## STRESS URINARY INCONTINENCE

**REFERRAL GUIDELINE**

Maine Medical Partners - Women’s Health Division of Pelvic Medicine and Reconstructive Surgery
100 Brickhill Ave, Suite 203, South Portland, ME - (207) 761-1502

### HIGH RISK

**SUGGESTED EMERGENT CONSULTATION**

**SYMPTOMS AND LABS**

N/A

### MODERATE RISK

**SUGGESTED CONSULTATION OR CO-MANAGEMENT**

**SYMPTOMS AND LABS**

- Urinary retention
- Pregnancy test if clinically applicable
- Advanced or complete prolapse

**SUGGESTED WORKUP**

- Possible urine pregnancy test
- Pelvic exam
- Post-void residual

**SUGGESTED MANAGEMENT**

- If patient is obese, counsel on weight loss. Offer referral to MMC Weight and Wellness
- If patient desires non-surgical intervention: counsel on vaginal inserts (Poise Impressa) or pessary. Discuss Kegel exercises/pelvic floor PT
- Refer to pelvic floor PT if patient is interested

### LOW RISK

**SUGGESTED ROUTINE CARE**

**SYMPTOMS AND LABS**

- History (note prior incontinence and/or prolapse surgeries)
- Pelvic exam to confirm stress incontinence with a full bladder cough test

**SUGGESTED WORKUP**

**SUGGESTED MANAGEMENT**

- Refer to MMP Pelvic Medicine, if patient desires surgical intervention

### CLINICAL PEARLS

- Incontinence pessaries can be fitted with a gynecologist or MMP Pelvic Medicine nurse practitioner
- Poise Impressa is available over the counter and can be self-fitted by the patient

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These clinical practice guidelines describe generally recommended evidence-based interventions for the evaluation, diagnosis and treatment of specific diseases or conditions. The guidelines are: (i) not considered to be entirely inclusive or exclusive of all methods of reasonable care that can obtain or produce the same results, and are not a statement of the standard of medical care; (ii) based on information available at the time and may not reflect the most current evidenced-based literature available at subsequent times; and (iii) not intended to substitute for the independent professional judgment of the responsible clinician(s). No set of guidelines can address the individual variation among patients or their unique needs, nor the combination of resources available to a particular community, provider or healthcare professional. Deviations from clinical practice guidelines thus may be appropriate based upon the specific patient circumstances.