

2e. Chronic Pelvic Pain: Red Flag Referral

These are changes in presentation that should always be considered and may warrant further investigation or onward referral to exclude treatable conditions – such presentations may occur with the initial presentation or at reassessment. There may be established care pathways for managing these patients already in existence. Consider the following:

Gynaecological:

- post-coital bleeding
- pelvic mass
- irregular vaginal bleeding over the age of 40
- new onset pain after the menopause
- post menopausal bleeding

Urological:

- haematuria

Gastroenterology:

- blood in stools
- weight loss
- night-time symptoms
- new bowel symptoms over the age of 50
- family history of colorectal cancer or inflammatory bowel disease
- abnormalities on physical examination
- anaemia

Psychological:

- suicidal ideation with intent
- major depressive disorder or other severe psychiatric illness