**NHS INFERTILITY CLINIC REFERRAL**

**Patient Details:**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | NHS No. |  |
| Address |  | Date of Birth |  |
| Home Telephone |  |
| Work Telephone |  |
| Email |  | Mobile Telephone |  |

**Referrer Details:**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Date of Referral |  |
| Base |  | Practice Code/ID |  |
| Address |  | Telephone |  |

**Communication and Accessibility needs:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Interpreter required? | Yes |  | No |  | Wheelchair access required? | Yes |  | No |  |
| Language: |  | | | | Learning Disability: |  | | | |
| Hearing: |  | | | | Other disability needing consideration: |  | | | |
| Vision: |  | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Military Service Person |  | Military Veteran |  | Member of Military Family |

**Reason for Referral:**

|  |
| --- |
|  |

**Clinical Details:**

|  |  |
| --- | --- |
| Age |  |
| BMI |  |
| Smoking status |  |

**Investigations:**

|  |  |
| --- | --- |
| Mid luteal progesterone (in women with regular cycles) |  |
| FSH |  |
| LH |  |
| Oestradiol |  |
| Prolactin |  |
| TSH |  |
| Chlamydial antibodies |  |
| Rubella status |  |

**Radiology Results:** (includes last 6months of results, please delete as appropriate)

**Partners details:**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Age |  |
| NHS no. |  | Date of birth |  |
| BMI |  | Smoking status |  |
| Semen analysis |  | | |

Supplying the above information will decrease the number of visits required by patients and improve their time to diagnosis and treatment.

Please note that we cannot discuss one partner’s result with the other if they are not attending together.

**Medical Problems:**

|  |
| --- |
|  |

**Allergies:**

|  |
| --- |
|  |

**Medication:**

|  |  |
| --- | --- |
|  |  |
|  |  |

**Minimum Dataset:** (recordings in last 6months)

|  |  |  |  |
| --- | --- | --- | --- |
| **Blood Pressure:** |  | | |
| **Heart rate:** |  | | |
| **Height:** |  | **Smoking Status:** |  |
| **Weight:** |  | **Alcohol Intake:** |  |
| **BMI:** |  | **Exercise: tolerance:** |  |

Yours sincerely,

Sent electronically, no signature required

**Email to:** [shc-tr.salisburyreferralcentre@nhs.net](mailto:shc-tr.salisburyreferralcentre@nhs.net)

**Further Information**

In general investigation is recommended after a couple have failed to achieve a pregnancy after a year of unprotected intercourse. Intercourse should be every 2-3 days and does not need to be timed with ovulation. Earlier referral is recommended if there is an obvious problem such as amenorrhea or severe male factor.

Female age: Natural fertility decreases with female age. At 35 94% of women will achieve a pregnancy within three years of trying, at 38 it is 77%, over 40 years this falls to about 50%. Treatments such as IVF are less successful with advancing female age.

BMI: Fertility decreases in those with a BMI over 30, there is also an increased risk of miscarriage. Those who are pregnant with an increased BMI increase their risk of many pregnancy related problems such as pre-eclampsia and gestational diabetes.

Smoking: Smoking decreases fertility in men and women. This includes passive smoking. Smokers will not be eligible for IVF on the NHS.

Mid-luteal

Progesterone: 97% of women with regular periods are ovulating. Progesterone levels should be taken one week before the period is due.

Female Fertility: In those who are having few or absent periods a hormone profile will help to establish the cause: