

### 8.11.2 BASIC INFERTILITY SERVICES FOR WOMEN

**Policy:** Title X providers must offer basic infertility services for women as part of core family planning services and in accordance with WMHS, Title X Program Requirements, QFP, as well as the recommendations of professional medical organizations, such as the American Congress of Obstetricians and Gynecologists (ACOG), the American Society of Reproductive Medicine (ASRM), and the American Urological Association (AUA).

**Procedure:**

The clinic visit must include:

1. Reproductive life plan
2. Sexual health assessment
3. Comprehensive health history, specific to reproductive health that includes:
  - a. Age (fertility decreases with increasing age)
  - b. Previous hospitalizations, serious illnesses or injuries
  - c. Medical conditions associated with reproductive failure (e.g. thyroid disorders, hirsutism, or other endocrine disorders)
  - d. Childhood disorders (e.g. malnutrition, male history of mumps)
  - e. Cervical cancer screening results and any follow-up treatments
  - f. Age at menarche
  - g. Cycle length, characteristics, and changes
  - h. Presence of dysmenorrhea, onset, and severity
  - i. Obstetrical history (gravidity, parity, and associated complications)
  - j. Social history (use of alcohol, tobacco, recreational drugs)
  - k. Occupational history (exposure to known teratogens)
  - l. Sexual history (including pelvic inflammatory disease), history and exposure to sexually transmitted infections (STIs)
  - m. How long the client has been trying to achieve pregnancy
  - n. Coital frequency and timing
  - o. Level of fertility awareness and results of any previous evaluation and treatment
  - p. Abdominopelvic surgery
4. Current medication used to evaluate for teratogenicity (modify as needed)
5. Family history that includes prior reproductive failure, birth defects, developmental disabilities, populations at risk for genetic defects or family history of genetic defects (per ACOG guidelines)

Review of systems should emphasize:

1. Symptoms of thyroid disease
2. Pelvic or abdominal pain
3. Dyspareunia
4. Galactorrhea
5. Hirsutism

Physical examination should include:

1. Height, weight and BMI
2. Blood pressure and pulse
3. Thyroid examination
4. Clinical breast exam
5. Assessment for signs of androgen excess

6. Pelvic exam which should include:
  - a. Pelvic or abdominal tenderness or organ enlargement or mass
  - b. Vaginal or cervical abnormality, secretions or discharge
  - c. Abnormal vaginal discharge
  - d. Uterine size, shape, position, mobility
  - e. Cul de sac masses, tenderness or nodularity

**Laboratory testing**

Basic screening may include Pap smear, and gonorrhea and chlamydia testing, per CDC and ACOG guidelines.

**Counseling**

Counseling must be provided as needed based on history, examination, laboratory test results and assessment of knowledge regarding fertility issues and be documented in the client's medical record.

**Referral**

Clients shall receive appropriate referrals for needed services beyond the scope of the Title X family planning program.