

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

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

**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**  
Provider options are [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**

