

Pathway	
	Female Sterilisation.
Commissioned	
	Female sterilisation will be funded for ANY of the following indications: <ol style="list-style-type: none"> 1. A specialist has advised that there is an absolute clinical contraindication to pregnancy. 2. Women undergoing endometrial ablation. 3. Four or more full term pregnancies and aged 35 years or above. 4. Unable to tolerate any other suitable method of contraception.
Not Funded	
	Reversal of sterilisation.
Notes	
	<ul style="list-style-type: none"> ▪ It should be documented that the patient understands that 'reversal of sterilisation' is not funded. ▪ When the 4th indication is selected then evidence should be provided that all alternative methods of contraception are either not tolerated or ineffective.
Rationale	
	<ul style="list-style-type: none"> ▪ Policy based on <i>Royal College of Obstetricians and Gynaecologists Male and Female Sterilisation CG4</i> ▪ Referral should only take place after full counselling supported by accurate impartial printed information on alternative contraception and particularly on long acting reversible methods. ▪ Women should be informed that vasectomy carries a lower failure rate in terms of post-procedure pregnancies and that there is less risk related to the procedure. ▪ Clinicians should ensure sterilisation is discussed with both partners whenever possible.
Cohort	
	Adult females.
Equality	
	Compliant with the Equality Act 2010.
Status	
	RED as defined in the Prior Approval Scheme Policy.
OPCS codes	

Open bilateral ligation of fallopian tubes	Q27.1
Open bilateral clipping of fallopian tubes	Q27.2
Open ligation of remaining solitary fallopian tube	Q28.1
Open clipping of remaining solitary fallopian tube	Q28.3
Endoscopic bilateral cauterisation of fallopian tubes	Q35.1
Endoscopic bilateral clipping of fallopian tubes	Q35.2
Endoscopic bilateral ringing of fallopian tubes	Q35.3
Endoscopic bilateral placement of intrafallopian implants	Q35.4
Endoscopic occlusion of remaining solitary fallopian tube	Q36.1
Endoscopic placement of intrafallopian implant into remaining solitary fallopian tube	Q36.2

Version History

No material changes from previous policy.

Authorised

April 2019

Review

April 2022

Earlier if new evidence published by NICE or other authoritative body.