

A woman with dark, wavy hair is standing in a field of green grass and yellow wildflowers. She is posing for a photo, with her hands clasped in front of her. She is wearing a thin necklace with a small pendant. The background is a dense line of green bushes and trees under a clear sky.

# *Doctor Mistress*

Nadia Saran

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<https://mistressnadezhda.wixsite.com/website>

[MistressNadia@Yandex.ru](mailto:MistressNadia@Yandex.ru)

## Author's Note:

Mistress Pepper and Sophie are “anonymized” versions of me and my slave-girl. The real me. All of my stories are (or should I say will be) my memories of a session with a sub. Thus, they are true stories. Only in this version details have been changed to protect the sub. I do live in Mobile about 10 months of the year (the remaining two I spend in Nizhny Novgorod, Russia, where my father is from and lives), and almost all of my subs live in Mobile or a bordering county. I'm originally from Baldwin County, next door to Mobile. I moved across the bay to attend USA. As is/did Mistress Pepper. But I'm not a blond. And you'll most definitely have to guess at my bra size! If you got this story on my web site, the picture on the cover isn't really the sub. It's just a picture that looks close to it that I found online thanks to Yandex.

The latest four stories are always available, with no questions asked and for free, on my website, including stories that aren't published anywhere else.

The complete archives of all my public-version stories are available in the member's pages of my website. Just sign up, it's easy and free. So are the stories. I promise to never spam anyone.

If you want to be notified of new stories, just subscribe to my mailing list and you'll get a link whenever a new story is posted, whether it's published on another site or not.

And remember, the names and such have been changed in this version to protect the slutty. Only Princess Lilly appears as herself. But she truly has no concept of shame. Check out my blog, also on the member's pages of my website, if you want. Her picture is there. Isn't she so cute!

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Doctor Mistress

## Prologue:

In case this is the first of my stories you've read, there are a few things I've skipped over in this story since there are several other stories I've written about this same sub. I tend to write a story after almost all of my sessions with my toys. But I publish very few of them online. All of them are available free on my web site to my friends. Many more are available in a "public version" (in which the names and identifying details have been changed to protect the shame of my sub), also for free, to "members" of my web site (free to join, and so NO spam!). And the latest four stories are always available to anyone, free, to the world, no questions asked, no membership required.

My name is Pepper Rodgers. I'm a 19-year-old Domme, living downtown Mobile, Alabama. I have a decently well-stocked playroom in the second bedroom of my fourth-floor apartment (most of my neighbors are corporate types who aren't always around, giving me a lot of privacy, even in the halls and elevators). I also have a decently stocked toybox. I prefer my toys to be older than I am, around 30-42 years old. I prefer men for myself, however not for my toybox. When it comes to toys, I find women and couples to be far more amusing. Single men tend to be needier, and often too clingy. But that doesn't mean I don't have a few of them in my toybox. I do. They just don't have the same chances of getting there as couples and single women do.

I'm petite. Actually more "tiny" than petite. I'm 5' 1.75" and 91 pounds. I'm not bony, though, I've curvy, like a small-sized woman. I have blond hair down to my shoulders and blue eyes. Oh, and my chest is the only place I'm not small. I'm a 32-D, and I'm very pert. Which makes me popular with the boys.

I'm also slightly bisexual. I'm attracted to men, not women. I would never choose a female partner for even a date, let alone for sex. But I'm not opposed to masturbating with a female toy. Sophie happens to be my favorite sex toy to pleasure myself with. Her tongue has two big

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advantages over my vibrator: one, it's very delicate and tender. Two, no matter how much I use it, its batteries never die at the worst possible moment! It's better than fresh bunny batteries, it just keeps going until I want it to stop. And I don't even have to hold it in place!

When I want sex I never use one of my toys. I never allow a toy touch, or even see, all of me. And I never bring a toy to my bedroom. Nor do I chose a woman. I pick a man, usually one I find in a club or cafe, or wherever. I flirt, dance dirty a little and if he meets my standards, I ask if he's interested in a one-time-only, no-names-exchanged, hook-up. I've never been turned down.

I have a few standards for my hook-ups. I never pick a guy I know or even just see around. And I insist on a cock between 7 and 9" long and 1.5" across, plus or minus a small bit. I won't touch a guy who isn't circumcised, either. I hate the way the foreskin feels inside me. I want to feel that fat head. The dirty dancing gives me plenty of time to tease a guy hard and feel for myself what he's got. It's the only way not to be disappointed. Guys always lie about their equipment!

Sophie is my 19-year-old live-in slave-girl. She's slightly petite at 5'4" and 119 pounds. She's pretty, too, with long honey-blond hair, green eyes, and a 34-B chest. Sophie is extremely devoted to me. So devoted, and so happy as my slave, that despite not being attracted to women, she's a virgin with men. She serves and pleasures only me, and those I give her to. And while I use her, even with my male toys, I won't allow any man to touch her pussy or penetrate her bottom. Those are mine. Only mine. I've owned her since she graduated high school, but I've known her longer. Since about two months after her 18<sup>th</sup> birthday, which was also about two months before she finished high school.

I have three BFFs, (Isabelle, Reagan, and Ellie) none of whom are into my little games. But all of whom occasionally creep into my stories. After all, they are my BFFs so they tend to be around. Luckily they're not offended by anything they happen to see. They're just not eager for me to

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put on a show on their account.

I also have a circle of five other women friends, all of whom are Dommies as well. Andrea (26), Janelle (35), Colette (39), Diane (43), and Olive (44). we usually get together every couple of weeks for coffee and a little chat about who's doing what to whom lately. We sometimes share, or loan, our toys to each other, but not that often. Sometimes we do a favor for each other, such as providing something different for a toy. Mostly we do what girls do: we gossip.

I get all of my toys through networking. It's almost always either one of the women in our circle who has a toy she doesn't want and offers to point it at another who is interested. Or sometimes one of my toys tells someone, who tells someone, and so on until someone asks my toy to introduce someone to me. Rarely it's someone I don't play with, but who knows what I'm into, who asks me to meet someone. I get plenty of emails inquiring about meeting me, and while I will email and maybe chat with a sub online, I haven't yet met any. I won't rule it out, but meeting online is risky enough that someone would have to convince me before I'd think about it. A girl's gotta be careful!



# Chapter 01: The Patient

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My toy tonight is a 42-year-old housewife named Michelle. She's one of the toys I don't see too often, about once every two to three months. She's also one of the more unique toys in my toolbox.

She likes, and that's an understatement, all of the usual stuff. She likes being owned. She likes being used as my playtoy. She likes being under my absolute control, and the firm discipline that keeps her there. She especially likes, and needs, a very hefty dose of humiliation. Without that, she won't get more than moderately aroused.

But she also has a medical fetish. In my experience and the experience of the other Doms and Dommes I know, it's not too common for a woman to be into it. It's far more common of a fetish for men. Not to participate in, but to see. It's why Irina, a Russian Domme in Pensacola whom I know through my friend Nikolai, sent her to me almost a year ago. She knows I'm a nursing student. She thought I could not only poke and prod Michelle but that I could add some realism to the experience. So far, Michelle hasn't complained. But she has begged shamelessly after her examinations for permission to have an orgasm.

She's married. Her husband is just a couple of years older than she is. He enjoys sharing her sessions with her. But not so much seeing the more intense portions of the exam Michelle just loves. He also would prefer that Michelle not be shared with another man. At least not for sex. And Michelle has two children. They have an 18-year-old daughter and a 13-year-old son. I've met them both. Only the daughter knows who, or rather what, I am. Michelle couldn't have lied about it if she'd tried. Her daughter, Carly, goes to school with Paige, my slave-whore. Paige always wears a collar to school. To everywhere. And I don't allow her to hide what she is. In high school terms (they're both seniors about to graduate) that means the entire world knows what Paige is. A slave. A whore. And absolutely unavailable to anyone at school. I give her body away, not her. I decide who she dates, not her. If anyone at all.

Like all my toys, Michelle emails me regularly and on a schedule. Last week, in one of her emails, she mentioned that she was feeling a

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little "skanky" and thought she should make an appointment for a check-up. At the time, I ignored her remark. I almost always do. Two days ago I had Sophie, my live-in slave-girl and handmaiden, play secretary and call Michelle. I'm certain Michelle recognized her voice. Sophie told her that I had an opening in my schedule for this evening at 6:00, and would Michelle care to move her appointment up, since obviously "skankiness" can be a very serious condition that needs treatment sooner than later.

Michelle cheerfully accepted the appointment she'd been angling for. Then Sophie told her that her husband should come ninety minutes later. There was no sense in him accompanying her to her appointment since my new policy doesn't allow for males to be present for "complete exams." However, I "would strongly prefer" that she brought someone to accompany her. Someone female. Preferably a relative if at all possible, and if not, a very close friend. I would be "highly disappointed" if she came alone.

Michelle got the hint. I know she did because she shows up, right on time, and accompanied by her daughter. I figured she'd ask her daughter. It was the easy choice. Her daughter already knows what I am. And once she discovered that her mom was visiting me... It doesn't take complex algebra to add that up. I'm not selling her mom Amway! On top of that, according to Paige, Casey is a rather curious, and quiet, girl. The type who strongly prefers to see things for herself, but also will likely keep quiet about what she sees. I won't ask her to. I don't care what she says. I might not advertise, but I don't make a secret of who I am either. Michelle, on the other hand, will definitely beg, cajole, bribe, and threaten to ensure Casey stays mute about anything she might see or hear here. It's not something Michelle wants to be known around their neighborhood. Or anywhere.

When they arrive, I have Sophie dressed up especially for Michelle in a pair of pastel pink scrubs. I have her looking just like she's my nurse. I have Sophie offer the pair a seat on the living room sofa. I've even laid out an array of very ancient and bland magazines on the coffee table. It's my concession to the authentic waiting room experience. Sophie tells Michelle that her doctor, "Miss Rodgers" will be right with her.

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Because of her symptoms, Michelle will be getting a far more complete exam than she's used to, and it will take a little longer. I have to finish a few things up before it's Michelle's turn.

Then Sophie vanishes, leaving them to wait. I peek. For the first two minutes, they're quiet. Then Casey starts letting her curiosity show. She asks the typical questions, like what's going to happen and why "the doctor" wanted her along. Michelle doesn't have any answers to give Casey. The silence resumes. Michelle starts to fidget. I let them wait a little longer.

Finally, after they've waited close to fifteen minutes (whoever doesn't wait at a doctor's?) I send my nurse out to fetch my patient for her exam. Sophie, as I've told her to do, calls Michelle back. Once Michelle is on her feet, Sophie invites Casey "You can come, too, if you want. Michelle might like to have someone to hold her hand for parts of it." Casey gets the hint. She follows closely behind Michelle.

Sophie brings them both back to the playroom. I had Sophie set it up earlier so that it has everything I might want in it. The massage table, now draped in a pastel green sheet, is at the center of the room. I've even clamped some stirrups to it. There are two rolling cabinets loaded with supplies and a rolling table. She's hung a few posters on the normally bare wall, showing various systems of the human body. There's a scale, too. And the usual cabinets that line one wall. There's a little rolling, well-padded and comfy, stool for me. There's a little table with a hard, wooden chair on either side of it. And there's a fabric screen in one corner, beyond which is the kennel Paige is in.

I'm wearing a pair of maroon scrubs. They're a standard issue for the lab classes at USA. They're also standard issue for USA medical center, and they have the hospital's name and logo embroidered on them. Mine even have "P. Rodgers" embroidered on them. They look realistic because they're real. They're the same ones I'd be wearing for a lab class where I'd be practicing something on an actual person.

I greet Michelle and tell her to "go ahead and get undressed for her exam." I suggest that Casey might want one of those chairs for now.

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Casey takes the seat. It leaves Michelle with zero privacy to get undressed. Just her, a 42-year-old woman undressing in a room with three young women who have no intention of taking anything off. She ends up taking the place next to the free chair so she can pile her clothes on that chair. It also puts the chair, and the little table, between her and Casey. She turns her back to Casey, too. Then she strips down, piling her clothes quickly on the chair.

Michelle is a fairly short woman, about 5'3". She's far from heavy. The last session she weighed 144 pounds. Naked, of course. She's also a very shy woman. And she knows what she can, and can't, get away with here. For the second, once she's naked, she keeps her back to Casey. Which has her facing the table. She stands with her hands modestly covering her pubes and pussy. Clamped to her body tightly as they do. "Patients" don't get gowns here.

Sophie goes over with a tablet in her hand. It's this millennium's clipboard. She suggests that Michelle has a seat for a minute, and "be more comfortable." Once Michelle has taken her seat, her hands still covering herself snugly, Sophie begins with all of the usual gynecologist questions, and a few more I've added. The slutty questions.

She begins by asking Michelle to confirm her basic information, such as her name (Michelle Diane Conroe), her age (42 years, 4 months), her address, phone number, and so on. Then she asks "Are you menstruating?"

"No, Miss Nurse, I'm not." Michelle answers.

"When did your most recent period begin?"

Michelle gives a date about ten days ago. Then when Sophie asks, she says it lasted the usual four days, and she describes her flow as "heavy, but it always is."

"Have you had any kind of sex in the last 72 hours?"

"No, Miss Nurse, I haven't. I never have sex right before seeing the doctor." Meaning she would just be so embarrassed to have anyone see her with cum inside of her. It's a sight everyone in the gynecological

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field has lost count of the times she's seen.

"Have you masturbated in the last 72 hours?"

"Yes, Miss Nurse... I masturbated last night."

"Did you climax?"

"Yes, Miss Nurse, I did."

"You said on the phone that you feel skanky. What are the symptoms you're having?"

"I.. feel myself getting very hot... down there. And it throbs just all the time. So much so that I just can't stand it, Miss Nurse." Sophie notes the symptoms with a grin. Then she asks if Michelle is feeling them now. Michelle says, she is, and they're the worst they've ever been.

Then Sophie moves to some mundane questions like is she taking any medication, even something over the counter. Michelle says only Advil lately. Then she asks Michelle when was the last time she peed. Michelle says a few hours ago, around three-ish. Sophie follows up by asking if her urine was normal, and how would she describe its color. Michelle deems her pee to have been normal, and light yellow.

Sophie asks when Michelle's last bowel movement was. Michelle says this morning, when she got up, so around six-ish. And Sophie follows that up, too. Michelle deems her bowel movement to have been average, firm, and dark brown.

Casey looks very uncomfortable hearing it all. I've been watching her. Michelle is blushing. And Michelle's voice has a very heavy note of embarrassment to it. She fidgets in her seat, too. But Casey is the one who looks the more uncomfortable just hearing it.

Sophie gives Michelle the bad news. Casey, too. "Sometimes, during full exams, Miss Rodgers might want to run a few extra tests or do an extra exam, based on what she finds. Michelle, you will be slightly uncomfortable for a couple of parts of the exam – the full exam is rather intensive – so rather than stop while you're uncomfortable, she asks that

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you authorize someone to make your decisions for you. That way, that person can listen and make an informed choice, while you just have to relax and cooperate with Miss Rodgers. We've found it's a lot easier for our patients that way. Is your daughter over 18? Would you like to ask her to make those little decisions for you?" Michelle tells Sophie that Casey is 18. But we already knew that. If Casey weren't, by one second, she wouldn't be here. And Michelle catches Sophie's meaning. Sophie isn't really suggesting. She's telling Michelle what I want her to do.

"Casey..." Michelle asks in a very embarrassed and shy voice, "would you mind making those choices for me? Please? Just agree to whatever Miss Rodgers thinks is best..."

Casey hesitantly accepts. She's just figured out her role in this little bit of theater we're putting on. Sophie hands Michelle a form and has her fill it out. It very pointedly says she designates Casey to make all of her choices for the duration of this visit and agrees that everyone will ignore anything Michelle says after she signs it. Anything. Only Casey's instructions will mean anything. Michelle might as well not even open her mouth. She will be at Casey's mercy. Then Sophie has Casey sign it, too. Just because.

Sophie takes Michelle over to the wall where there's a strip for measuring height. In centimeters. She has Michelle stand flat with her backside firmly against the wall. And with her hands at her sides. That forces Michelle to fully expose her front. What Michelle doesn't know is that there are cameras all through this room. And right now, they are getting a very good, 4K-quality, picture of her full-frontal nudity. Sophie announces "160 centimeters... that's 5' 3"..." as she taps it in on the tablet. It hasn't changed. I'd bet she's been 5'3" for better than 20 years now.

Michelle has a moderately oval face, but with a soft-featured and rounded jawline. She has straight, dark brown hair that hangs just onto her shoulder blades. It's fairly full-bodied, giving it a waviness and bushiness that spreads it out as it flows downward until it covers most of her shoulders before its ends vanish behind her back. She has

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medium-bright green eyes. She has a smallish nose with soft, and fully rounded lines to it. And then she has a slightly narrow mouth that's framed with moderately-plump light-pink lips.

And Michelle has a so-stereo-typical "mom body." She carries a few extra pounds, but not that many. Enough that I can't see any lines of her bones, not at her shoulders nor at her hips. It's enough to smooth out those lines of her body. But that's all it's enough to do. It leaves her chest mostly flat. Her stomach is a little loose, it's skin having lost a fair bit of its youthful elasticity. And in the center, there's the finest of puffy paunch to her. Not like she's fat but more as if that loose flesh just sort of puffs a hair out more than it should. It leaves a good feminine curve to her hips and waist. And leaves her a set of full and rounded, curvy hips.

Michelle has a pair of rather ample breasts. 36-C breasts to be exact. But pregnancy and gravity have taken a toll on those mounds. They're soft and spongy. And they hang down, their undersides lying against her chest to make a pronounced crease under her mounds. But then her mounds round out nicely, their undersides taking a full curve as they flow out from her chest. In front, her mounds are fully rounded, before rising with a slight straightness up to rejoin her chest. Her mounds are topped with a pair of light pink nipples, as wide as marbles. Her squishy mounds have her nipples angling just slightly upward as they stand out, rising up almost a full ½". The sides of those nipples are straight, like little rods, for about half their length. Then her nipples have a pronounced roundness to their tips. Fairly wide rings of color surround her nipples, having the same light-pinkness, but also with the faintest tinge of brown to it. Naturally, Michelle's nipples are already standing up hard and eager. If they weren't, I'd be worried. But hers are so hard that the colored flesh surrounding them has pulled taut taking on a very slight wrinkling. I'd say those nipples qualify as rock hard.

Michelle's skin is tanned to a light bronze. Her pubes are mostly flat, but they do puffy out just a tiny bit. As does her stomach. But it's a flat puffiness, with no crease or sag to it. On her hips, I can see the tan lines of a very modest bikini. It's a line that circles fully around her hips



more like a pair of panties would than a bikini. There, her flesh is a light, milky white. Her pubes are shaven smooth. I don't know if she does that all the time, or just to get the hair out of the way for her "exams." With her feet together as Sophie measures her height, I can't see any of her pussy. Just her legs. And those are fairly lean, and definitely shapely, even though the skin on them has lost a touch of its tautness as well. The looseness hasn't done anything to detract from the shape of her legs.

Sophie tells Michelle to step onto a scale just beside where she's standing. She has Michelle stand the same way, rigidly, with her hands at her sides and announces Michelle's weight. "66.61 kilos... that's... 147 pounds." Sophie smirks and adds, "it looks like you've put on three pounds since your last visit. I'm sure Miss Rodgers will discuss your diet with you..." Nothing like calling a woman fat to shame her. Even when she's far from fat. She's curvy.

Sophie tells Michelle to go sit on the exam table. She goes along and once Michelle has hopped up onto it, she lightly scolds Michelle for her modesty. "Oh, just leave those hands at your sides, girl... we don't want them getting in the way." Michelle gets it and moves her hands from covering herself to her sides. It's Michelle's cue that no more modesty is going to be tolerated.

Sophie, as my nurse, gets Michelle's vital signs. Her temperature. Her blood pressure. Pulse. Respiration. Blood oxygen level. All the same stuff any doctor would get. Then she tells Michelle that Miss Rodgers will be right with her.



# Chapter 02: External Examination

## Chapter 02: External Examination

I don't do those porn-clip fake exams. Maybe you've seen them. The kind where the "doctor" goes straight for the "girly" parts of his/her patient and those are the only ones that get checked. I strive for a far more realistic experience for my playmates.

I'm also enrolled in a real, and very reputable, nursing school. On the schedule that we refer to as the "license hog" path. It will give me my LPN at the end of this year, my second year. Then the following year I'll get my RN. A year later, should I finish, I get my BSN, which doesn't get me any more privileges or licenses as a nurse. But it is one of the accepted and preferred bachelor's degrees for med school. Which is in my plans. What that means is I've already done plenty of real exams. Some of those on practice patients. Some of them on real patients at the student health clinic. It's where our nursing and med students practice before they turn us loose on actual people, which college students getting free care apparently don't qualify as. It means that I know exactly how to do the very same exam that an actual MD would do. And not only do I know what I'm seeing and feeling, but I've also seen and felt it all before. It allows me to do a real exam. Just as their real doctor (and someday me) would charge a couple of hundred bucks for. So far I haven't found anything on my toys, the two who crave exams, wrong. But if I did, I would immediately make sure the sub went to a real doctor.

I start with Michelle's eyes. I have Sophie standing beside me and taking notes on her tablet. I've even created a form for her to use. "Pupils are equal and reactive..." I announce first. Sophie just checks the box off.

As I told Michelle, this is going to be her most thorough exam yet. A very intense, and intimately invasive, exam. I check her ears next, announcing that there's a decent buildup in them. I have Sophie get me a little loop and I clean them out for Michelle as she sits there nude.

Then I tilt her head back and look right up her nose. I have the same scope a doctor would have, the one with the funnel-shaped tip and built-in light. It gives me a very good view into each nostril all the way to

her sinuses. I pronounce everything normal, but dirty. I have Sophie get me several long-stemmed Q-tips soaked in sterile water, which I use to clean her nostrils out. All the way back to her sinuses. Michelle flinches a little while I'm doing it. It can be a little weird-uncomfortable having something deep into a nostril.

Next on the list is Michelle's mouth. I have her open it wide, fully stretching her jaw. I take a quick moment to look at everything, teeth, gums, cheeks, and tongue with a little light. Then nurse Sophie hands me a tongue depressor, which I use to hold her tongue down and get a good look at the back of her mouth. I trade that for a curved scope that lets me see around the bend at the back of her mouth, all the way down to her throat. It's a little uncomfortable for Michelle. It gags her just being there, its tip all the way at the back of her mouth, angling down into her throat. I pronounce all of that acceptable as well.

Michelle closes her mouth. I take a moment to feel her jawline and neck. Feeling for any swelling or hardness in the glands and nodes there. I know she feels it. It would be impossible not to feel the pressure on her body. I lift one arm and do the same with her underarms. And yes, there are nodes there to check. Then I do the other underarm. Checking her arms is quick and easy. I just look down along them, my eyes searching for anything noteworthy. I note only two things, but minor cuts near her hands. I could find that on most anyone.

Now I've gotten down to her breasts. So I pause for a second and ask Michelle "have you felt any pain in your breasts?" She tells me no. I ask her if she's been doing her month's breast self-exams, and she assures me that she has. And she hasn't felt anything different. I ask if she is, or might possibly be, pregnant. She assures me that she's not.

So I start the breast exam. A real one. One where I start just alongside her stiff nipple and use two fingers to feel her mound, moving my fingers around the nipple in a circle and outward as I go. I feel plenty of softness. Almost like pushing on a water balloon, but not quite that loose. But I don't feel any hardness or knots. I do feel her mammary gland in the center of her mound. It feels like a gland. So, normal.

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Then I cup my hand underneath her mound and lift it up fully, pulling out the crease where the mound meets her chest. I feel along the underside of her mound again, just in case I missed something. Then I give her mound a few light squishes. Now I have her stretch her arms up high and repeat. Then I do the same with her other breast. And I take my time, making sure I feel every bit of her soft mounds.

Now I move to her nipples. I start by just looking at them through a powerful magnifier. It lets me see those nipples in close-up detail. It even lets me see the tiny milk ducts around them. I use a camera to get a good picture of each nipple in close-up. Most of my scopes have little cameras already fitted to them, so I've gotten pictures all along. They, along with these, will be part of Michelle's "chart." On her previous exams, I gave Michelle a copy of her chart to take home. This time I'm going to give it to Casey, not Michelle. Michelle should have read that paper she signed. It told her Casey would get her chart. OK, it was in six-point type. My inner lawyer must have reared her head!

Then I stroke a finger over the tip of Michelle's nipples, feeling the texture of them. It's very slightly rough, as a nipple should be. I give each nub a couple of firm, but light, pinches, too. It lets me feel just how hard they are. Like rocks.

I take a moment to listen to her heart and lungs with my stethoscope. From both her front and back. And with her taking deep breaths. I pronounce everything normal. I take one more short moment to check her back, both seeing and running my fingers along her spine. I note a very slight curvature to it, well within the limits of normal. But I note it anyway. Loudly so Michelle can hear me.

"Let's go ahead and get a blood draw, nurse slave," I say loudly. It gets a good wince from Michelle. Nobody really likes needles! A minute later Sophie wheels over the tray with what I'll need on it. I have it all set out in the cabinets, like "kits" for Sophie so she'll bring me the right stuff every time. She's not a nursing student. She doesn't even know what half of this stuff is.

I just take hold of Michelle's left arm, gripping her forearm, and

lift it up to where it's easy for me to get the elastic band around her upper arm. A very nice vein pops up for me in the crook of Michelle's elbow. I lower her arm, keeping her elbow bent. Sophie opens a packet, takes out an alcohol wipe, and diligently cleans the skin atop the vein for me.

Now Sophie hands me the needle holder, the wide plastic tube with the needle attached. Sophie even has the cap off the needle for me. She hands me the first test tube, one with the preservative already in its bottom, and I slip that into the holder, but not onto the needle yet. I position the needle along Michelle's forearm, lined up with that swollen vein. And then, without warning Michelle, I push it forward. Immediately I feel the resistance like I'm pressing the sharp point against a stiff rubber. Or maybe the skin of an orange. The needle easily pierces Michelle's flesh and slips right into her vein.

Michelle grunts out a loud, and squealy "OW!" as it pricks her skin. Push the tube onto the needle and the test tube begins to fill with red blood. I get about a quarter of a tube. That's plenty. I change tubes, the second one being sterile and empty. I fill that about a quarter full, too. I take it out and set it on the tray. Then Sophie hands me a very colorful neon Road Runner band-aid. I just love Road Runner! She always gets away! I slip the needle out of Michelle's arm, replacing it with the band-aid. Then I take the elastic band off her arm. Mission accomplished.

Sophie wheels the tray away. I ask Michelle to lie down on her stomach so I can check her back, legs, and feet. She does, following my instructions to lie with her legs together for now. I spend a couple of minutes feeling and looking at Michelle's back, all the way down to her waistline.

Sophie spends her time with the second tube of blood. That was just for her. She pops the cap off, dribbles a couple of drops onto three test cards, and waits a minute. Then she loudly announces "Michelle is A-positive, Doctor." And she notes it in Michelle's chart. It's an idiot-proof test to run. And those cheap, easy tests are the only ones Michelle will get here. Well, that and tested for STD, but if I decide to do

## Chapter 02: External Examination

that, I'll have to send the samples to a lab Nikolai has an arrangement with. It's something to do with his most profitable line of business: he owns a few jails around the south, and the lab provides services to them. They wouldn't notice the samples didn't come from one of the jails. Just scan the bar code on the tube, run the test, and email the result. As if the tests were run by robots instead of humans. Maybe they even are.

I move down to Michelle's bottom. There's really not much to check here. Just a pair of well-rounded cheeks. Cheeks with almost no sag or hang to them as she stands. But also cheeks that are spongy soft, and as she lies, they lie moderately flat on their tops. But this is just a real exam. It's a slut exam. So I take a long moment to feel her cheeks before pronouncing them soft, moderately loose, and healthy.

I spread her cheek wide with one hand, stretching them apart until I have a full and unhindered view of Michelle's asshole. I know Michelle doesn't do anal sex with her husband, or anyone. And her asshole looks it. It's cinched snug. It's small, no bigger than a dime now, and covered with a light pink skin. Around the light pinkness atop her ring of muscle, there's a swatch of lighter flesh with a slight brownish tinge to it. And not a hair in sight. Her ring sits inward, just a tiny hair beneath the rest of her crack. Her pink flesh makes a shallow funnel, ending with an irregular shaped line that's cinched fully shut. Countless wrinkles, most tiny, a few slightly more pronounced, line the pink flesh and run inward, vanishing into the minute squiggle at the center of her muscle. I pull her taut, stretching out some of the gentler wrinkles as I pull the skin around her ring.

"Michelle's anus looks fine... bring me a wipe, and once it's clean I'll go ahead and get a rectal temp on her." Just an insult. Michelle's asshole is as clean as any. Sophie brings me the wipe. I use it to clean her asshole, wiping over it with a little pressure as if I'm scrubbing it. And I take my time. A few seconds after Sophie is back with the thermometer. She already has a thin plastic cover over its shaft. I don't bother with any lubricant for this. I just put the tip against the little squiggle where her ring is clenched shut and press. I only push the tip of it into her, letting it lie in her asshole, Michelle's deep ring of muscle



## Doctor Mistress

squeezing snugly around the thin shaft. I hold it in place. After about half a minute it beeps. "99.47 rectally," I announce. Sophie repeats it back to me as she notes it. And I release Michelle's cheeks.

I spend a few minutes working my way down her legs, then over her feet. Especially the so-often neglected soles of those feet. And her toes.

Then I ask Michelle to roll over. I work my way down her stomach, feeling everything, looking at everything, and listening to her stomach as well. I even closely check her navel. Where I find a few stray strands of lint that I remove for her. I go all the way down, feeling my way over her pubes as well. I listen to those as well, even though there's not much to hear there. Then I go down her legs again, all the way to the tips of her toes.

And now, I'm ready to start the more invasive parts of Michelle's examination.



# Chapter 03: Pelvic Exam

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I help Michelle get her feet up into the stirrups. I have them wide apart, just as her gynecologist would. It fully bares her pussy to me, holding her legs up and out, well out of the way.

Sophie does her job, too. She goes over to Casey and firmly suggests that Casey pull her chair up beside Michelle. Now might be a time when Michelle will appreciate having her hand held. Now that the exam is moving beyond just the external. Casey very reluctantly rolls her chair over beside Michelle's head. She sits facing Michelle, in a way that she won't have to see Michelle's body laid out for me. Any of it below the tame and chaste sight of Michelle's bare shoulders.

Michelle doesn't have much in the way of lips. Her outer lips aren't really lips. They're more short, narrow, and flat stretches of skin just inside the crease of Michelle's thighs. They don't come anywhere close to meeting, either.

Between those two little stretches of skin, the very wrinkly and loose inner folds of her pussy stand fully out and exposed. They petal out, especially at the bottom over her pussy tunnel. There they lie softly back, against the outside of her outer lips. And even those folds don't fully meet, leaving a deep, but narrow, chasm between the right atop her tunnel. At the top, those folds flow together into a loose knot. The knot is fully exposed as well, her outer lips nowhere near it. It leaves her clit fully accessible, its nest standing out in the open in her slit. Unusual, but not anything noteworthy. Just a pussy.

I take a minute to loudly note that her outer lips are fine. I check them with my eyes. And with my fingers, feeling every speck of those minimalist stretches of skin. Then I do the same, running my fingers over her wrinkly lips, smoothing out the wrinkles as I do, feeling them as I look them over on both sides. I pronounce those normal as well.

"Just stay still and relaxed for me, Michelle. I'm going to check your clitoris now." the only reason I tell her what I'm going to do is for Casey to hear. And for Michelle to know Casey heard. So Michelle can lie there thinking about how Casey knows that I'm "inspecting" Michelle's most sensitive and intimate little nub. It will add context to my

commentary.

I can already see the tip of its head, poking up, but also nestled under a taut, pink fold of lip. I put my finger atop the tip that I can see. Michelle immediately breathes out a very sultry and deep purr. I feel its hardness. And I announce that "Michelle's clitoris is fairly hard." Then I use my fingers to nudge the thin folds of skin, the edges of her inner folds, that make up its nest aside to bare all of her nub to my eyes. Her clit is fully swollen up and hard. It's well rounded on its tip, and almost as wide as her nipples are. But it doesn't stand up quite as far. Far enough, though, with those loose folds pushed aside to bare every bit of it.

"Michelle's clitoris is 8 millimeters wide... and it's standing up 10 millimeters, which is its full erect height." I make sure both Michelle and Casey hear me tell Sophie the exact measurements of Michelle's little button. "I'm noting that the looseness of her labia minora allows them to almost fully cover her clitoris, even when it's erect, and that likely dulls the sensation slight during sex." I'm sure Michelle does so not want to hear that. And more so does not want Casey to hear it.

"Michelle, just relax... I'm just going to see if the nerves in your clitoris are working right." I tell her. Then I use two fingers to very lightly pinch her nub. Michelle gasps in a sucking, fast, and squealy-noisy breath. And she shivers. I slowly roll her nub between my fingers. Michelle moans out, constantly, and loudly, her moans slightly high-pitched with an edge of a squeal to them. I can see that she's gripping Casey's hand rather hard, too. I give it about five or six seconds until a crisp, light shudder racks Michelle's body. Then I stop and tell Sophie "Clitoral sensitivity is normal." Michelle sighs a heavy breath of relief, then pants a couple of fast breaths as she lies there.

I ask Sophie to bring me a tray so I can get a swab for gonorrhea. Sophie knows that means to bring me the second "kit" on the tray, which is set up for so much more than a single swab. Sophie sets everything out and wheels it over to me.

I still haven't had the need to open Michelle's lips, and by now I

## Chapter 03: Pelvic Exam

normally would have. It's the unusual way her pussy bares her inner folds and clit. But now I have to. The swab is taken from her urethra. The opening of which is right above her pussy tunnel, which puts it behind those petaling folds. And the swab is going to hurt. Not badly, certainly nothing Michelle will have difficulty lying still for. But still, it will hurt. Bodies seem to think urethras are one-way tubes – exit only.

I use two fingers of one hand to nudge those folds apart. Just parting them is enough to stretch the rest of her pinkness and pull it taut. Stretching her pinkness out reveals the small little opening of her urethra. I put the tip of the swab to the small hole. The swab is small, like a Q-tip, only much longer, and with a head of stiff foam instead of cotton. Then it's a simple matter of pushing. The foam tip is small enough to push right into her tube but also big enough that it's stretching her tube, scraping along the insides of it, as it slides into her.

Michelle tenses up hard and cries out a long "OW!" as it goes in. I twirl it quickly, then pull it back out. Michelle breathes another sigh of relief. She fidgets a little as she lies there. And then, eventually, she loosens her tight grip on Casey's hand. "Ow..." Michelle says under her breath, "I hate that so much..." Yet I can see that her clit is still at its full eager hardness. Yeah, sure, she "hates" it...

I get my little scope again. The one with the pointy funnel-shaped tip. I put it to the opening of Michelle's urethra, pressing the narrow tip about ½" into her. It lets me see inside her tube. I don't see anything unusual, just the soft walls of her rubbery tube. A healthy, and horny, woman. I take it back out. Michelle lies still for it. I know she felt it, but I didn't quite go far enough into her for her to really feel it.

She's been through all of this before. It has all been part of her previous exams. But on those exams, I just had her pee in a cup. It's not like it's actually going to a lab anyway. The trash can doesn't care where it's specimens come from. So the next step is going to be new to Michelle. As well as unusually invasive and uncomfortable. So it's time for me to add a little embarrassment to it as well.

"Casey..." I ask in a very professional voice. "I think we should go

ahead and do a full exam on Michelle's bladder, too. It will be a little uncomfortable for her, but I would just hate to find out a week down the road that I missed something. There is a little redness to her urethra so maybe there's something there. Your call, shall we? It really is for Michelle's own good..."

"Whatever." Casey answers. Her answer tells me that she's just playing a role and blindly agreeing to whatever is asked. And so definitely not thinking about it. And that tells me that I should torment Casey a little more. Michelle, too. I can already see that just the idea of something new has Michelle fidgeting. I'm sure the thought of it being uncomfortable has her as aroused as it does nervous.

"Okay then. You might want to hold her hand. I'm going to have to put a catheter in, and that's going to hurt a little... like a huge needle stick..."

My words have the desired effect. Michelle is already gripping Casey's hand hard and fidgeting pretty good on the table. I'm sure she's had a catheter before, so she knows what it's going to be like. No one likes them.

I have a pretty standard, but large-sized #26 Foley catheter ready for Michelle. It's the most commonly used type of catheter. It's a long, moderately rigid, flexible, tube. At its tip, there's a hole off to the side. At its base, there's a Y with two ports, one wide and one narrower.

I start with a little squirt tube of lubricating jelly. It has a pinpoint tip, like the end of a funnel, on it. I put that pointy tip about ½" into Michelle's rubbery tube. Then I squeeze as I slowly draw it back out. It pushes a decent dollop of the lubricant into the opening and the first bit of her tube. That will make the catheter slip so much easier into her.

Then I put the tip of the catheter just barely into the opening. It's a fat one, too. I chose it so that Michelle would have more to feel. Then it's just a simple matter of pushing the tube into Michelle's body. It slides easily through her urethra, offering me only the slightest resistance as the wider tube stretches her urethra on its way in.

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Michelle screeches a loud “OW!” she tenses up, and keeps screeching for the couple of seconds it takes to go in. And she’s squishing Casey’s hand in a very hard grip.

It’s about two seconds before I feel the firmer resistance that tells me the tube is pressing against the opening into Michelle’s bladder. I use just a little more pressure and the tube “pops” as it presses through the resistance. I slip it another inch or two into her so that I’m sure its tip is fully inside her bladder.

I use one hand to hold the tube in place for a second. Sophie has already attached a wide syringe to the smaller port of the catheter for me. I just push its plunger. That squirts a few milliliters of sterile water through a very narrow, second, inner tube. It inflates a “balloon” at the tip of the catheter, just beneath the hole in it, that will ensure it stays put. That balloon has to be deflated before It can slide back out of her.

The wider port is clamped off. It was before I inserted it. It’s just the end of the tube, a direct line into Michelle’s bladder. I get two little jars. Getting urine samples like this is easy. I just hold the end of the tube over the rim of the jar, ease off the clamp, and Michelle’s pee flows. When I have what I want, I squeeze the clamp back down and it shuts off the flow of pee. Onto the next jar. One jar for the “lab” and one jar for the quick tests. My nurse will do those now.

I get an empty bag and attach it to the end of the catheter. I release the clamp. Then I just wait as Michelle’s pee steadily flows through the tube and fills the bag. It takes a moment. When it finally stops flowing, the tube now empty, I clamp the tube off again. Then I set the bag aside for Sophie.

I attach another bag to the end of the catheter. This one is full. It holds a full liter of sterile water. I release the clamp. Nothing flows, since Michelle is empty. "Casey, I'm just going to inflate Michelle's bladder for the exam now. It's going to get a little uncomfortable for her like she really wants to pee." As Michelle fidgets a little more, I start squeezing the bag.

A bladder can hold a full liter. But it’s not comfortable. As I



squeeze more and more water into Michelle, she starts to feel it. At first, she just grips Casey's hand a little harder. Then she starts to tense up and squirm. And then, with about 650 ml, or two-thirds of it, into her, she starts panting faint "OH!s" that lasts until she gets to around 850 ml. Then she suddenly cries out "OH!...OW! I GOTTA PEE!" I ignore it and keep on filling her up. She always whines about anything remotely uncomfortable. And she so clearly gets aroused by it. I don't want to imagine what her gynecologist sees. "STOP! I'M GOING TO EXPLODE! I HAVE TO PEE NOW!" Michelle's cry is almost a scream. And it's laced with a note of true nervousness. And a lot of discomfort. Some excitement, too. I finish squeezing the liter into her and clamp off the tube. Now the water will stay inside her. She can't pee it out, no matter how much she wants to or tries.

Michelle, whines, and squirms around on the table, squeezing Casey's hand especially hard. "Please, let me pee!" she calls out a few times.

I put my gloved hand atop Michelle's bare pubes. I barely have to press at all to feel her bladder now. It's swollen up fully, stretched out to its limit, its walls feeling hard around the ungiving water. The light pressure against her bladder gets a couple of desperate cries from Michelle as she begs to be allowed to pee before she bursts. She won't, but I doubt she's ever been this full before. Long before she was, she would have scurried to the ladies' room with her legs tightly crossed.

I slip two gloved fingers into Michelle's pussy. It lets me feel the fiery hot heat in her spongy walls. And it lets me feel a couple of crisp twitches sweeping along those walls. I ignore it. I'm not ready to check her pussy yet. I just press upward with those fingers. It lets me feel the backside of her hard bladder. And it lets Michelle feel me pushing on it again. It makes Michelle squeal a few fresh pleas for relief.

I release the clamp and let Michelle's bladder start draining. It takes a few seconds, but finally, Michelle breathes out a squealy, but relieved, "OH!...OH!...OOH!..." as she drains. I let her drain fully. Then I clamp the tube off again, switching the full bag for another empty one. I

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lie the bag off to the side, leaving it to drain her pee as fast as it reaches her bladder. Drop by drop. Her bladder won't hold a drop until I take the catheter from her. And I'm not. Not just yet.

"Negative for all drugs," Sophie announces the results of Michelle's urinalysis. "Negative for pregnancy and ovulation as well." all three tests are simple strips that are dipped in Michelle's pee and turn colors. Sophie can handle those kinds of tests. She notes the results.

"Michelle, just relax now so I can start your pelvic exam..." I tell her. Now on familiar ground, Michelle's fidgeting eases to almost nothing. At least she knows what's coming and that it won't hurt much. Or so she thinks.

I start with a plastic speculum. I've already done the "external" part of the exam. With Michelle's lips not hiding much of anything, I didn't have much of a choice. Michelle squeals lightly, little more than a soft groan of "OH!" as the plastic blades slide easily into her pussy. Then I just squeeze and they spread. As they do, they stretch Michelle's pussy walls, opening her tunnel to offer me easy access to it.

I stretch her walls open just like her gynecologist would. Not too far, not far enough for it to hurt. But enough for me to see everything. The blades open to the sides. At the top and bottom, I can see her unrestrained walls expanding down into the space. They don't come close to touching. They just hang there, offering me a full view of Michelle's very intimate, spongy pinkness. It lets me see how soft her walls are. How pulpy they are.

I take a quick second to examine her walls. I let Michelle feel my finger pushing on the free stretches of her walls to feel their sponginess. I let her feel my finger stroking over those walls, teasing her nerves sweetly as it does. It lets me feel how slick her honey is. Hers is creamy, and it clings to everything, but it's also slippery. And I can see that it has been flowing liberally. She's sopping wet.

Michelle lies there, slightly tensed, but still as I examine her pussy. She purrs lightly as she feels my finger stroking her insides. Then I get the usual samples, swabbing her walls gently to get a sample of her

honey, then scraping another, slightly rough tipped, collector over her cervix for a sample, too. I hand those off to Sophie so she can seal them as if they were going to the lab.

I have a good view of Michelle's cervix now, too. It looks like an irregular shaped, almost straight, crater no bigger than the point of a pencil atop a mound of muscle. Almost like a little volcano. That its opening isn't quite rounded isn't unusual at all. It's a definite sign of one thing: giving birth the old-fashioned way. That tends to stretch the cervix as the baby exits her uterus, and they seldom close back up neatly. Just close back up. It tells me nothing. Casey sitting next to Michelle is proof of birth, after all.

"Casey... I'm a little concerned here..." As I say it, I feel Michelle tense up. I don't think she knows I have any real medical training. I certainly haven't told her anything about me. But maybe she's figured it out by the professional manner I do her "exams." Maybe she thinks I might actually be able to notice something wrong, which I am. And no woman wants to hear that there might be something wrong with her pussy. Michelle starts fidgeting again, not too hard, but enough for me to notice.

"Michelle's vagina is unusually wet, and the walls are exceptionally sensitive right now. That could be a bad case of skank, but it could be a sign of something more... I'd like to go ahead and check her uterus while I'm here. It will only take a few seconds. But to do that I have to put this little scope through her cervix so I can see the lining inside her uterus, and that's going to hurt. It will be like the worst needle stick ever. I think it's better to go ahead and check and make sure her vagina is okay. Do you think you could hold her hand and keep her calm while I do?"

"Whatever." Casey doesn't sound thrilled. But she agrees. I think.

I use the same scope, but with a different tip on it. This tip is funnel-shaped as well, only much longer and with a more gentle taper to it. Right up to the tip, there it has the same taper to it. The extra length is just to reach through her pussy to the back.

## Chapter 03: Pelvic Exam

I put the tip of it against the irregular little line of Michelle's cervix. "Here it comes..." I warn Casey. Michelle tenses up and squishes Casey's hand hard. Then I press. It takes a decent amount of pressure. Not a whole lot, but some. Even with its so gradual taper, the tip has to work to stretch the strong muscle of Michelle's uterus the millimeter or so it needs to pass through the tight opening.

"OW!" Michelle screeches as it pushes through her unwelcoming muscle. "OW! That HURTS!" She tenses harder and squirms a little more, too. "IT HURTS!"

Once it does, her muscle squeezes against it and tries to push it out. I just peek through the scope. And I see a very nice uterus, it's lining almost fully flushed with blood. It tells me that she'll ovulate soon. Her uterus is ready for its next occupant. I hold the scope in place, wasting time, letting Michelle feel the light pain of it. I might have hurried, but not now that I see her clit is swollen up so hard and eagerly. Almost throbbing now. It hurts, there's no doubt about it. But obviously, the light pain is arousing Michelle. So I give her about fifteen seconds to "enjoy" it. Then I pull it back, her cervix closing immediately.

"OH!" Michelle breathes out a deep sigh of relief as soon as it's out of her. She pants once. "OH... that hurt so bad! I am so glad that's over and done!"

I release the spreader and slip it from Michelle's pussy. Then I start the manual part of her pelvic, without warning her I'm going to. She figures it out when she feels my fingers slipping into her fiery hot pussy. I use all four of them. It stretches her pussy fairly tautly, but not quite enough to hurt. It's the same as any doctor would use unless he had hands like a gorilla anyway. But the tautness of her walls pulled snug along my fingers, gives me a good feel of the heat in them. And of the blood rushing through them. And of the little twitches flowing along her nerves. All sure signs that Michelle is fully enjoying her exam.

With my fingers against Michelle's cervix, it's just a simple matter of pressing against her pubes to slightly shift the position of her uterus. And to feel all of that muscular organ. It feels like a firm, smooth

muscle, with a slight pear shape to it, tapering quickly into her cervix. It feels like a uterus. One with no lesions or cysts on it. Then again, I would be shocked if I did find anything. Michelle impresses me as the type of woman who doesn't miss an appointment with her gynecologist.

Now it's time to check the backside of Michelle's uterus. She knows it's coming when she feels my hand slip out of her pussy. And I know that she "hates" the next part. She always whines about it. Enjoys it immensely, but whines.

I put the tip of my lubricated and gloved finger against the tight ring of Michelle's asshole.

"OH!" Michelle blurts out nervously, "Can we please skip this part! Please! I've been poked enough already! Please, doctor, can we skip this just this once!" She squirms around on the table, too, as if she's trying to stay on it but also to get her bottom away from me.

"You always ask that, Michelle," I say with some reproach in my voice. "And I always tell you the same thing. I don't do half exams on uteruses. Just relax and it'll be over in a few seconds."

"EE-OW!" Michelle squeals out as I gently press my finger into her tense asshole. "HURRY UP! I WANT IT OUT!" I don't hurry. I slide all of my finger into her rectum. Then I press upward. At the same time, I press down firmly atop Michelle's pubes, pushing her uterus down and back against my finger.

I stroke my finger gently. The pad of my finger glides over the backside of the hard muscle that's Michelle's uterus and feels nothing noteworthy. As it does, the rest of my finger presses against the backside of Michelle's pussy walls and strokes those through her rectum.

"HURRY UP!" Michelle squeals, her voice edgy, uncomfortable, and near-panicked. "GET IT OUT! GET IT OUT! PLEASE GET IT OUT OF MY BUTT!" I make her wait for a few more unnecessary seconds, then I slip my finger back out.

Michelle breathes out a very relieved sigh. "AH!... OH! Thank G-d it's out of me!" Michelle pants a few more times. "Thank G-d... I'm sorry

## Chapter 03: Pelvic Exam

doctor, you know I just can't stand *ANYTHING* in my butt, Ma'am."

I know she whines and cries about it. But my eyes tell me a different story. They see her clit straining for a little more hardness. And they see the honey weeping from between those wrinkly, unclosing pink folds.

And that's the end of Michelle's pelvic exam. Time to move on.



# Chapter 04: Rectal Exam



## Doctor Mistress

"Casey..." I begin. "I told Michelle that this was going to be an especially thorough exam today. I don't usually bother with this, but given how serious skank can be, I don't want to miss anything. Michelle's not expecting this part. It's going to be slightly unpleasant for her. Just keep her calm. It'll be quick. I just want to get a stool sample."

I open the packet with the collector in it. It's like a foot-long, thin, plastic stick with a wide tip shaped like the eye of a needle. I hold it up so Casey can see it. Michelle's very wary eyes lock on it. "Oh, my G-d!" Michelle blurts out nervously, "that's way too big! My poop is fine, doctor, please don't put that up my butt! PLEASE!"

"Casey, just keep Michelle calm. It won't take long." I tell the girl, ignoring Michelle as if she's not there. I put the oval-shaped tip of it firmly against Michelle's tightly clenched asshole. I press. The needle's-eye shape of it is well tapered, and it easily stretches her resisting asshole to slip in.

"OW!" Michelle squeals, "GET IT OUT! GET IT OUT! MY POOP IS FINE!"

I keep pressing it, not too quickly, pushing that wide head through Michelle's bowels. "Just a few more seconds, I need to get all the way to the very back of Michelle's rectum and sample the freshest stool." I know Michelle hears me. She fidgets even more and whines. "You'll feel a little uncomfortable pressure for just a second..." That's all I have time to say before I feel the resistance that tells me the collector is pushing against the back of Michelle's rectum.

"OW!" Michelle screeches, "EE-OW!, OH, OW!"

By then I'm done twirling the collector, its tip gently scraping over the membrane of Michelle's rectum and filling the needle's-eye with a nice specimen of stool. I start pulling it back out. I use the same casual pace that I pushed it in with.

"OH!" Michelle sighs out loudly, her voice pure relief as the tip pulls back out through her tight asshole. "That was the worst yet!" she moans.

## Chapter 04: Rectal Exam

I hold the collector up high enough that I know Michelle can see it. Casey very quickly averts her eyes. It lets them see the tip of it filled with a gooey, pasty, light brown sample. I slip it into a long test tube type cover as if it's going to the lab.

Michelle lies there, fidgeting, wondering if I have any more surprises in store for her. And with her pussy steadily weeping honey. She pants nervously, too.

"Casey... I think we need to do a full rectal exam on Michelle. As you can see, she's a complete baby when it comes to her bottom. Which is why you are making her decisions for her. I swear I think Michelle would die of colon cancer before she'd get a rectal exam. It's going to take a few minutes, and Michelle is going to be very uncomfortable during it. But it does need to be done, for Michelle's own good. It's your call..."

In the most nervous, pathetically pleading voice, Michelle suddenly begs "Casey, PLEASE! Don't make have a rectal exam! PLEASE! Casey, PLEASE! Don't make me have one. PLEASE! I can't stand anything in my butt! PLEASE, don't make me have a rectal!" Michelle stops begging and starts sobbing lightly. "Please, it will hurt me so much! Please, don't make do it... please don't! It won't be able to stand it... it's going to be too much..."

"Just ignore Michelle," I firmly tell Casey. "She's only thinking of her comfort, not what's best for her. It's kind of important she has the rectal exam... So, shall we?" I nod my head gently, cueing Casey how to answer. Michelle can't see me. She's too busy glaring at Casey and sobbing. But Casey sees it.

I guess she's smart enough to have figured out her role in this charade. She's to allow everything. "Whatever... just do whatever... she needs."

"CASEY! PLEASE!" Michelle blurts out, "I'LL DO ANYTHING YOU WANT ME TO, JUST DON'T MAKE ME HAVE A RECTAL EXAM!" I just wonder if Casey notices that in spite of her protestations and pleading, Michelle hasn't tried to get off the table. And she's not bound. It tells

me that Michelle wants the exam. And she wants to cry about it.

"Nurse slave..." I call out in a very taunting, teasing voice, "bring me a rectal cleansing enema."

Then I tell Casey that we'll have to start with the enema to clean Michelle's rectum out so that it can be examined. While I'm telling her that, Sophie brings over what I've asked for and sets it on the tray. It's a huge bag of slightly green-tinged fluid. The green is just food coloring so I know what I filled the bag with. Green is for fast-acting laxatives. It's the bag itself that catches Casey's attention. It holds a full four liters. A little over a gallon. It looks huge. Michelle is too busy pleading with Casey not to "torture her" with a rectal exam to notice anything.

Nor does Michelle notice the nozzle. It's a short one, only about three inches long. But it's fat. It's 1 1/8<sup>th</sup> inch across at its inside. Maybe 1 1/4" across outside. It's just a clear plastic tube with little tabs, and a push-to-connect fitting, on its base end. It has another tube inside of it, snugly against the inside of its walls. That tube's shaft is even with the tip of the other. Then, above its shaft, there's a rounded tip, like a half-ball, rising. It's already coated with a decent layer of slippery lubricating jelly. Michelle might not see it, but Casey does. She balks, blurting out "that goes up her butt?"

I just grin. Then I put the rounded tip of it firmly against Michelle's asshole and hold it still for a second. "It's not as bad as it looks." I tell Casey, "You have a project for the next couple of minutes. You need to keep Michelle calm. Very calm. The more relaxed she is, the less uncomfortable she'll be. And she is not going to want to relax."

I push gently with the tube, it's rounded tip now pressing firmly against Michelle's tightly resisting ring. "It's TOO BIG!" Michelle screeches out as soon as she feels how wide it is. Feels the rounded tip totally eclipsing her tiny ring and some flesh beyond. "IT WON'T FIT UP MY BUTT! PLEASE, YOU'LL KILL ME! PLEASE!"

The tip's roundness easily pushes against Michelle's ring. As it does it leaves her muscle no choice but to stretch and allow the invading bit of the tip into the space at the center of the ring. And to keep

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stretching wider as the roundness demands more and more space. And then even more space. It stretches Michelle's ring wide, almost approaching its limit. It's wide enough that the wrinkles are pulled out of the pink skin over her muscle, the skin going taut.

"STOP!...IT WON'T FIT!" Michelle cries out nervously. Then she screams a loud "OW!" Her scream is almost loud enough to hurt my ears. She screams as her asshole is stretched to the widest it will be, and the shaft starts slipping through her ring. And into her bottom. Michelle cries out a few more pleas as it slips into her.

I stop when the little tabs are against the soft pink at the inside edges of Michelle's cheeks. I use a couple of strips of adhesive tape over the tabs and onto her cheeks to hold the tube in place. "There, now we have Michelle's anus fully dilated for her enema."

There are two hoses for the flushing enema. One, a narrow hose just slightly wider than you'd find on an IV bag, connected to the huge bag of fluid. The second is a much wider, maybe 1 ½" thick or so, hose. That one is made of thin-walled plastic not much sturdier than a baggie. At one end is a ring-shaped plastic fitting that will snap onto the tube in Michelle's asshole. The fitting has a little side connector for the first hose to slip onto. And then it has a long, pencil-thin tube that extends out about six inches past the rim of the connector. That thin, fairly rigid tube is connected to the fitting for the first hose. Through it, the fluid will flow into Michelle's bottom. Then it will flow back through the fatter hose. I drop the free end of the fat hose into a baggie-lined two-gallon bucket Sophie sets on the floor beside Michelle's hips.

Then I pull the inner tube out of the outer tube through Michelle's asshole. It leaves just the inner tube, like a pipe, open at both ends and passing right through Michelle's unhappy ring. Through it, I have a good view of Michelle's rectum. I quickly push the fitting onto the tube before anything slides out of Michelle's bottom through that gaping tube. And I connect the enema back to its port. Then I hang the bag up high.

"Casey, don't let Michelle con you. I'm starting her rectal flushing

enema now, but for now, all Michelle is going to feel is the liquid's coolness. That's it. No filling up or anything else. Just that it's cold." I flip the clamp off the narrow hose and the fluid begins to flow through it. Through the hose. Through the nozzle sticking about four inches out from the end of the wider tube through Michelle's ring. Then, after several seconds, I start to see the slightly-green-tinged fluid begin to flow through the clear, fat tube towards the bucket.

Michelle lies there, fidgeting hard, and takes a short break from whining about how big the tube in her is to whine about how icy cold the fluid is. It's not. It's room temperature, about 72 degrees. But it does feel icy against her nearly-100-degree rectum.

I wait until it looks as if the fluid is flowing back out as fast as it's flowing into Michelle. "Casey, Michelle's rectum is going to start to fill up now. As it does, she's going to get very uncomfortable. Just keep her calm and relaxed, and in about five minutes she'll start to drain and her discomfort will ease." I put a clamp on the drain line, shutting it off. It takes about two seconds for the hose to flood with the fluid and swell up to its full width. The clamp is maybe a foot, probably not that far, from the connector. It doesn't leave too much hose to fill up.

About two seconds after the hose is as full as it will get, I hear Michelle start to cry out soft, and very nervous, mewling little "OH!s" It's enough for me to know that Michelle is starting to feel the fluid filling her rectum. It will stretch it out to its fullest as it does. But that's all it will do. The bag isn't close to high enough to create enough pressure to fill her beyond that.

It doesn't take but about a minute for the fluid to stop flowing into Michelle. By then, Michelle is fidgeting hard and squealing loudly. She constantly tells Casey that her bottom is way too full. She wants a toilet, and she wants it now. That her bottom is going to burst any second now if she doesn't get it. And mostly, how much it hurts to be so full.

After half a minute or so of Michelle's whines, I just tell Casey "She hasn't burst. She's not going to. She's as full as she's going to get.

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We're just allowing some time now for Michelle's feces to soak up that fluid and soft to a thick watery cream so it can easily flow out of her through the hose there. Just keep Michelle calm for a few more minutes."

As Michelle lies there, I busy myself reviewing the notes Sophie has made so far in Michelle's chart. And adding a few embarrassing ones that I didn't think to announce aloud. And keeping an eye on Michelle's pussy. For that, I am so glad that her clit is exposed without my having to spread her inner folds. It lets me see it without Michelle knowing I'm looking.

It takes about a minute more of Michelle lying there. By then her clit has found a little more hardness. Somewhere. It's enough that its head is standing up above the knot of folds it calls home. And it is as hard as it is able to get. I can see that. It's starting to pulse, throbbing in time with Michelle's heartbeat. And I can see the honey steadily weeping out between those wrinkly folds. Honey that now has all of those pink flaps covered, and has crept into the creases of her thighs. Yeah, right, Michelle just "hates" this!

Casey finally does more than just stand there and not look at Michelle's naked body. I think it's Michelle's so desperate fidgeting and pleading that gets to the girl. As if Michelle is being tortured on the rack by the Spanish Inquisition or something.

Casey starts affectionately stroking Michelle's brow and cheek while holding her hand. She tells her "just try to relax mom, she said it won't be so bad if you do... come on, mom, just try!"

Michelle doesn't try to relax. Instead, she shamelessly begs Casey to convince me to "ease it up just a little," so that it isn't unbearable for Michelle. She pleads that she's just so full. She feels like she's going to burst right now. It hurts. And she's cramping.

"Can you do that?" Casey asks me softly, "let up just a little for her? Mom is like dying here!"

I hold a finger up to my lips to quiet Casey. Or hopefully to tell

her not to say anything about this. I wiggle my finger to cue her to come. And I point to Michelle's exposed clit.

Casey very reluctantly peeks. For a fraction of a second. It's enough. She sees what I'm pointing at. And she must see it throbbing so hard. It's kind of impossible to miss. Casey's eyes go wide. They quickly shift back to her mom's wrinkled up, so-pained, face and Michelle goes on begging Casey to get her just a little mercy. After a second, Casey turns back to me for a brief moment, her head shaking. Yeah, she saw what I wanted her to. And she knows what it means.

After a few more seconds, Casey surprises me. She balks, "mom, stop your whining and just relax! Like, so obviously, you need this!" It does nothing to relax Michelle. Or to stop her whining. Or her squirming. But it does get a faint blush from Michelle as she wonders what changed Casey's mind. What did Casey see?

I hear the doorbell and see Sophie go to answer it. It's her job. She's back in a minute and whispers to me that Doug, Michelle's husband, is "in the waiting room now." I nod.

Michelle squeals loudly through every second. But she lasts the full five minutes. She'd last forever if I wanted her to. She couldn't empty her bowels now if she wanted to, not lying here, anyway. She'd have to pull that tube out of her first.

I just release the clamp on the drain line. The fluid, not with a lot of stool in it, immediately begins to flow into the bucket. And into Michelle's rectum through the smaller fill line. But it can't flow in as quickly as it's flowing out, so slowly Michelle's rectum will relax from its full-stretched width. It will take about five more minutes, fluid flowing in, washing over the inside of Michelle's rectum, and flowing back out before that bag is empty. A few more seconds and Michelle's rectum will be empty. And very cleanly washed out.

But it doesn't take more than two seconds for Casey to wrinkle her nose up hard. I just grin. I can smell it, too. It smells exactly like what it is. Waste. That's now filling the open bucket.

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Michelle doesn't relax or quiet much at all over the next few minutes. Not even when I notice that the fluid is flowing out of her at the same rate it's flowing in. Meaning there aren't but a few drops inside Michelle's bottom.

Finally, the bag runs dry. The fluid stops flowing into Michelle. A few seconds later it stops flowing out, too. It tells me there's nothing left inside Michelle. Michelle quiet, marginally, and very maybe. I unclip the connector from the tube, leaving just the wide tube holding Michelle's asshole gaping wide open.

As I set it all aside, Sophie gets it.

"Get it out of my butt now, please!" Michelle sobs as she softly pleads.

I ignore it. I get the scope. It's not a colonoscope, those are ridiculously expensive. It's a \$25 lizard cam from Harbor Freight. And it works just as well. It's just not as long, only about two feet long. But a rectum is less than half of that, and it's not like I'm going beyond that. Her colon hasn't been cleaned out for that!

It's far narrower than the tube. I just slide it in, turning its light on. It lets me so clearly see the inside of Michelle's rectum. The pinkish membrane, lined with thick dark veins everywhere. And beyond that the reddish layer of thin muscle that surrounds it. A muscle that's obviously flushed bright with blood now. Her rectum is spotlessly clean now, too.

The pink walls are soft and rubbery. They hang loose, their surfaces far from taut now. They bulge downward in several places. But they don't block my view. Right down the long tunnel that's Michelle's rectum, all the way to the narrowing back of her bowels. Where slightly offset to the side, I can see the little opening that's her colon joining her rectum. I get a few pictures.

Then I pull the camera back out. I reach through the tube with a little dental mirror. Michelle won't even feel this. I use the mirror to see the back, the inside, of Michelle's asshole. It looks just like the outside, a taut ring of pinkish flesh squeezing hard against the clear tube. Through



that clear tube, I can see the pink skin squished against it.

"One more test, and we're all done, Casey... I just have to see how tender Michelle's rectum is." I put my finger through the tube. I barely have fingers long enough to reach, too. But I can get the pad of my finger in far enough to lie it against the membrane. I press upward.

It takes almost no pressure for me to feel everything. The wall of muscle around her rectum isn't any thicker than a sheet of paper. Nor is it very strong. But beyond that, I can feel the spongy softness that's the backside of Michelle's pussy walls. I feel the heat, now burning hotter than ever. And I feel the twitches along her nerve lines.

I stroke the pad of my finger softly over the clean membrane, massaging the walls of Michelle's pussy through her bowels.

I don't even get the first stroke done. Michelle cries out a loud, squealing, and very urgent, erotic moan as a crisp shudder racks her body.

Casey sees it for what it is. She looks away with some revulsion on her face. But she doesn't take her hand from Michelle's.

I stroke her pussy this way a few more seconds. No more. Michelle moans her way through it, her moans as needy and hungry as they are slutty. And she shudders. And I feel her pussy snapping harder as sharper twitches shoot along those nerve lines.

I stop and take my finger out. Then I pull the tube from Michelle's asshole. I watch for the two or three seconds it takes her muscle to tighten back up to its full squeezing tension.

Michelle sighs out a deep, and now sensually tinged, sigh of relief. "Please tell me you're done with my butt now, doctor. Please!" She sobs.

I ignore Michelle. I just deflate the balloon on her catheter and pulls that from her. Michelle screams out a pained and surprised "OW!" as it comes out. She wouldn't feel it while it was in, so I'll bet with all that was happening to her butt, she forgot it was there.



# Chapter 05: Diagnosis - Skankitis

## Chapter 05: Diagnosis - Skankitis

With nothing now being done to Michelle, she quiets as she lies on the table. I ignore her. Sophie already has "the doctor's office" set up. It's a pair of chairs in front of my desk in the living room where Doug, Michelle's husband, and Casey's father, is waiting. Now it's time for the "consultation." It's solely to embarrass and humiliate Michelle one last time before we begin her treatment.

But first, I have one more surprise in an evening of surprises for Michelle. I ask Casey. I tell her that while Michelle is here, it's as good of a time as any. I've noticed that Michelle's immunizations are "out of date." Michelle is due for her immunizations for "distemper" and "PID, Pussy Itch Disease." Both are very serious, and virtually untreatable viruses. Does Casey want to get Michelle vaccinated while we're here? It's just a little needle stick!

Michelle starts to protest. She hates needles, too. Casey doesn't even give Michelle much of a chance. She just says her "whatever." And Michelle cringes up as she lies on her back.

I use a firm, but still very professional voice to tell Michelle that we're done with her exam now. And to tell her to lie on her stomach for "just a sec" while she gets her shots. Now cringing even a little more, Michelle hesitantly takes her feet out of the stirrups and starts to roll over.

As she's doing it, Sophie brings me over the two syringes. I'd prepared them in advance. Both contain nothing but sterile water, the same thing student nurses use for practice. It's utterly harmless. And obviously does nothing, except add a few milliliters to her pee after making its way through her body.

But I want Michelle to really enjoy her shots. So I've chilled one of them to about 40 degrees. Whatever temperature my refrigerator is. And the other I've warmed to 110-degrees. I've also selected large needles. Not comically large, but standard #18 needles. They're usually used for drawing blood. Injections typically use a #22 or #24 needle. Diabetics usually use #28 or #30 needles. The bigger the number, the thinner the needle. IV's can use anything from #12 to a #18. So it's not

too big of a needle. Just one Michelle is going to really feel.

Michelle sees them. She freezes as she's halfway through her roll, her eyes taking in the huge-looking needles. I urge Michelle to finish rolling over, adding "it'll be over in a couple of seconds, and you'll be good until next year." Michelle cringes harder, her face scrunching up. But she rolls over and lies flat.

Obviously that her bottom up. And that's where she's going to get the injections. One for each cheek.

I start with the cheek closest to me, pinching it lightly in my hand cross-ways. It puffs her loose globe up a little. I aim the needle for the top of her globe, pointing towards her feet. It has the needle almost parallel with the way Michelle is lying. It will have the needle slicking into her globe from the top. Deeply, reaching about the center of her muscle. It's the same way she'd get a real injection.

"This one is for distemper," I tell her. I just had to get my foster dog her shots, and distemper is one of them. I liked the sound of it. It sounds like a "disease" a bitch could easily get. "It's going to burn a little as it goes in." then I quickly stab Michelle's cheek with the sharp needle.

It easily pierces her flesh, sliding through the thin layer of body fat, and into the harder muscle beyond. Michelle cries out a loud, squealing "EE-OW!" as it stabs her bottom

I start pushing the plunger. Michelle screeches out "SHIT! That burns like fire! OW!" as the warmed water shoots into her muscle. And then, I pull the needle out and drop it on the tray.

Michelle pants. She pleadingly sobs out "enough! That hurt too much! I don't need my shots!" To me, she sounds like a little kid about to get her shots. I ignore Michelle. "This one is for PID. It's going to be kind of cold." And I just stab her other cheek with the next needle the very same way.

Michelle screams out again as it stabs her. Then she cries hard, sobbing out "Ow! G-d, it's so cold! Ow! Please don't make me have any more shots. Please!" She shivers. And it's not from the coldness of the

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drops of water she's getting. I've found another thing that gets Michelle all hot.

Once I'm done, Michelle cries softly and rubs her cheeks. I put more Road Runner band-aids over the little pricks. Pricks that aren't even bleeding.

Then Sophie comes over and hands me the tablet. "Here's the patient's chart, doctor Mistress!" She says with a bit grin on her face.

"Thank you, nurse slave. Take the patient to my office and I'll be there in a sec." Sophie tells Casey to help Michelle off the exam table. It comes as a relief to Michelle. Her exam is now over. Then Sophie asks Casey to take Michelle's hand and bring her along to the doctor's office. When Casey asks, Sophie tells her it's not time for the patient to get dressed yet. The doctor will tell her when. The doctor will explain everything just as soon as I review Michelle's chart.

Sophie walks the pair out to the living room. She has Michelle sit on the stool beside my desk, with her back to where I'll sit. It has Michelle facing the other two chairs in front of the ornate desk. She ushers Casey into the closer of the chairs, and Doug into the further of them.

Michelle knows the rules. No matter why she's on that stool, she is not allowed to speak or move while she's there. She may only sit and answer a question I ask or tell her to answer. It's the same rule for any toy. She's there to answer to me, period. And I've warned her, especially on her last visit, that she's not to be nodding her head, or smiling, or wrinkling her face up, either. She's to just sit while the "grown-ups" discuss her exam and a treatment plan.

I let them sit for just a couple of minutes before I come out and casually take my seat behind the desk. Usually, this only takes about five minutes. I just use some medical terms to tell Doug that Michelle needs a very specific fucking, and we'll give it to her now. But since this is the "full exam," and I have Casey to toy with and further humiliate Michelle, I have some extra surprises in store for her. That she will "hate!"

## Doctor Mistress

I start by telling Casey what's expected of Michelle now. Casey hasn't come with Michelle before, she was too young for me to allow her to see anything, so Casey doesn't know. And it makes a nice reminder for Michelle. She knows that if she breaks a rule, her freshly stuck bottom will be spanked hard for it. And I remind Casey that since her mom signed the form, Casey is the one who has to make all of Michelle's treatment decisions, so I'm talking to Casey now, not so much to Doug.

I start by reviewing the exam with Casey. Including showing Casey the pictures that are going into Michelle's chart. One close-up of each breast. One close up of her clit. One of her pussy. One of her cervix. One of the inside of her uterus. One of her urethra. One of her asshole. One of her rectum. And one of her full body. Casey tries hard not to look at the pictures, even the ones that could be anyone. Who really knows who's uterus that picture is of the inside of? It's not like any of the outside of Michelle is in it. Doug, however, looks. He likes to see pictures of Michelle. He's seen several on her previous exams, but never the ones of the inside of her rectum, uterus, or urethra before. Those are new additions.

I return to the image of Michelle's uterus, forcing Casey to look at it. To see her very first bedroom. Where she spent her first nine months cuddled up. I tell them both that the lining of Michelle's uterus is very flushed with blood now. That it's ready for another baby. That she's not currently ovulating, but soon will.

Then I move to the picture of Michelle's rectum. I show them how flushed the walls just beyond the thin membrane are. They should be. I'd be sending her to a doctor if they weren't. But I tell them that shows how "over flushed" Michelle is inside. How "hot" that will make her feel.

Then I move to the picture of Michelle's eager clit. I tell them how it's swelling uncontrollably now.

Then it's the picture of Michelle's pussy, her walls stretched wide so we can see right into her the depths of her most-private little tunnel. "Can you all see the heavy discharge here?" I point out the honey clinging to everything. There's no not seeing it. Michelle is too wet.

## Chapter 05: Diagnosis - Skankitis

"That all adds up to only one thing. A very bad case of skank-itis." I offer my diagnosis. Michelle is horny. Like DUH. And I think Casey is having that very three-letter thought.

"I'll prescribe a very intensive course of orgasmic therapy. That's the treatment of choice for skank-itis.

Casey smirks a grin, finally. As if to say "DUH. She's horny. Fucking is so the cure for that!" Which I'd bet is what Casey is thinking.

I set a little bottle of pills on the desk and push them towards Casey. They're over-the-counter energy pills with nothing but sugar and caffeine in them. "These are anti-inflammatories. They'll reduce that swelling. She needs to take one every six hours until they're gone. That should be for five days. And it needs to be precisely every six hours, not four times a day. Even if she's asleep, just wake her up to take her pills.

"They may perk her up a little and make it hard for her to sleep, too. Side effects." They'll also make her a little more... sensitive by slightly stimulating her nerves. "Exactly 30 minutes after she takes one, she needs to climax. It doesn't really matter how. She can masturbate. Someone can be kind and do it for her. Even sex is fine. Just as long as Michelle climaxes.

"But otherwise, she shouldn't be allowed to climax. Too much climaxing will just over-tax her nervous system and it will dull the overall effect of the treatment. Now if her husband is aroused, she's welcome to take care of him with her hand or mouth, just no sex or anal sex for her, unless it's on her treatment plan."

I set another pack of suppositories on my desk. They're huge. The biggest ones I could find to buy. But they're just gentle, overnight laxatives. Just ones she is definitely going to feel as they go in. And feel the embarrassment of having put in for her.

"These are for the rectal inflammation. She needs one every eight hours, and yeah, I know that's not the same schedule, but it is what it is. After she gets one, she can't move her bowels for four hours. If she does, she'll just poop it back out, and we can't have that! These should



last three full days.

"Casey, I'm sure you noticed that your mom is a pretty big baby about taking care of her body. I do not trust her to follow her treatment regimen on her own. She'll start skipping doses quickly. So you are in charge. You are to hang onto her pills and her suppositories for her. Give them to her one at a time, and make certain she takes them.

"I'd watch her swallow her pills. I strongly suggest that someone, it can be you or her husband, inserts the suppositories for her. After that, just have her sit where you can see her for a little while to make sure she doesn't head for the ladies' room. And when it's time for her climax, either watch her do it, do it for her, or if you trust her husband, you can let him watch for you. As long as someone can swear she got her climax, besides her."

Casey does not look happy. Very reluctantly she slides the "medications" into her purse. I suspect Doug will get them as soon as they're home. I suspect Casey doesn't want any further part of this. Especially not stuffing those big suppositories up Michelle's butt.

"And Michelle has put on three pounds since her last visit. A proper diet is essential for good health. I'd like for both of you to help Michelle out with that. I don't think you want her to get fat and more that I want her to get the health problems that go with obesity. I'd recommend 1,600 calories per day, mostly from fruits and vegetables. No fried foods, and preferably no junk food. Those calories need to be divided into three good meals, each about five or six hundred calories. And she needs at least six hours between meals. No snacks. By the time she comes in for her next check-up, her weight should be back where it needs to be." It's standard nutritional advice for middle-aged women who need to lose a few pounds. "And no more than four ounces of meat per day, either."

It makes Michelle blush brightly as I tell them how she's gaining weight, and suggest they help her watch her diet so she doesn't get fat.

"If Michelle misses a dose, or even if she's more than a couple of minutes late for a dose, she'll have to start the treatment all over again.

## Chapter 05: Diagnosis - Skankitis

And that means coming back here for more pills and suppositories. So stay on top of Michelle and make sure she takes her medicine."

"To start her treatment, she'll need a single session of neuro-release therapy." I just made it up. Releasing the tension from those nerves. "That only takes about a half-hour. Unfortunately, it can get rather painful towards the end. But unless she has that first, the pills aren't nearly as likely to work. Of course, Michelle will have to be restrained for the therapy, so she doesn't hurt herself as it's administered. Casey, would you mind holding Michelle's hand for her therapy? She is definitely going to need you."

"Ugh!" Casey sighs. She can't have any clue what the therapy will be. I just made it up! But she's a smart girl and she can guess it's going to be sexual. After all, Michelle only needs to be cured of horniness! What other cure is there? Sex! "I guess I have to?" Casey grumbles.

"And one more thing..." I just decided. Not because I care. But since Nikolai is so willing, I'll do it. Just to heap another humiliation on Michelle. "Her lab tests won't be back for seven days. When they come in, my nurse will text you, Casey. *You* may come pick them up and I'll explain them to you. Then, it's up to you what, if anything, you think Michelle needs to know about them. Michelle will not be allowed to come and find out herself. She signed that over to you, so you have to be the only one to come get her test results."

"Oh, joy..." Casey grumbles.

"Casey, do we have your permission to administer the neuro-release therapy to Michelle now?"

"Sure, whatever."

"Nurse slave, go ahead and take the patient back to the treatment room and get her ready for the therapy." In other words, go strap her down.

Sophie takes Michelle by the hand and urges her to come along and get the therapy over before she gets worse and needs more intensive treatment.

## Doctor Mistress

Once Michelle is out of earshot, I tell Casey "I'm sending her tests to a real lab, so it will be real results, just as if she went to her regular doctor. I don't think they'll find anything, though, but the friend how sent her to me has access to a lab, so I figure why not? Besides, it will embarrass her to have to ask you about them, and that is what she's after. So come get them, okay."

"Sure, whatever." Casey unhappily agrees.

"And now, I'll leave you two for a minute. Casey, it's up to *you* if you want to allow Doug in for Michelle's therapy if he wants to come, that is. You two can discuss it and decide."

A minute later, after a very short whispered conversation, both are following me back to the playroom. I'm sure Casey is eager to dump as much of her role as possible onto Doug. After all, he's her husband, he should be the one doing "sex things" with Michelle, not Casey!



# Chapter 06: Treatment

## Chapter 06: Treatment

By the time we all get back to the playroom, now a "therapy" room, Sophie has Michelle back up on the table. Complete with Michelle's feet up in the stirrups. And she has thick, heavy leather straps cinched tight and fastened around Michelle's ankles, knees and wrists. The ones around Michelle's wrists hold her hands to the table, at her sides, near her hips. They all bind her tightly, but none are too snug on her. I take just a second to check them, then smile my approval to Sophie.

Michelle, still completely naked, lies there. And she looks very nervous. She should, whatever "therapy" I've given her before has always been rather intense. For her. I'm sure she thinking about how intense this will be. How "active" and slutty of a show her daughter is about to be made to watch. And I'm sure she knows that long before her "therapy" is over, Michelle won't be able to stop herself from acting every bit the slut.

I suggest that Casey stand up at Michelle's shoulders and hold one hand. And Doug stands on Michelle's other side to hold her other hand. And I strongly encourage both of them to talk to Michelle and try to keep her calm for her "therapy." Not that there's a prayer of Michelle staying calm for it.

Naturally, I intend to make the treatment just as extra intense as I made her examination.

I start by having Sophie fetch me the "electro-suction tube." It gets a grin from Sophie who had no clue what I'd do with Michelle this time. The toy is just a little plastic tube, about an inch around. One end has a little foam ring on it, like a seal. The other end is closed off, except for a thin little hose connected to it, that runs a few feet to a little box with some dials and a gauge on it. But inside the tube, there's a little vibrating motor attached to some little soft fingers that hang down about halfway.

There's not much in the box. Just a little, wand weak, suction pump, and a couple of batteries. The gauge is meaningless. The dials only control one thing, how hard it sucks. From negligible to light, which

is its full range.

I put the tube over Michelle's clit. Then I turn the box on. It starts sucking through the tube. The suction quickly draws Michelle's clit out of its nest, pulling it fully out into the clear tube for everyone to see it throbbing hard. It keeps pulling, sucking her aching nub deeper into the tube. A few little spins on the dial and I have the suction right. So that it's holding the tip of Michelle's nub against those little fingers. Then the flip of a switch turns that motor on.

The fingers vibrate energetically, stroking fast and very softly over the tip of Michelle's captive clit.

Michelle screeches out a long, sultry, and very needy moaning cry. She lies there, and cries out endless moans that quickly grow, but only in their hunger. She tries to squirm. She can't. The leather straps hold her tightly in place. She can't do anything except lie there while the toy sucks her clit in, holds it, and teases it so sweetly.

It only takes a couple of seconds for Michelle to have a tight death-grip on both Casey and Doug's hands. Then she goes right on crying out erotic and urgent moans.

The straps leave Michelle's shoulders and upper body free. That squirms hard. It just can't go too far without taking Michelle's lower half along. And from the waist down, Michelle isn't moving at all. Unless you count her toes as they curl up tightly.

In a minute her mouth is hanging open wide as Michelle cries out her moans too fast to really have time to even close it between squeals.

And that about how long it takes Michelle. She cums. She cums fairly hard, her body tensing up to steel for a second, then snapping hard as the waves crash over her. She screams as the first wave hit her. And her pussy starts to almost run with her honey. She squirms around hard, her shoulders thrashing energetically every which way. And she almost crushes the hands she's holding.

Casey just shakes her head and silently mouths "gross." Then with a slight grin, she silently adds "slut."

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Doug starts stroking Michelle's sides and stomach. He thinks he's being sly as he lets his hands "accidentally" touch Michelle's breasts, too. I see it. And I know that Doug has his own problem. I could see him getting stiff in his pants as he came back to the playroom. And after watching Michelle cum so loudly, I'm sure he's making plans for Michelle to take care of him when they get home. And I'll bet he doesn't mind following "doctor's instructions" and getting Michelle to give him a full blow job, either. Not too many men would.

I think Casey is the only one who expected Michelle's treatment to end after she came. At least I hope so. Usually, I won't settle for less than three orgasms on my exam table. I ask Casey and Doug if one of them could hold the tube. Doug tries to decline, preferring to keep his free hand on Michelle's body. Only belatedly does he realize that only leaves Casey. Casey who takes the tube while cringing, and make certain that her hand doesn't touch anything but plastic. I couldn't have planned it better! I love seeing Casey cringing!

It gives me, as the "treating physician" a moment to "evaluate the progress of the therapy."

I use my gloved hands to lightly feel Michelle's stomach. I can feel the muscles there, tensed hard, and straining as her shoulders thrash. I feel her pubes. I can feel the light muscles there straining, too. I peek at her asshole. I can see that spasming, clenching, and unclenching, never relaxing close to enough to start opening, very quickly. Over and over again.

I go up and feel the muscles straining along Michelle's shoulders. Those are tight and tense. As are her arms and legs. But I could see that in the hardness of her hands' grips. I'll bet Casey and Doug really feel those grips, too.

Then I put my hands to Michelle's breasts. With all the thrashing her shoulders are doing, it has her big, soft breasts, almost flying as they jiggle on her chest. I take one in my hand and give it a couple of gentle squishes. Then I do the same to Michelle's nipple. That gets me a response. It gets me a crisp shiver from those hard-squirming shoulders.



## Doctor Mistress

"Just as I suspected!" I announce. "Nurse slave, bring me two more tubes."

Sophie hurries over with two more tubes. They're identical to the tube atop Michelle's clit, minus the control box. They don't need a controller. Sophie just plugs them in to open ports and turns the corresponding dial all the way down. I have Sophie hold one tube over each of Michelle's nipples.

Then I start slowly turning that dial up. As I do, the suction flows through those hoses and starts drawing her long, wide nipples up into their tubes. I stop turning the suction up when it has Michelle's nipples pulled up into the tubes, straining, and fully taut. With the tips of her nipples against the fingers inside the tube. I flip a switch and those motors turn on. Sophie releases the tubes, allowing the suction alone to hold them over Michelle's nipples.

The little fingers do their job. They quickly and softly tease both of Michelle's nipples. All while the first tube is teasing Michelle's clit.

It does two things. It gets Michelle screeching even loud moans, their urgent hunger already growing anew. And it gets Michelle squirming that much harder.

I release Michelle's breasts. Immediately they're flying around, jiggling wildly again, as her chest and shoulders thrash around hard. But not hard enough to toss the tubes off her nipples. The suction is plenty to hold them right where they are. And that ensures they continue teasing Michelle's nipples. And that her nipples will stay at their full-straining hardness until I take those tubes off. As will Michelle's clit. Now a very tender, and powerfully throbbing, clit.

Now Doug and Casey are really having to hold Michelle's hands. Her hands want to ball up into fists. They try to pound hard against the padded table. But her family holds them tightly. And tries to crush them with her grip. And Michelle screeches out the loudest moans yet.

She doesn't last too long this time either. Maybe all of two or three minutes. I can see the next orgasm hit her. It hits her hard. Just

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as the first did, it tenses her body up to steel as she hangs on the very edge of release. Then, as the first powerful wave crashes over her, she starts thrashing again.

Now Michelle is thrashing even harder. Almost desperately hard, her body slamming around with all of her strength, testing the leather straps with every snapping jerk. From the waist down, Michelle goes nowhere. Nor do her hands go anywhere, they just stay immobile beside her hips, gripping her husband and daughter's hands with every ounce of strength. Her arms stay tensed up as her hands strain. And she screams. She screams loudly, with equal parts agony and satisfaction in her voice, for a good half of a minute.

"Again, mom, really?" Casey mutters, "such the slut! It's been like two minutes!" She tries very hard to keep her head and eyes turned away from the action. Away from Michelle.

Michelle's screams never quiet. But after half of a minute or so, that sultry hunger starts creeping back into them. Michelle manages to cry out, loud, pleadingly, and urgently, "IT'S TOO MUCH! IT HURTS! I'M DONE! I CAME TWICE ALREADY!" As if everyone didn't know that! We all saw it!

I ignore Michelle. As do the toys. They just go on teasing Michelle's arousal right back up. They, and I, don't even care that by now Michelle's nerves are over-sensitive. Meaning that the stimulation hurts. It hurts as much as it feels so good for her. The sweetest agony. But it keeps Michelle screaming out her hungry, agonized moans.

Michelle has likely forgotten that I'm even here, at least for the moment. She just cries out for mercy. And gets less than none.

I have another toy for Michelle's "treatment." It's fat at 1 ¾" thick, but fairly short at four inches. It has the shallowest rounding to its tip. And it has a pair of tabs at its base. The tip and the base, each about ½" long, are solid plastic and rigid. But in the center, there are six fairly wide slits cut in the shaft. Four little rubber balls protrude through each slit, about half of their height standing above the shaft. All 24 balls are connected to a battery and vibrating motor behind them. And then,

there's a thin layer of latex, like a condom, that covers the entire toy.

I put a touch of lubricating gel on the rounded tip of the toy. I don't bother spreading Michelle's lips. There's really no need to. Not with the way her exposed inner folds flower open atop her tunnel. I just put the rounding tip of the toy to the chasm over Michelle's tunnel. Then I press gently. That's all it takes for Michelle's hungry pussy to accept the toy into it. I slip it all the way into her tight tunnel, then use a piece of tape over each little tab to hold it in place. I flip its switch, at the center of its base, and the motor comes alive. It has those balls teasing against the nervy insides of her pussy walls.

And it has Michelle fighting her bonds a little harder. She can't cry out any louder, but her moans do manage to ramp up in their erotic urgency as well as their strain. She manages to cry out "I'M TOO SENSITIVE! I'VE CUM TWICE IN A ROW NOW! STOP! IT HURTS!" a few times, but mostly she just cries out needy moans as her arousal steadily builds towards another orgasm.

And I ignore Michelle, just watching her so energetic thrashes as her over-stimulated nerves slowly push her towards a third orgasm.

This one takes several minutes. Maybe five or six. The first two or three of those spent with Michelle suffering through the agony of the unending, merciless stimulation. And then with Michelle suffering through the agonizingly slow blooming of her desires.

When Michelle finally does cum again, it's even harder. And noisier. Almost as soon as her screams ebb to screeching cries, she begs shamelessly for mercy. She begs Casey to end the agony.

"PLEASE! I CAN'T TAKE IT! IT HURTS TOO MUCH! MY NERVES ARE ON FIRE! OH MY G-D, MY PUSSY IS ON FIRE! IT HURTS TOO MUCH! STOP, PLEASE, STOP. PLEASE CASEY, BABY, PLEASE MAKE THE DOCTOR STOP! I CAN'T HANDLE THE PAIN!"

I ignore Michelle. Casey just quietly comments "shut up, slut, and enjoy your treatment." And she shakes her head. Doug watches closely, touching Michelle's body wherever he can without getting too near the

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toys. He's definitely enjoying the show Michelle is.

I have one more toy for Michelle. It's a narrower version of the toy in her pussy. This one is only an inch thick. And the same short four inches long. I put a little more of the lubricating gel on the slightly more rounded tip of this toy, too.

Michelle begs, loudly, screeching that her nerves are on fire and it's killing her. No more pleasure, just agony. Make it stop!

I put the rounded tip of the last toy to the very tightly clenched and spasming ring of Michelle's asshole. She says nothing. She's too busy begging for mercy.

I press. It takes a little more pressure. But the tip is plenty rounded to do its job. It just stretches Michelle's asshole a little faster as it spreads it open to slip through. And then As her ring is stretched wide, Michelle screams out a panicked "UH! NO! NO! NO! NOT MY ASS, TOO! GET IT OUT OF ME! GET IT OUT OF ME! I DON'T IT UP MY ASS! PLEASE, DOCTOR, GET IT OUT OF MY ASS!"

I don't. I tape it to Michelle's cheeks and flip its switch. It comes right on. Its balls vibrate powerfully. And now they have a nice slice of Michelle's nerve-laden pussy walls sandwiched between the two sets of vibrating balls. It works those nerves from both sides at the same time.

And it has Michelle screeching desperate, begging me not to make her do this again. Begging Casey to save her, pleading how she's in unbearable agony even as her moans are slowly turning to the sultriest they've been. She fights hard, her shoulders going everywhere. But otherwise, she lies there, her skin flushed bright red, sweating, screeching, and feel the so-intense stimulation now that every sensitive intimate place she has is being mercilessly teased.

It doesn't take Michelle long now, maybe five minutes for her fourth orgasm to hit her like a brick wall. It has her thrashing wildly, creaming desperately as those especially-intense waves crash over her.

I ignore it.

## Doctor Mistress

Michelle goes on, screaming and begging us all to end her agony. She begs Casey the most, telling the sexually-inexperienced girl how badly this is hurting her, and to please make the doctor stop. I think Casey has caught it. Michelle doesn't really want it to stop. If she did, she wouldn't still be playing the game and calling me "doctor." But it doesn't stop Michelle from crying out with every molecule of air in her lungs as she begs for relief. And graphically telling Casey just how badly the nerves in her pussy are burning hotter than fire now.

It only takes Michelle about three minutes. She cums again, a little harder, and a lot more energetically.

If I thought Michelle was shameless before, she redefines it now. She screams her pleas, imploring Casey to stop the torture, that she'd rather die than endure another second of it. How her nerves, in her pussy and "up her ass" hurt so badly she can't feel anything but unbearable pain. She can't think. It's too much. And so on. I can hear a bit, but not that much, real pain in Michelle's cries. I think Casey hears it too, she looks to me with a questioning eye, and I just shake my head and silently mouth "watch."

It doesn't even take three minutes. Michelle cums again. Only now she tenses so hard that she can't even scream. She just tenses up and vibrates hard. Then her head lifts off the table and she starts beating it down against the very well-padded table. I hear Casey squeal a little as Michelle's grip gets too-tight on her hand.

A minute or so later, Michelle is on her second orgasm like that. Her body never loosened a bit between, just stayed there straining every muscle in it with every ounce of strength. And just cums a second time.

Then she cums a third time. Maybe with another minute between. I can only count the orgasms by pressing on Michelle's pubes and feel the snapping spasms as they rack her pussy.

This time Michelle is done. She says so by falling limp and loose. Not moving. Not moaning. She just suddenly closes her eyes and falls fully loose. I turn the toys off quickly. There's no need to push Michelle

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any further. She's done.

The suction tubes take several seconds for the suction to fade. But when it does, they fall from their nubs. I pull the toy out of her pussy. Michelle doesn't react at all. I wiggle the toy in her bottom. She doesn't react to that either. Nor to me pulling it from her butt. She just lies there, breathing deeply, her eyes close, her brain switched off for the moment.

"Is she alright?" Casey asks Doug in a hushed whisper.

"I think so... she's never done this before..."

Casey turns to me, "She's fine, right?" She asks with a hard, concerned edge to her voice.

"Yeah, she's fine. She's just so done. It'll take her a while, maybe ten minutes before she's back with us. Then she can get dressed and go. It's not like she could handle any more playtime tonight anyway!"

It takes Michelle ten minutes just to open her eyes. By then Sophie has her untied. It takes Michelle a couple of more minutes to remember where she is. Finally, after about fifteen minutes, she asks me "doctor... is my treatment over now?" Her voice is more of a sweetly-satisfied breathiness than a voice.

"Yes. Casey may take you home now." I turn to Casey and tell her "Just don't forget to give her a suppository tonight before she goes to bed. You can start her pills when she gets up. She really does need to follow her treatment exactly."

"Oh, I will, doctor..." Michelle purrs out in a sultry but fully sated throaty breath. "I will..."

It takes Casey about fifteen minutes to get Michelle off the exam table and kind of dressed. Kind of meaning Michelle has pulled her clothes back on, but they're anything from on right. They look unkempt as if she's making a hurried walk of shame. But she also looks so satisfied. She leans heavily on Doug as they head out.