**INFORMATION TO ACCOMPANY AN INDIVIDUAL FUNDING REQUEST (IFR) FOR**

**SURGERY TO CORRECT GYNAECOMASTIA**

**The NHS does not routinely commission plastic surgery for cosmetic reasons, an NHS referral is inappropriate if the patient falls within the normal morphological range.**

### PATIENT IDENTIFICATION DETAILS

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| --- | --- | --- | --- |
| PATIENT’S NAME: | **<Patient Name>** | | |
| DATE OF BIRTH: | **<Date of birth>** | NHS NUMBER: | **<NHS number>** |
| ADDRESS: | **<Patient Address>** | | |
| REFERRING GP: | <GP Name>, <Organisation Address>, <Organisation Details> | | |

### ADDITIONAL INFORMATION

**\*\*Failure to complete this questionnaire in full may delay the IFR Panel’s decision\*\***

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| --- | --- | --- | --- |
| **WEIGHT:** | HEIGHT: | BMI MEASUREMENT: | CHEST SIZE: |
| <Latest Weight> | <Latest Height> | <Latest BMI> |  |

Do you consider your patient to be overweight?  YES  NO

Has your patient taken any performance enhancing or other relevant contributory drugs, prescribed or otherwise, within the last 12 months?  YES  NO

In accordance with the policy criteria and in your view, would surgery remove more than 100g of glandular tissue?  YES  NO

Does the patient complain of any functional problems attributable to the gynaecomastia?

YES  NO

Has the patient been investigated for any underlying endocrinological cause for the gynaecomastia?

YES  NO

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| --- |
| If YES please state what these investigations were and their outcome:  Initial screening blood tests should include morning testosterone, liver function, thyroid function,  renal function, luteinising hormone, follicle stimulating hormone, oestradiol and prolactin. |

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| Please provide any other relevant information that you feel supports your request: |

**GP Signature:** <Sender Name> **Date:** <Today's date>

Please send to: **Individual Funding Request (IFR) Business Support**

**722 Prince of Wales Road, S9 4EU**

**or FAX to 0114 305 1370 (safe haven fax)**

**or EMAIL to** [sheccg.sybifr@nhs.net](mailto:sheccg.sybifr@nhs.net) **(safe haven email)**