

Faster diagnosis pathway for gynaecology

Information for patients

This sheet answers common questions about seeing a gynaecology specialist on the faster diagnosis pathway. If you would like further information, or have any worries, please do not hesitate to ask your nurse or doctor. In most cases it will be possible for a friend or relative to accompany you for your appointments. Please ask your nurse or doctor.

Why am I receiving this information leaflet?

You have been referred to a gynaecology specialist on the 'faster diagnosis pathway' because your symptoms need further investigation. This pathway ensures that the right tests are performed as quickly as possible so that your doctor can rule out cancer as the cause of your symptoms.

Most women referred on this pathway **do not** have cancer and will receive reassuring results. However, it is important that you come for any tests or appointments offered so that, if you do have a cancer, it can be diagnosed, and you can 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 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. Not all elements of the pathway may apply to you depending on the symptoms you have experienced.

What will happen on this pathway?

Your GP will refer you to your local hospital, who will aim to offer you an appointment within nine days or less. You may be asked to have tests such as an ultrasound and a biopsy and these tests will be performed on the same day as you see the gynaecologist where possible.

Additional tests such as a hysteroscopy (a procedure to examine the inside of your womb), and CT and MRI scans, which give detailed images of the inside of your body, may be performed at the same visit, or may be arranged separately.

The gynaecologist will discuss with you how you will receive the results – this may be by letter, telephone or in person. The results may need to be discussed at a multidisciplinary team (MDT) meeting of healthcare professionals.

The MDT may then refer you to the specialist centre at University College London Hospitals NHS Foundation Trust (UCLH). The specialist centre team will review all your tests and consider what treatment should be recommended. Additional tests such as scans or biopsies (where a small sample of tissue is taken) may be requested before the team at UCLH see you to discuss a plan for your treatment.

The UCLH specialist team will aim to see you within one week of having reviewed all your tests to explain your diagnosis. If you need treatment, the different options will be discussed in detail with you. We aim to start treatment within 62 days of referral by your GP.

A clinical nurse specialist will support you through the pathway if your results confirm the presence of a cancer or if you require onward referral to UCLH for further investigation and treatment.

If you have any questions, contact us Monday-Friday, 8am to 4pm.
Telephone: 0207 794 0500, on extensions 31690, 31699, 32300, 32301.

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 telephone: 0207 794 0500, extensions: 31690; 31699; 32300; 32301. You will then need to arrange another appointment.
- We suggest that you bring a friend or family member to appointments if you can. This will depend on the infection control measures the hospital has in place at the time.
- 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.

Managing your feelings whilst waiting for your results

You might notice a range of emotions whilst waiting for your results. Many people tell us that they feel anxious. Others might feel numb or notice that things don't seem real. Sometimes people find it harder to concentrate or remember things. There is no normal way to feel during this period, so try to be kind to yourself whatever emotions you are experiencing.

If you are feeling anxious, you might notice changes in your body, for example increased heart rate, muscle tension, breathing more quickly, feeling hot and sweaty, racing thoughts

and butterflies in your stomach. These are all normal responses to a worrying situation and are your brain and body's way of trying to keep you safe. Over time these physical feelings should lessen.

You may find the tips below helpful for managing your feelings during the wait:

- **Find ways to express your feelings.** You might find it helpful to talk to a trusted friend or family member. Or you could try writing about or drawing how you feel.
- **Distraction.** Try to engage with activities that occupy your mind. Try to include a mixture of activities that give you a sense of achievement, a sense of enjoyment and a sense of closeness to other people. Try to really pay attention to what you are doing, even though your mind might keep trying to distract you.
- **Movement.** Physical activity can help us to feel calmer, both physically and mentally. This can be as simple as some slow stretches of your body or going for a short walk.
- **Slow your breathing.** When we are going through something stressful, we tend to breathe more quickly, shallowly and from the chest. Purposefully slowing your breathing and breathing from lower in your abdomen can help to calm your body and mind. Try breathing in slowly and steadily for four seconds. Pause for a second. Then breathe out slowly and steadily for four seconds and pause for another second. Try breathing like this for a minute or two and see how you feel.

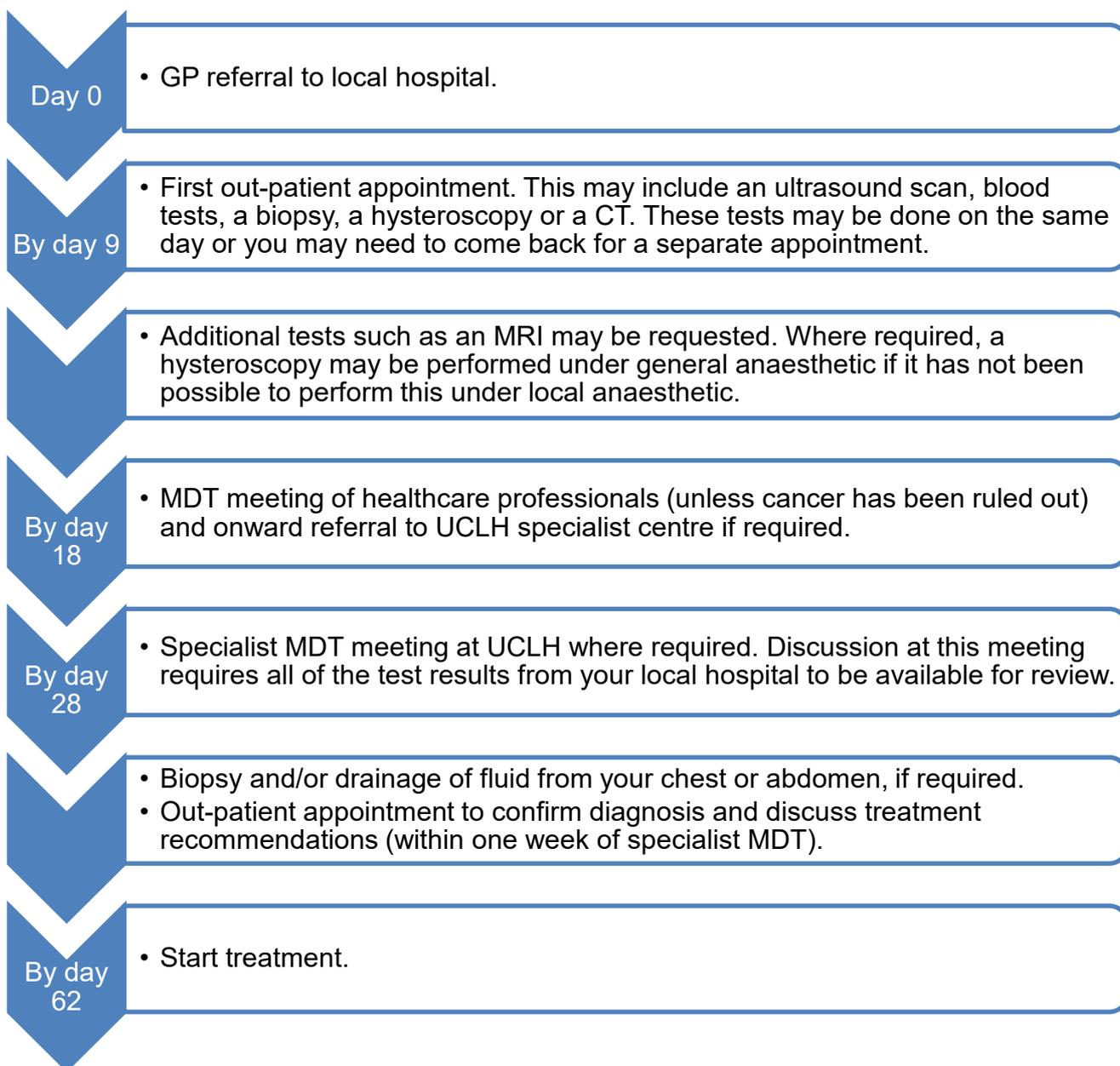
Speaking to us if you have experienced trauma

We know that for some people who have experienced trauma, particularly sexual violence, healthcare appointments can be difficult. We want to do everything that we can to make you feel comfortable, so please do let us know if there are things that you would like us to do (or not do) to help you feel safe.

We will not ask you to tell us about your experiences if you do not want to. We understand that it can also be difficult to share that you have experienced trauma. You might like to point to this section of the leaflet if you have had experiences that make healthcare appointments difficult and would like your healthcare professional to know, but it is difficult to put into words.

Faster diagnosis pathway diagram

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



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.

Glossary

Biopsy: A biopsy is a sample of tissue taken from the body 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.

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.

Drainage: If you have excess fluid in your abdomen or chest, then it may need to be removed. This involves inserting a small plastic drain, with local anaesthetic.

Gynaecological cancer: Gynaecological cancers start in a woman's reproductive system. There are five types – womb (also known as endometrial), ovarian, vulval, vaginal and cervical.

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 about how to prepare for the test.

MDT (multi-disciplinary team): An MDT meeting is a meeting of the group of professionals who together make recommendations regarding your treatment. This includes consultant oncologists, surgeons, specialist nurses and imaging specialists. You will not need to attend this meeting.

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.

Specialist centre: Some hospitals provide specialist treatment for patients with gynaecological cancer. In north central London the specialist centre is at University College London Hospitals NHS Foundation Trust (UCLH). You may be referred to UCLH if this is the best place for your diagnosis and treatment.

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 a computer turns the sound waves into a picture on the screen. They are usually done in the hospital x-ray or gynaecology department by a sonographer. Most pelvic scans are performed with a probe inserted into the vagina to get the best images.

Acknowledgements

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More information

For more information about the gynaecology service at the Royal Free London, please visit our website: www.royalfree.nhs.uk/services/services-a-z/gynaecology

Your feedback

If you have any feedback on this leaflet or for a list of references for it, please email: rf.communications@nhs.net

Alternative formats

This leaflet is also available in large print. If you need this leaflet in another format – for example Braille, a language other than English or audio – please speak to a member of staff.

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