endometriosis, adenomyosis, PCOS, fibroids, IBS, bladder pain, pelvic floor dysfunction, trauma history if you choose to disclose	
Family history of endometriosis, adenomyosis, ovarian cysts, fibroids or fertility issues	

## 4. Medication, treatment and support tried

This helps your GP see what has already been tried and what happened. CareBridge can help you organise this into a clear timeline.

Medication / strategy / support	Dose or details	Did it help?	Side effects or barriers

### Examples you may want to list

- Pain relief medicines or anti-inflammatories you have used.
- Hormonal medicines, contraception, IUD, implant or injections you have used.
- Heat packs, TENS, rest, pacing, exercise changes or diet changes.
- Pelvic floor physiotherapy, psychology, pain clinic, acupuncture or other supports.
- Any strategy you stopped because it did not help, caused side effects or was too expensive.

### What you want from this GP visit

Choose your top priorities	Details
■ Understand possible next steps	
■ Ask whether referral is appropriate	
■ Review previous results or reports	
■ Discuss pain impact on work/study/life	
■ Ask about follow-up plan and timelines	

# 5. Questions to ask your GP

Pick 3-5 questions. You do not need to ask everything in one appointment.

- Based on my symptoms, what are the main possibilities you want to consider?
- Are any urgent causes unlikely, or do I need urgent assessment today?
- Would any tests, imaging or pathology be useful before deciding next steps?
- Would referral to a gynaecologist, pelvic floor physiotherapist, urologist, gastroenterologist, pain service or other clinician be appropriate?
- What information should I track before the next appointment?
- What should I do if the pain becomes severe or changes suddenly?
- When should I book a follow-up, and who will check results?
- Can I have copies of referrals, imaging requests and results for my records?

## My own questions

---

---

---

---

## Ask for a clear next-step plan

Before leaving, confirm:	Write it here
What is being requested?	
Who books it?	
How long should it take?	
How will I receive results?	
When is follow-up?	

# Need help turning this into a clear GP summary?

The PDF gives you the starting point. CareBridge can help you organise the information properly so you are not walking into the appointment with scattered notes, half-remembered dates and missing documents.

## CareBridge can support you with:

- Turning scattered symptoms into a clear timeline.
- Deciding which records are useful to bring or request.
- Preparing focused questions for your GP.
- Creating a one-page appointment summary.
- Tracking referrals, imaging, pathology, results and next steps.
- Supporting communication with services, with your consent.

**Book a free 15-minute triage call**

**Use the call to work out what needs organising first and whether CareBridge support is appropriate for your situation.**

## Helpful Australian and WA resources

Resource	Use
Healthdirect	24/7 health advice line: 1800 022 222. Call 000 for urgent emergencies.
Jean Hailes for Women's Health	Plain-English information on endometriosis and persistent pelvic pain.
Endometriosis Australia	Education, support and awareness resources.
Your GP practice	Best first point for assessment, referrals and follow-up planning.
Local emergency department / urgent care	For severe, sudden or concerning symptoms that cannot wait.

## Important disclaimer

This resource is for appointment preparation and health-system navigation only. It does not diagnose pelvic pain, endometriosis, adenomyosis or any other condition. It does not recommend treatment, prescribe medicines or replace advice from your GP, gynaecologist, pelvic floor physiotherapist, psychologist or other health professional. In an emergency or crisis, call 000 or seek urgent care.

Sources used for general safety and appointment-preparation context: Healthdirect Australia, Jean Hailes for Women's Health, Endometriosis Australia, and WA Health public information. Last prepared: June 2026.