

Monash Health Fertility Referral Guidelines

EXCLUSIONS

Services not offered by Monash Health

- Age related or elective fertility preservation
- As per Victorian Department of Health guidelines, assisted reproductive treatment is only available to women with a maximum (egg) age of 42 years at time of treatment
- Donor gamete program (to be introduced through RWH in late 2023)

GEOGRAPHICAL AREAS SERVICED BY MONASH HEALTH FERTILITY

Monash Health Fertility accepts referrals for Victorian residents of the below LGAs who hold a Medicare card:

Bass Coast	Latrobe
Baw Baw	Manningham
Bayside	Maroondah
Boroondara	Monash
Cardinia	Mornington Peninsula
Casey	Murrindindi
East Gippsland	South Gippsland
Frankston	Stonnington
Glen Eira	Wellington
Greater Dandenong	Whitehorse
Kingston	Yarra Ranges
Knox	

Referrals from other Victorian LGAs should be directed to the Royal Women's Hospital

CONDITIONS

[Medical fertility preservation \(eg. cancer\)](#)

[Infertility](#)

[Parental chromosomal or monogenic conditions](#)

PRIORITY

All referrals received are triaged by a **Monash Health clinical team member** to determine **urgency of referral**.

EMERGENCY

For emergency cases please do any of the following:

- send the patient to the Emergency department OR
- Contact the on call registrar OR
- Phone 000 to arrange immediate transfer to ED

URGENT

The patient has a condition that has the potential to deteriorate quickly with significant consequences for health and quality of life if not managed promptly.

ROUTINE

The patient's condition is unlikely to deteriorate quickly or have significant consequences for the person's health and quality of life if the specialist assessment is delayed beyond one month

Head of unit:

Professor Beverley Vollenhoven

Program Director:

A/Prof Ryan Hodges

Last updated:

10/01/2023

Monash Health Fertility Referral Guidelines

REFERRAL To refer your patient/s to Monash Health Fertility, please **submit an e-Referral via HealthLink** for **all participants** in the fertility journey:

Intended Parent/s	Referral submitted for:
Heterosexual couple	The female (primary) and the male (participant)
Same sex female couple	Both females (one primary, one participant)
Same sex male couple	Both males (sperm source primary, partner is participant)
Singles	The single female or male is the primary patient
Any and all <u>known donors</u> and <u>identified surrogates</u> also require referrals to be submitted as participants in the fertility journey.	
All participants' referrals must be linked to the primary patient by noting: Primary Patient Full Name, DOB, and address.	

Complete the following fields:

- **Referral Purpose:** Requesting treatments or an intervention
- **Referral Details:** Provide relevant clinical details
- **Social History, Patient Services & Other Information:**
Link participant referral/s to the primary patient by citing Full Name, DOB and address.

Please ensure:

- (1) In addition to the primary patient's relevant clinical information, **referrals must be submitted for each participant** in the intended fertility journey, and linked to the primary patient by citing Full Name, DOB, and address
- (2) Referrals for **diagnostic tests** are provided to the patient (refer to pages 3 & 4).
- (3) Patients/participants are advised **not** to book or undertake their diagnostic tests (pathology, imaging, andrology) until contacted by Monash Health Fertility who will assist with appointment coordination.

CONTACT US **Medical practitioners**

All referrals for medically indicated fertility preservation (eg. cancer diagnosis; low ovarian reserve) should be directed to the Reproductive Endocrinology Fellow via the Monash Health switchboard, and a written referral then submitted.

Further information for Monash Health Fertility referrers can be found at <https://monashhealthfertility.org/information-for-referrers/>

Head of unit:	Program Director:	Last updated:
Professor Beverley Vollenhoven	A/Prof Ryan Hodges	10/01/2023

Current/potential causes of infertility

MEDICAL FERTILITY PRESERVATION

Initial GP Work Up

FEMALES

- **Pathology referral to Monash Health Pathology:** Early follicular phase (day 2-4) FSH, LH, E2, FBE, HIV Ab, HepBsAg, HepC Ab, TPHA
- **Diagnostic Imaging referral to Monash Health Imaging:** Gynaecological ultrasound. Please note on the referral that the patient has been referred to Monash Health Fertility.

MALES

- **Pathology referral to Monash Health Pathology:** HIV Ab, HepBsAg, HepC Ab, TPHA
- **Andrology referral to private pathology provider** (excluding post vasectomy patients): Semen analysis

WHEN TO REFER?

Upon cancer diagnosis and prior to commencement of chemotherapy, radiotherapy or surgical removal of reproductive organs. In the first instance, referrers should contact the Reproductive Endocrinology Fellow via the Monash Health switchboard.

Urgent

(1) Patients referred to Monash Health Fertility for medical fertility preservation will be prioritised on the waitlist.

(2) Patients are to be advised **not** to book or undertake their diagnostic tests (pathology, imaging, andrology) until contacted by Monash Health Fertility who will assist with appointment coordination.

Management Options for GP

- Nil

[BACK](#)

INFERTILITY

Initial GP Work Up

FEMALES

- **Pathology referral for:** Early follicular phase (day 2-4) FSH, LH, E2, Thyroid function test, FBE, Ferritin, Vitamin D, Rubella IgG, Varicella IgG, HIV Ab, HepBsAg, HepC Ab, TPHA, Blood group antibody screen, First pass urine: chlamydia/gonorrhoea PCR
- **Diagnostic Imaging referral to Monash Health Imaging:** Gynaecological ultrasound. Please note on the referral that the patient has been referred to Monash Health Fertility.

MALES

- **Pathology referral for:** HIV Ab, HepBsAg, HepC Ab, TPHA
- **Andrology referral to private pathology provider** (excluding post vasectomy patients): Semen analysis + antisperm antibodies

WHEN TO REFER?

- Women **under 35 years** of age who have been unsuccessful in achieving an ongoing pregnancy after **>12 months** of regular unprotected sexual intercourse
- Women aged **35 to 42 years** of age who have been unsuccessful in achieving an ongoing pregnancy after **>6 months** of regular unprotected sexual intercourse
- Women with previously diagnosed conditions that impact fertility eg. PCOS, endometriosis
- Same sex couples, singles & gamete donors
- Men with known male factor infertility

Routine

Patients are to be advised **not** to book or undertake their diagnostic tests (pathology, imaging, andrology) until contacted by Monash Health Fertility who will assist with appointment coordination.

Management Options for GP

- Nil

[BACK](#)

Genetic Inheritance

MONOGENIC CONDITIONS

Initial GP Work Up

FEMALES

- **Pathology referral for:** Early follicular phase (day 2-4) FSH, LH, E2, Thyroid function test, FBE, Ferritin, Vitamin D, Rubella IgG, Varicella IgG, HIV Ab, HepBsAg, HepC Ab, TPHA, Blood group and antibody screen, Banded karyotype
- **Diagnostic Imaging referral to Monash Health Imaging:**
Gynaecological ultrasound. Please note on the referral that the patient has been referred to Monash Health Fertility.

MALES

- **Pathology referral for:** HIV Ab, HepBsAg, HepC Ab, TPHA, Banded karyotype
- **Andrology referral to private pathology provider** (excluding post vasectomy patients): Semen analysis



WHEN TO REFER?

Where there is a family history of monogenic or chromosomal conditions such as:

- Cystic Fibrosis
- Huntington's Disease
- Duchenne muscular dystrophy
- Sickle cell anaemia
- Haemophilia
- Polycystic Kidney Disease
- Rett Syndrome
- Spinal Muscular Atrophy
- Inherited Retinal Disorders/ Dystrophies
- Chromosome structure abnormalities eg. translocation

Routine

Patients are to be advised **not** to book or undertake their diagnostic tests (pathology, imaging, andrology) until contacted by Monash Health Fertility who will assist with appointment coordination.

Management Options for GP

- Nil

[BACK](#)