

If a gynecologist is unavailable, external examination may be performed to determine “discomfort on exam” as follows:

- . a) Spread the labia majora to inspect the vulva for the above signs. Touch the vestibular gland openings (Skene’s and Bartholin’s), labia minora and majora gently with a qtip. Vulvar pain elicited by the gentle touch of a qtip is classified as discomfort on examination. Palpate the vaginal walls with a single digit to detect bands, shortening, narrowing or other signs of vaginal scarring.
- . b) If the woman is sexually active, determine whether qtip palpation or gentle palpation of scarred ridges elicits pain similar to that which the woman experiences during intercourse.

Female genitalia: Severity of signs:

- 1) Mild (any of the following); erythema on vulvar mucosal surfaces, vulvar lichen-planus or vulvar lichen-sclerosis.
- 2) Moderate (any of the following); erosive inflammatory changes of the vulvar mucosa, fissures in vulvar folds
- 3) Severe (any of the following); labial fusion, clitoral hood agglutination, fibrinous vaginal adhesions, circumferential fibrous vaginal banding, vaginal shortening, synechia, dense sclerotic changes, and complete vaginal stenosis.

Male genitalia: Diagnostic features include lichen planus-like or lichen sclerosis-like features and phimosis or urethral scarring or stenosis. Severity of signs:

- 1) Mild: lichen planus-like feature;
- 2) Moderate: lichen sclerosus-like feature or moderate erythema;
- 3) Severe: phimosis or urethral/meatal scarring.