

## Repeat prescription for combined pill

Thank you for completing this form. Once completed, please scan and email the form to **buc-tr.bhtbshaw@nhs.net**. This form will allow a clinician to re-issue your prescription for the combined pill if safe to without you having to come in for an appointment. Please note that we are unable to issue a repeat prescription without up to date blood pressure and weight measurements. If you have any questions please ring 0300 303 2880. Please allow up to 7 working days to receive your prescription.

### PERSONAL DETAILS

Full Name		Date of birth	
Address		Mobile number	
		Home number	
Postcode		E-mail address	
Height	Feet/inches or cm	Weight	Stones/lbs or kg
Blood Pressure		Date blood pressure taken	

### ABOUT YOUR COMBINED PILL

#### What is the name of your combined pill?

Have you had any problems or concerns with your pill?	Yes / No
Have you been on this pill for more than a year?	Yes / No
Any missed or late pills?	Yes / No
Are you experiencing any unwanted side effects?	Yes / No
Have you had any irregular bleeding?	Yes / No
Please confirm that you have no new concerns about this pill (if you have any concerns please ring 0300 303 2880 to discuss)	No concerns / I have concerns
I confirm that I know what to do if I miss a pill	Yes / No

### MEDICAL HISTORY

If you answer **yes** to any of the following questions, we may contact you to discuss further.

Have you started any new medication since your last pill prescription?	Yes / No
Have you been diagnosed with any new health conditions since your last pill prescription?	Yes / No
Have you recently had a baby (within the last 6 months)?	Yes / No
Are you breast feeding?	Yes / No
Do you suffer from migraines?	Yes / No
Do you have a family or personal history of blood clots?	Yes / No
Do you have any breast disease (e.g. breast cancer) in your family, or have you had breast cancer?	Yes / No
Do you smoke? (please tick 1 box only)	<input type="checkbox"/> Current Smoker <input type="checkbox"/> Ex-Smoker <input type="checkbox"/> Never Smoked

Remember that the contraceptive pill does NOT protect against sexually transmitted infections (STIs), so you may need to use condoms as well. If you have had a new sexual partner since your last pill prescription, or have any symptoms, we recommend that you have a full STI screen. Please ring 0300 303 2880 to book.

There are long acting methods of contraception available <https://tinyurl.com/bshaw-larc>, if you would like to discuss further please ring 0300 303 2880. If you have concerns about your combined pill at any time, please ring 0300 303 2880. Further information on the combined pill: <https://tinyurl.com/bshaw-cocp>

<b>I confirm that the information provided is accurate to the best of my knowledge</b> <input type="checkbox"/>	
Signature of patient:	Date:
<b>For clinic use:</b> Issue repeat prescription for 3 months <input type="checkbox"/> or 6 months <input type="checkbox"/> Needs telephone consult <input type="checkbox"/>	Signed: ..... Date: .....

Please visit [www.sexualhealthbucks.nhs.uk](http://www.sexualhealthbucks.nhs.uk) for clinic opening times at Aylesbury and Wycombe.

**Brookside Centre.** Station Way East, AYLESBURY. HP20 2SR. 0300 303 2880

**SHAW clinic.** Wycombe Hospital, Queen Alexandra Road. HIGH WYCOMBE. HP11 2TT. 0300 303 2880

