

SUBFERTILITY – QUICK REFERENCE GUIDE FOR PRIMARY CARE

(Practice nurse or GP to arrange tests/referral – Please complete Fertility Referral Form)

FEMALE

MALE

Refer following 1 year of sub-fertility

BEFORE a referral is made please provide the couple with the following information leaflets obtained from:
www.womenshealthpeterborough.co.uk

- ‘Best practice fertility advice’
- ‘Timing Intercourse to the Fertile Time’

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- ◆ ♀ Folic Acid 400mcg daily (5mg if diabetic, epileptic, coeliac disease, BMI over 30 or the couple have spina bifida or family history of NTD)
- ◆ Weight reduction if either BMI > 25
- ◆ Record cycles (normal 25 – 42 days)
- ◆ Consider impact of current & past medication
- ◆ Accurately calculate length of subfertility
- ◆ Advise to quit smoking and or recreational drug use

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- TESTS**
- ◆ Rubella
 - ◆ Progesterone (Ideally 7 days before predicted period, if cycles irregular test on Day 21, 28, & 35).
 - ◆ Baseline hormones day 1-3 of cycle FSH, LH, Oestradiol, TSH, prolactin, testosterone (if amenorrhoea, test randomly).
 - ◆ Chlamydia screen
 - ◆ HBA1c for Diabetics or patient has PCO with BMI over 30, relative with diabetes, previous gestational diabetes or over 40 years of age.

- TESTS**
- ◆ Semen Analysis If first semen analysis entirely normal a second is not required.
 - ◆ Chlamydia Screen

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- History and examination
- Consider earlier referral if:**
- ◆ Amenorrhoea / oligomenorrhoea (Cycle lengths shorter than 25 days or longer than 42 days)
 - ◆ Abnormal pelvic examination
 - ◆ Subfertility with previous partner.
 - ◆ Same sex couples

- History and examination
- Consider earlier referral if:**
- ◆ Azoospermia
 - ◆ Abnormal genital examination
 - ◆ Subfertility with previous partner.
 - ◆ Same sex couples

**Any queries about referral or results please call the Fertility Nurses
Tel 01733-673750 (voicemail)**

Interpreting results – please contact one of the fertility nurse specialists with any queries.

FEMALE REFERENCE RANGE		HINCHINGBROOKE HOSPITAL	PETERBOROUGH CITY HOSPITAL
	PROGESTERONE	11 – 81 NMOL/L	≥ 20 NMOL/L
	FSH	2.9 – 8.4 U/L (FOLLICULAR PHASE)	≤ 8.9 U/L
	LH	1.3 – 8.4 U/L (FOLLICULAR PHASE)	≤ 10 U/L
	OESTRADIOL		≥ 98 PMOL/L
	PROLACTIN	59 – 619 mU/L	≤ 500 MU/L
	TSH	0.35 – 5.5 MU/L	0.30 - 4.2 MU/L
	TESTOSTERONE	0.0 – 1.8 NMOL	< 3 NMOL/L

Semen analysis At least one semen analysis result must be available before we are able to see the couple in the clinic. Please repeat 3 months later if abnormal.

REFERENCE RANGE THE SAME FOR BOTH HOSPITALS
VOLUME: ≥1.5ML
SPERM CONCENTRATION: ≥15 MILL / ML
PROGRESSIVE MOTILITY: ≥32%
NORMAL MORPHOLOGY: ≥4%

Rubella If rubella not detected, offer vaccination.