

West Yorkshire Integrated Care Board (WY ICB)					
Policy	Male circumcision			ICB Ref	Planned care
First Issue Date Review date	To be confirmed To be confirmed	Current version: Contact	Partnersh	Last reviewed: kshire Health hip (WY HCP annedcare@	n and Care
Clinical Reviewer	WY HCP	Approved by	WY ICB		

Policy exclusions

• Circumcision will NOT be routinely commissioned for physiological phimosis nor for non-medical reasons such as social, religious or cultural reasons.

Policy inclusion criteria

Funding for patients will be considered on an individual basis where their GP or consultant has completed the necessary Individual Funding Request form Cases may be considered on an exceptional basis, for example, when an underlying medical condition means that routine surgery in the usual setting may be unsafe:

- Pathological phimosis
- Recurrent episodes of balanoposthitis

Relative Indications for circumcision are:

- Prevention of urinary tract infection in patients with an abnormal urinary tract
- Recurrent paraphimosis
- Trauma (e.g. zipper injury)
- Tight foreskin causing pain on arousal/interfering with sexual function
- Congenital abnormalities

Referral to Secondary Care

- Physiological phimosis should be managed in primary care
- If there is concern that pathology is evident or diagnostic uncertainty then referral to secondary care is appropriate.

Summary of evidence / Rationale	
Reference	The Royal College of Surgeons Commissioning Guide: Foreskin Conditions (2013) criteria for surgical interventions: https://www.rcseng.ac.uk/library-and-publications/rcs-publications/docs/foreskin-conditions/
	2. <u>circumcision (2).pdf</u>