# TREATMENT SUMMARY: EATOOL TO MPROVE COMMUNICATION BETWEEN CANCER SERVICES AND PRIMARY CARE

#### Treatment Summary template

Treatment Summary Insert GP Contact Details		Insert Trust Logo and Address		
Dear Dr X,  Re: Add in patient name, address, date of birth and record number  four patient has now completed their initial treatment for cancer and a summary of their diagnosis, treatment and ongoing management plan is outlined below. The patient has a copy of this summary.				
Diagnosis:	Date of diagnosis:	Organ/Staging Local/Distant		
Summary of Treatment and relevant dates:		Treatment aim:		
Possible treatment toxicities	and / or late effects:	Advise entry on to primary care palliative or supportive care register Yes / No DS1500 application completed Yes/No Prescription Charge exemption arrange Yes/No		
Alert Symptoms that require referral back to specialist team:		Contacts for referrals or queries: In Hours: Out of hours:		
Secondary Care Ongoing Management Plan: (tests, appointments etc)		Other service referrals made: (delete as necessary) District Nurse AHP Social Worker Dietician Clinical Nurse Specialist Psychologist Benefits/Advice Service Other		
Required GP actions in addi	ition to GP Cancer Care Review (eg ongoing me	dication, osteoporosis and cardiac screening)		
Summary of information give	ven to the patient about their cancer and future p	progress:		
Additional information inclu	iding issues relating to lifestyle and support need	is:		

Additional information including issues relating to lifestyle and support needs:				
Completing Doctor:	Signature:	Date:		

## Snapshot audit of current practice

5 units BCNs responsed

 All looked at 5 recent discharges from hospital follow up

Compared letter content to template

# Who wrote discharge letter?

Surgeons

Oncologists

• BCNs

• SHO

Diagnosis:	Date of diagnosis:	Organ/Staging
		Local/Distant
Summary of Treatment and relevant dates:		Treatment aim:

- Diagnosis: 23/25
- Date diagnosis: non-specific "5years ago" or surgery date
- Organ: 23/25
- Staging etc: most "no evidence of local or distant mets"
- Summary: scappy: non specific: dates of adjuvant missing
- Treatment aim: no

Possible treatment toxicities and / or late effects:	Advise entry on to primary care palliative or supportive care register
	Yes / No
	DS1500 application completed
	Yes/No Prescription Charge exemption arrange
	Yes/No

- Toxicities / late effects : not in discharge letters but info in previous letters.
- Palliative care : no (but none relevant)
- DS 1500 : none
- Prescription charge exemption: 1/25

Alert Symptoms that require referral back to specialist team:

Contacts for referrals or queries:

In Hours:

Out of hours:

- Alert symptoms: 4 in letter, 16 in leaflet, 5 not at all
- 4/5 units gave patient discharge guide; all contained
   "What symptoms do I need to look out for ?" section
- Contacts: detailed in leaflets, otherwise just letterhead

Secondary Care Ongoing Management Plan: (tests, appointments etc)

Other service referrals made:
(delete as necessary)
District Nurse
AHP
Social Worker
Dietician
Clinical Nurse Specialist
Psychologist
Benefits/Advice Service

Only reference to "return to routine screening"

Required GP actions in addition to GP Cancer Care Review (eg ongoing medication, osteoporosis and cardiac screening)

Summary of information given to the patient about their cancer and future progress:

Additional information including issues relating to lifestyle and support needs:

- GP actions: Stop endocrine therapy; very little else
- Summary of info given: 20 in units where discharge leaflet given. 16/20 letters referred to leaflet.

### Discharge leaflets: 3 variations

- Why am I being discharged?
- What about mammograms in the future?
- How do I arrange a new prosthesis?
- What symptoms do I need to look out for? 3
- Who can I contact for help and advice?
- What if my GP finds a problem ?
- List of sources of information 1

#### Summary

- No standard format, mostly very basic information
- Relying on series of letters rather than summary
- Discharge leaflets for some patients, GP not always aware

 No true summaries of individual treatment and possible side effects.

#### Thanks to....

- Jan Harley
- Carol Parry
- Amanda Walshe
- Joan Clark
- Pamela Turnbull

#### To discuss

What do patients really want ?

What do GPs really want ?

Does Macmillan form fulfil requirements?