

01/09/2011

**CHRONIC PELVIC PAIN – CRITERIA FOR REFERRAL TO RCHT**

**Definition:**

Intermittent or constant pain in the lower abdomen or pelvis of at least 6 months' duration, not occurring exclusively with menstruation or intercourse and not associated with pregnancy.

**Information to include when referring**

- Indication of parity
- Describe symptoms and effect on QOL
- Irritable Bowel Syndrome (IBS) considered and treated
- Relevant past medical / surgical history
  - PID
  - Previous abdominal surgery
- Current regular medication

**Investigations prior to referral**

- Swabs (Chlamydia / HVS)
- Pelvic USS

**Desirable Information**

- Smear history (including last smear & result) *the patient will still be seen without this but if you can retrieve it automatically it speeds up the consultation*
- Treatment so far
  - Eg COCP / Mirena
- Expectations of referral

**Red Flag Symptoms**

If >50 years with persistent / frequent (>12 times per month) symptoms of abdominal distension / bloating, feeling full and/or loss of appetite, pelvic or abdominal pain, increased urinary urgency and / or frequency consider serum Ca125. If >35 IU/L arrange urgent pelvic USS and refer urgently if suggestive of ovarian cancer

**Reference:**

**RCOG Greentop Guideline No 41 April 2005 'The initial management of chronic pelvic pain'**

**NICE Guideline April 2011 Ovarian Cancer** The recognition and initial management of ovarian cancer

*This information is intended as guidance. If using your clinical judgement to refer contrary to this guideline please state your reasoning clearly and explain what you want from the consultation.*