

Pathway:	Galactorrhoea
Referral Criteria/Commissioning position:	
<p><i>Refer if:</i></p> <ul style="list-style-type: none"> • conventional primary care management has failed to resolve the issue <p>If prolactin level very raised in absence of pregnancy or breast-feeding refer to Endocrinologist not breast surgeon</p> <p>Investigations prior to referral</p> <ul style="list-style-type: none"> • Serum prolactin and TFT • Renal and liver function tests • Pregnancy test (if appropriate) 	
Information to include in referral letter:	
<p><i>The GP referral letter should contain:</i></p> <ul style="list-style-type: none"> • Frequency and duration of symptoms • Recent pregnancy or breast feeding • Visual field assessment • Drug history (prescribed and non-prescribed) • Relevant past medical/surgical history • Current regular medication • BMI • Smoking status • Alcohol consumption 	
References & Additional information:	
<p>References: www.patient.co.uk/doctor/Galactorrhoea</p>	
CCG GP sign off:	SRCCG Business Committee (Delegated to Dr Greg Black)
Review date:	2017