**Rose Clinic Referral**

At the Rose clinic we offer assessments for NON PREGNANT women who have experienced FGM, de-infibulation if required and emotional support. We do this in an all-female environment.

Patients can self refer by calling 07813 016 911 or email: bnssg.bristolrose.clinic@nhs.net

|  |  |
| --- | --- |
| **Name** |  |
| **Date Of Birth** |  |
| **Age** |  |
| **Address** |  |
| **Mobile** |  |
| **Email IMPORTANT as mobile numbers are frequently changed** |  |
| **Named GP** |  |
| **Practice** |  |
| **Type of FGM if known** |

|  |  |  |  |
| --- | --- | --- | --- |
| * 1
 | * 2
 | * 3
 | * 4
 |

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| **Country in which it occurred** |  |
| **Age at which it occurred** |  |
| **Related symptoms** |  |
| **Painful or heavy periods** |  |
| **Urinary difficulty or infections**  |  |
| **Painful sex** |  |
| **Relationship Problems** |  |
| **Mental Health** |  |
| **Other** |  |
| **Reason for presentation now** | * Marriage
* Sexual relationship
* FGM related symptoms as above
* Other
* Siblings
* Female children
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| **Safeguarding concerns** | For immediate concerns for under 18’s call the police on 101. Mandatory reporting is required. |