**Contraceptive Pill Review Questionnaire**

Please complete this questionnaire and email return to **gram.ellonclinical2@nhs.scot**

|  |  |
| --- | --- |
| Full Name  |  |
| Date of birth |  |
| Email address  |  |
| Mobile Number |  |

Name of current contraceptive pill that you are taking?

**Are you having any problems with your contraception that you would like to discuss? YES** [ ]  **NO** [ ] *(please do not continue completing this form if you have selected ‘****YES’*** *as you will require to speak to a clinician).*

Has your bleeding pattern changed since your last review or do you have any unusual bleeding? YES [ ]  NO [ ]

Have you missed pills on more than one occasion per month? YES [ ]  NO [ ]

Have you had a baby in the last 6 weeks? YES [ ]  NO [ ]

Is your smear up to date? YES [ ]  NO [ ]

Are you currently receiving weight reducing injections from a private clinic (eg Ozempic, Mounjaro) ? YES [ ]  NO [ ]

 If yes, date commenced :

|  |  |
| --- | --- |
| What is your weight (kg)? |  |
| What is your height (cm)? |  |
| What is your Blood pressure reading? (from a home monitor or via local pharmacy) |  |
| Smoking status  | Never smoked [ ]  Ex smoker [ ]  Current smoker [ ]  |

|  |  |
| --- | --- |
| Do you have, or ever been diagnosed, with any of the following? | DVT or Pulmonary embolism YES [ ]  NO [ ] Diabetes YES [ ]  NO [ ] Breast cancer YES [ ]  NO [ ] Epilepsy YES [ ]  NO [ ] Gallbladder or liver disease YES [ ]  NO [ ] Migraines YES [ ]  NO [ ] Stroke/TIA/heart attack YES [ ]  NO [ ] Atrial Fibrillation YES [ ]  NO [ ] Gynaecological cancers YES [ ]  NO [ ] High blood pressure YES [ ]  NO [ ]   |
| Have any of your immediate family (parents, siblings) been diagnosed with blood clots, heart disease, stroke or breast cancer? If yes please give details  |  |

**Please be aware that a clinician will review this form and if there are any queries, they will need to speak to you before your prescription is issued. If there are no queries you prescription will be available at your preferred pharmacy within 5 working days.**

Thank you for completing this form- please email to: gram.ellonclinical2@nhs.scot marked FAO Contraceptive Pill review

**Useful links**

[The different types of contraception | NHS inform](https://www.nhsinform.scot/healthy-living/contraception/getting-started/the-different-types-of-contraception)

[Contraception (grampiansexualhealthservices.com)](https://www.grampiansexualhealthservices.com/view/contraceptive-choices)