

## GUIDELINES FOR PRE-REFERRAL SCREEN

### MALE

Description of psychosexual problem	Guideline for pre-referral screen
<b>Erectile dysfunction</b>	<ul style="list-style-type: none"> <li>• Please provide details of drug and alcohol intake and BMI.</li> <li>• Check vascular status of lower limbs.</li> <li>• Please check: thyroid function, urea and electrolytes, liver function, early morning testosterone levels (08:30-11:30), LH, FSH, HbA1c, prolactin, cholesterol and lipid profiles. Please treat if abnormal</li> <li>• If aged 50+ please check prostate specific antigen, perform a digital rectal examination if the patient has lower urinary tract symptoms.</li> <li>• Please carry out an examination of external genitalia for phimosis, Peyronie's disease, hypogonadism etc. Refer to Andrology/Endocrinology if present.</li> </ul>
<b>Delayed Ejaculation</b>	<ul style="list-style-type: none"> <li>• Please check HbA1c</li> </ul>
<b>Premature Ejaculation</b>	<ul style="list-style-type: none"> <li>• No screening tests required, unless dictated by history or clinical findings</li> </ul>
<b>Sexual interest and arousal disorder</b>	<ul style="list-style-type: none"> <li>• As for erectile dysfunction</li> </ul>