

Comms for Primary Care: GP Guidance on LTHT's processing of 2ww - suspected cancer patients by site speciality team

The Cancer Multi-disciplinary Teams are continuing to accept and progress 2ww patients, however diagnostic capacity is reduced in many areas especially where testing involves an aerosol generating procedure (AGP) e.g. endoscopy.

It is important patients continue to be referred where a cancer is suspected. The 2ww form guide provides guidance on symptoms that are of concern. Further information is available at <https://www.nice.org.uk/guidance/ng12>

If you are unsure whether to refer telephone ACE Clinical Nurse Specialists: 0113 206 4698/ 0113 206 4847

Team	Triaging (Y/N) Telephone (T) or Desktop (D)	Diagnostics being undertaken	2WW Clinic appointments Y/N	Telephone (T)/ face to face (F2F) / Video (V)
Brain	Proceeding as normal			
Breast	Telephone triage	Radiology - Mammogram & U/S + Bx	Yes	F2F
Bladder	Telephone triage	For urgent cases only: Cystoscopy (limited to 6 per day) or CTC	Yes	T and F2F
Colorectal	Patients in the backlog of referrals have been contacted. FIT tests are being offered as required to inform prioritisation. From Tuesday 25th May 2ww referrals should be accompanied by a FIT test.	Endoscopy is starting to resume and the high priority patients from the recent review are being called.	Yes	T
ACE	Telephone triage	Where possible for urgent cases	Yes	T and F2F

Team	Triaging (Y/N) Telephone (T) or Desktop (D)	Diagnostics being undertaken	2WW Clinic appts Y/N	Telephone (T)/ face to face (F2F)/ Video (V)
Gynaecology	Telephone or Desktop and Telephone Screening	Colposcopy, Hysteroscopy U/S NB Women's services are struggling to get patients to come in for testing so please reassure patients as far as possible about attending for testing if required.	Yes	T + F2F if required
Haematology	Telephone triage	Blood tests/ U/S guided bx	Yes	F2F - If a clear malignancy otherwise T
Head and Neck	Telephone triage	CT/U/S guided Bx	Yes	T
Liver	CNS triage - desktop	CT	Yes	- Clinic T or F (post consultant review)
Lung	Telephone triage	CT + CT Guided Bx Bronchoscopy and EBUS if indicated	Yes	T + One clinic F2F
Melanoma	Tele-dermatology	Most procedures at Chapel Allerton proceeding	Yes	T + F2F
Panc and Duodenum	CNS triage - desktop	CT	Yes	Clinic T or F2F (post consultant review)
Prostate	Telephone triage	Nil	Yes	T + F2F
Renal	Clinically triaged by consultant	Nil request post MDT if required	Yes	T + F2F
Sarcoma	CNS Triage	Biopsies if required	Yes	F2F
Skin	Tele-dermatology Image review NB referring with images is crucial now to allow patients to be triaged directly to excision if required.	On day procedures for high risk skin cancers. Straight to excision following image triage.	Yes	T + F2F
Thyroid	Numbers low refer as normal		Yes	T + F2F
Upper GI	Starting to work through backlog of	Only very urgent endoscopy	Yes	T + F2F following

	referrals and contacting patients prioritise testing.	CT/ Ba swallow		CT/Ba Swallow
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Corporate Cancer Team Information collated: 03/06/2020