

Patient advice and liaison service (PALS)

If you have a compliment, complaint or concern please contact our PALS team on 020 7288 5551 or whh-tr.whitthealthPALS@nhs.net

If you need a large print, audio or translated copy of this leaflet please contact us on 020 7288 3182. We will try our best to meet your needs.

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Designed in collaboration with UCLH Cancer Collaborative



**Cancer pathway information
for patients being
investigated for possible
gynaecological cancer**



You have been referred to a gynaecology specialist because your symptoms need further tests. There are many common conditions that these symptoms could be linked to, including the possibility of cancer.

Most patients referred for further tests do **not** have cancer. However it is important that you have these tests quickly so if needed we can diagnose you and start treatment as soon as possible.

This can be a very worrying time for you and your family. We aim to keep the time between your referral, diagnosis and any treatment (if you need it) as short as possible. We need your help to make this happen.

This leaflet aims to give you an overview of what you can expect during this time.

Gynaecological cancer pathway diagram

The appointments and tests you may need to have to examine your symptoms are described as a **pathway**. The diagram in the next page shows the order of the appointments from referral to treatment. You may not need all of these tests. If cancer is ruled out early in the pathway, you will not need the rest of the tests.

MDT (Multidisciplinary Team): An MDT meeting is a meeting of the group of professionals who together make decisions regarding recommended treatment of individual patients. This includes consultant oncologists, surgeons, specialist nurses and imaging specialists. You will not need to attend this meeting.

Specialist centres: Some hospitals provide specialist treatment for patients with gynaecological cancer – in north and east London, the specialist centres are at UCLH and Barts Health. You may be referred to one of these hospitals if this is the best place for your diagnosis and treatment.

Glossary

MRI scan: An MRI scan uses a combination of a powerful magnet and radio waves to scan your body and it will provide us with detailed images of your pelvis.

Hysteroscopy: A hysteroscopy is a procedure to examine the inside of the womb, using a hysteroscope, which is a narrow telescope with a light and camera at the end. Some women experience discomfort during this procedure – your doctor or nurse can tell you more about what to expect and pain relief options if necessary.

CT scan: A CT scan uses x-rays to take detailed pictures of your body from different angles. A computer then puts them together to give a series of pictures.

Ultrasound scan: Ultrasound scans use high frequency sound waves to build up a picture of the inside of the body. The sound waves bounce off the organs inside your body, and the microphone picks them up. The microphone links to a computer that turns the sound waves into a picture on the screen. They are usually done in the hospital x-ray department by a sonographer. Most scans are vaginal, in order to get the best pictures.

Biopsy: A biopsy is a sample of tissue taken from the body in order to examine it more closely. A doctor may recommend a biopsy where there is a suggestion that an area of tissue in the body isn't normal. Most biopsies are done under local anaesthetic.

Day1

- GP referral to local hospital.

By day 7-11

- First outpatient appointment. This may include some scans and a hysteroscopy.
- Scans such as CT, MRI or ultrasound scan (depending on what you need). For some people it is possible to do these on the same day, which may take a while. For others, you may need to come back
- MDT meeting of healthcare professionals (unless cancer has been ruled out).

By day 31

- For the majority of women, we hope to discharge you at this stage after normal test results. A small proportion of women may need to progress to the next stage of the pathway.

By day 38

- Referral to a specialist hospital, if needed, and review in a specialist MDT meeting

By day 45

- Outpatient appointment to confirm diagnosis and discuss treatment, if needed (within 1 week of specialist MDT).
- Biopsy and/or drainage of fluid from your chest or abdomen, if you need it

By day 62

- Start treatment

These timings are the national requirements for hospitals to provide a rapid service to patients, so that people who need treatment can start it as soon as possible. You may be seen more quickly than this.

What will happen?

Your GP will refer you to your local hospital, who will try to see you within one week to perform tests. These may include scans. The results will be discussed at an MDT meeting of healthcare professionals.

The MDT may then refer you to a specialist centre at another hospital – either UCLH or Barts Health. The specialist hospital will try to see you within one week of your referral. You may need to have scans and a biopsy (a small sample) before your first appointment with the specialist team.

When your results from the scans and biopsy are available, then you will see a specialist who will explain your diagnosis. If you need treatment, then they will discuss the different options in detail with you. If you are having treatment, we aim to commence this within 62 days of your referral from the GP.

If there is any delay to your appointments, then a member of the gynaecological oncology team will contact you. **If you have any questions at any point, you can contact us Monday-Friday, 9am-5pm on 020 7288 5279.**

Unfortunately we cannot give results over the phone.

What you need to do

- You may be contacted at short notice to attend appointments. **It is very important that you attend all the appointments we offer you.** Delaying these slows down the process of making a diagnosis and starting any treatment you might need.
- Please be available for the next six weeks for appointments.
- Please let us know if you change your contact details.
- If you cannot attend an appointment or are planning to go away, please discuss this with your GP practice or hospital doctor or nurse as soon as possible. Please reschedule any trips away if possible.
- If you have an emergency and cannot keep your appointment, please let us know immediately by calling 0207 288 3736 / 3542. You will then need to arrange another appointment.
- We suggest that you bring a friend or family member to appointments if you can.
- Please bring a list of your current medications.
- If a translator/interpreter is required, please let the hospital know in advance
- If you need transport to and from the hospital, please speak with your GP who can advise how this can be arranged.