Fertility/IVF referral pathway involving primary care (part 1)

NHS
Oxfordshire
Clinical Commissioning Group

Couple sees GP with failure to conceive

See **NICE guidelines**

Primary Care investigation of all couples STARTS with

Male investigations

- **Analysis of seminal fluid**. This should be the first step in the investigation of infertility since in the absence of sperm the fertility appointment is not required.

Method

- 3 days abstinence from intercourse
- collection of specimen of semen in a sterile plastic container after masturbation
- examine within time set by clinic prior appointment

NICE guidance: Fertility problems assessment and treatment

Referral forms available as templates on your software

Female investigations also required

Female investigations

- Assessment of ovulation - mid-luteal progesterone - taken seven days prior to menses e.g. day 21 of 28 day cycle or day 25 of 32 day cycle. For **amenorrhoea** just state this at the time of the tests.
- Other hormonal tests – LH, testosterone, TSH
- FSH, Prolactin - performed on day 2 – 5 of cycle. See above for amenorrhoea.
- Rubella status (if not already known)
- In date cervical smear
- Chlamydia swab
- Pelvic/TV USS if available

NO SPERM

Or **previously proven inability to conceive**

Azoospermatic couples who meet the funding criteria go straight to IVF with the female partner's tests, which are required prior to referral.

Normal/Low sperm count

- Normal / low sperm count
- Abnormal bloods and/or
- Abnormal scan and/or
- No conception after one year of regular SI but see previous advice

Referral made to IVF UNIT of CHOICE (see part 2)

Please use OCCG guidelines for eligibility criteria for NHS funded treatment and the referral form

Options available on the CCG website here

Patients seen and treated in **NHS FERTILITY CLINIC (see part 2)**

Refer all couples to NHS Fertility Clinic (Via C&B) with above test results

CONCEPTION and/or END OF TREATMENT

KEY

Primary Care

Secondary Care

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