



Reproductive Health
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24-Hour Information Centre
 To request an appointment
 WhatsApp: 083-708-7895
 Standard SMS: 087-240-6666
 Send FREE SMS to: 30895 (No airtime required)
 Email: ReproductiveHealth@listerclinic.com
 Emergencies: 011-568-3453
 Fax: 086 763 1126
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REPRODUCTIVE HEALTH REFERRAL FORM 2018

Open 24-Hours including weekends and public holidays | Back-up Power and Water Supply | Please photocopy this pad if you run out of referral forms or use your practice referral pad | Our affordable prices include consultation, ultrasound, admission, theatre, anaesthesia, medication, and 15% VAT | We will consider offering certain services pro bono for urgent uninsured and indigent patients. Please attach a motivation on your practice letterhead.

Patient Details

Names:		Surname:	
Telephone:		Mobile:	
Email:			

Referring Practice Details

Practice Name:		Practice No:	
Telephone:		Mobile:	
Email:			

✓ PROCEDURE REQUIRED			
<input type="checkbox"/> Insertion / removal of contraceptive implants	<input type="checkbox"/>	Implanon / Nexplanon	<input type="checkbox"/> Norplant / Jadelle R 750
<input type="checkbox"/> Colposcopy	R 4 000	<input type="checkbox"/> Insertion / removal of Loop / IUCD	R 650
<input type="checkbox"/> Laparoscopy	R 4 000	<input type="checkbox"/> MVA / Miscarriage	R 1 500
<input type="checkbox"/> Hysteroscopy	R 4 000	<input type="checkbox"/> Vasectomy	R 4 000
<input type="checkbox"/> Tubal ligation	R 4 000	<input type="checkbox"/> Other - please specify	

*For advantages of office-based procedures and indications for endoscopy see overleaf.
 For Termination of Pregnancy (TOP) please see separate referral form.*

Clinical History

How would you like to receive your report? Electronic Access CD By hand Telephonic

Email Address _____

Do you require more referral pads? Yes No Would you prefer an electronic referral form? Yes No

Referring Practitioner's Name _____ Mobile No _____ Date

D	D	M	M	Y	Y	Y	Y
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 _____ Signature _____

We are committed to an affordable and equal pricing policy for local, regional and international clients. Our affordable prices are subject to change without notice. Errors & Omissions Excluded. We accept cash, medical aid, debit, credit and selected retail cards. Medical aid clients will be requested to produce their medical aid and ID or passport. Basement parking available in Lilian Ngoyi (Bree) Street.

ADVANTAGES OF OFFICE BASED SURGICAL PROCEDURES

There are many benefits to office-based procedures, but sometimes patients and clinicians may not understand what the benefits entail.

1. Confidentiality

Our multidisciplinary medical and dental centres offer privacy and confidentiality for our clients. Nobody will ever know the reason for your visit since we offer many other services under one roof. We also provide executive/VIP rooms at an extra cost if required.

2. Pain Free

All our procedures are performed under sedation/anaesthesia at no extra cost so that our clients do not feel any pain.

3. Lower risk

Compared to procedures in the operating room, office-based surgeries do not have the same risks associated with general anesthesia. Patients are often pleasantly surprised at just how comfortable they can be with local anesthesia or conscious sedation/anaesthesia; and a typical patient can even drive himself/herself home immediately after the procedure without any nausea or drowsiness.

While all surgery carries a risk for infection, office-based procedures are also typically done outside of a hospital setting, so the risk of wound infections with hospital-acquired superbugs is thought to be lower.

4. Lower cost

In addition to the safety benefits of office-based surgery, we are living in a time when patients are asked to absorb more and more of their healthcare costs. Because office-based surgery does not often have facility or hospital fees, and does not have separate general anesthesia fees or fees based on time spent occupying an operating room, it is often considerably less expensive to the patient, the insurer, and the healthcare system.

In most cases your co-pay for an office based procedure is a small fraction of what it would be in a hospital.

5. Accreditation

Ideally, office based procedures should only be performed in an accredited office. Specifically, any procedure that requires more than minimal sedation/anaesthesia must be accredited. To achieve accreditation, it is a requirement to put in place the necessary developing protocols, policies procedures and accredited training.

INDICATIONS FOR ENDOSCOPY

1. Indications for Colposcopy

- **Inadequate** - If persistent (three consecutive inadequate samples), advise assessment by colposcopy.
- **Borderline nuclear change in squamous or end-cervical cells**
- **Mild dyskaryosis**
- **Moderate dyskaryosis** - Urgent colposcopy referral
- **Severe dyskaryosis** - Urgent colposcopy referral
- **? invasive cancer or? glandular neoplasia** - Urgent colposcopy or gynaecologist referral

2. Indications for Diagnostic Laparoscopy

Frequently, the gynaecologist needs to assess the pelvis for acute or chronic pain, ectopic pregnancy, endometriosis, adnexal torsion, or other pelvic pathology. Determination of tubal patency also may be an issue.

Usually, the camera lens is placed infraumbilically and a second port is placed suprapubically to probe systematically and observe pelvic organs.

If needed, a biopsy can be obtained to diagnose endometriosis or a malignancy. If tubal patency is a concern, use of a uterine manipulator with a cannula allows a dilute dye to be injected transcervically (chromopertubation).

3. Indications for Laparoscopy Surgery

- Tubal sterilization
- Lysis of adhesion
- Treatment of endometriosis
- Treatment of ectopic pregnancy
- Ovarian cystectomy
- Oophorectomy
- Myomectomy

4. Indications for Diagnostic Hysteroscopy

The primary purpose of office hysteroscopy is to evaluate patients with abnormal uterine bleeding resistant to medical management or to perform a panoramic visualization of the uterine cavity.

In addition, filling defects identified by ultrasound or hysterosalpingography can be confirmed or mapped by hysteroscopic visualization.

Routine hysteroscopy in infertility cases has little benefit Both pre- and postmenopausal patients are easily evaluated