Contraceptive Pill Review

Please complete this form before your next prescription will be issued, you may still require a face to face/telephone appointment if it is felt necessary. Complete this form at least 2 weeks before your prescription is due, it will be passed to the clinical pharmacist to review. We will contact you when your medication is ready to collect at your chosen pharmacy.

Top of Form

**All sections must be completed as a minimum standard. A blood pressure reading must be provided.**

Full Name Date of birth / /

Phone number Email address

Address

Recent weight (within 28 days) \_\_\_\_\_\_\_\_\_\_kg

Blood pressure reading (*either taken at home or pop into Purton surgery and use the machine in the waiting room*)\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_

Current Pill name:

Have you had problems with your Pill? Please circle Yes No

If you are taking a Combined Oral Contraceptive, do you take it continually? Yes No

Have you had any bleeding pattern changes or bleeding after intercourse? Yes No

Have you missed any Pills during this last prescription period? Yes No

Do you suffer from migraines? Yes No
If yes, are they new since starting pill? Yes No

Do you have any personal or family history of blood clots? Yes No

Are you a smoker? Yes - how many per day? No Ex-Smoker

* + *Would you like help to stop smoking?* [*https://www.wiltshire.gov.uk/public-health-improvement-coaches*](https://www.wiltshire.gov.uk/public-health-improvement-coaches)

Have you had any medical problems since your last prescription? Yes No

Are you experiencing any breast tenderness? Yes No

*If answering “yes”, please confirm if this effects: Both breasts or one side only*

Are you experiencing any breast lumps or discharge? Yes No

***If you think you have a new lump or new issue on one side, then please phone the surgery as soon as possible.***

<https://coppafeel.org/>

https://knowyourlemons.org/symptoms

If the answer to any of these questions is yes, the clinical pharmacist may book you in with a nurse, depending on the type of pill you are on.

Please add any further information below that could help the pharmacist with your medication request.

* There are four types of long-acting reversible contraception (LARC) Long-acting [FPA Long-acting (LARC) 01.10.2021 Locked (1).pdf](file:///C%3A%5CUsers%5Ckai.howard%5CDownloads%5CFPA%20Long-acting%20%28LARC%29%2001.10.2021%20Locked%20%20%281%29.pdf)
* How effective is contraception? <https://www.nhs.uk/conditions/contraception/how-effective-contraception/>
* Please remember to attend your smear when it is due, or as soon as possible if it is overdue. <https://www.nhs.uk/conditions/cervical-screening/>
* If you have diarrhoea or vomiting you may not absorb your pill. In this case treat it as a missed/late pill and take as soon as possible. Check the advice in the links below or speak to your community pharmacist for advice, as guidance will vary depending on your type of pill.

<https://www.nhs.uk/conditions/contraception/pill-sick-vomit-diarrhoea/>

<https://www.nhs.uk/conditions/contraception/miss-combined-pill/>

<https://www.nhs.uk/conditions/contraception/miss-progestogen-only-pill/>

* This video explains how the pill works, please take the time to watch it <https://www.youtube.com/watch?v=uAJUODxh7pM>
* Did you know 1 in 10 people under 25 years carries chlamydia (and quite a few older people too!). It’s simple to test for and is treatable. <https://www.sexwise.org.uk/stis>

Please send back via text sent to you or email purtonprescriptions@nhs.net