

Pennine GP Learning Group

Minutes of meeting

Date: Tuesday 28th August 2018

Time: 7 - 9pm (2 hours)

Topic: Local Fast Track Cancer Guidelines: A Summary and Review

Members present: Dr Rukhsana Hussain, Dr Ann Holmes, Dr Susan Creegan, Dr Ibrar Ali and Dr Ainie Chaudhry

1. We welcomed new members to the group and the meeting.
2. Dr Hussain presented **A Summary of Local Fast Track Guidelines for Suspected Cancer.** She informed the group that she had transcribed the criteria from the different referral forms and added some of the symptom checklists for their reference. The Fast Track forms were based on NICE 2015 guidance.

Dr Hussain mentioned that she had decided to create the summary as a reminder and aid for herself and others, especially since they had been updated in 2017 and many clinicians may still be recalling the historical criteria.

We discussed the criteria as a group and cases that we had referred/seen.

The review also gave us an opportunity to discuss what we thought of the guidelines... for example, many of us agreed that for some of the criteria mentioned for suspected cancer in children we would be more likely to admit the child for assessment, under the Paediatric Team on the day, than refer under the Fast Track referral criteria which could delay diagnosis and management.

Dr Creegan pointed out that some of the criteria were slightly different to those in the area where she has previously worked - the gynaecology referral guidelines locally mention postcoital bleeding aged over 35 years that persists for more than 4 weeks but the Lancashire guidelines do not restrict the criteria to 4 weeks or more.

We all agreed that the GI referral guidelines had become more complicated compared to previous guidelines which make them difficult to recall.

Dr Hussain mentioned that previously recurrent UTI/persistent UTI was a fast track criteria but this seemed to have now been removed. We all agreed that we would probably refer such a patient to be seen urgently if we were concerned.

Dr Ali shared a case where a child had presented with persistent cervical lymphadenopathy and although ultrasound showed reactive lymph nodes, the mother insisted on a biopsy which confirmed lymphoma.

Dr Holmes mentioned that the Paediatric team did take parental concerns seriously. We discussed the fact that a child presenting 3 or more times with the same symptoms and no clear diagnosis could be referred under the fast track guidelines.

Dr Ali had worked in a different area previously so mentioned that it was beneficial to review the local guidelines which had some differences to where he had previously worked.

Action Plan

1. Dr Hussain will upload the presentation and minutes to the website and share the link with the WhatsApp group.
2. Dr Hussain to confirm the date and venue for the next meeting.