

# Pelvic & Sexual Pain Self-Assessment Questionnaire

TRANSCEND  
psychological

A starting point for understanding your pain | Transcend  
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This questionnaire is designed to help you reflect on your experience of pelvic or sexual pain and begin to identify patterns that may be useful to share with your care team. It is not a diagnostic tool. Pain is complex, and understanding it fully takes time, context, and professional guidance.

*Note: This resource is provided for informational purposes only and does not constitute medical or psychological advice. If you are experiencing pain, please consult a qualified healthcare provider.*

## Section 1: Pain Characteristics

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### 1. How long have you been experiencing pelvic or sexual pain?

- Less than 1 month
- 1–3 months
- 3–6 months
- 6–12 months
- 1–5 years
- More than 5 years

### 2. Describe the sensation of your pain as best you can (e.g., burning, stabbing, aching, pressure, tearing, throbbing).

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### 3. Where is the pain located? (e.g., vaginal entrance, deep internal, vulvar surface, hips, lower back)

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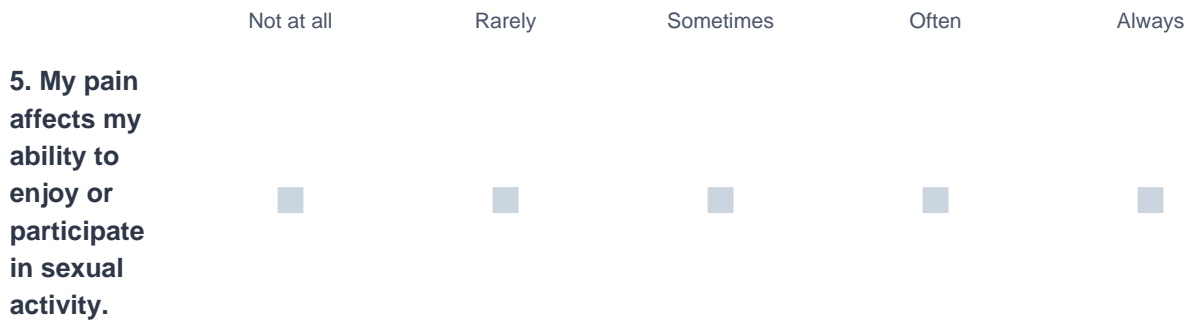
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#### 4. Is your pain:

- Provoked only (pain requires contact or penetration)
- Unprovoked (pain occurs without any contact)
- Intermittent (comes and goes)
- Constant

## Section 2: Impact on Daily Life

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	Not at all	Rarely	Sometimes	Often	Always
<b>8. My pain affects my sense of self or body image.</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Not at all	Rarely	Sometimes	Often	Always
<b>9. I feel informed and supported in managing my pain.</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**10. What has been the most significant way this pain has affected your life?**

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### Section 3: History and Context

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**11. Have you ever experienced pain-free sex? If yes, when did you first notice the pain changing?**

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**12. Have you noticed any patterns in your pain (e.g., time of month, relationship stress, specific activities)?**

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**13. What treatments or strategies have you already tried? What helped, if anything?**

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**14. What would an ideal outcome from treatment look like for you?**

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**How to use this questionnaire:** There is no scoring system here — this is a reflective tool, not a diagnostic one. Bring your completed responses to your doctor, physiotherapist, or psychologist. The patterns you identify may help your care team understand your experience more fully and tailor their approach to you.

**Ready to go deeper?**

The Sexual Pain Workshop covers anatomy, diagnosis, treatment options, psychological strategies, communication tools, and how to reconnect with pleasure — even if pain persists.

[www.transcendpsychological.com](http://www.transcendpsychological.com)