

Ref: FOI/GS/ID 5626

Please reply to:
FOI Administrator
Trust Management
Maidstone Hospital
Hermitage Lane
Maidstone, Kent
ME16 9QQ
Email: mtw-tr.foiadmin@nhs.net

03 November 2020

Freedom of Information Act 2000

I am writing in response to your request for information made under the Freedom of Information Act 2000 in relation to Prostate cancer guidelines.

You asked:

- 1. Does the NHS Trust have prostate cancer referral guidelines? If yes, please provide a copy.*
- 2. According to the NHS Trust guidelines, at what PSA level should GPs refer patients for suspected prostate cancer?*
 - a. Does this differ depending on any factor, such as age?*
 - b. Are repeated PSA tests required before a referral?*
- 3. When were the NHS Trust prostate cancer referral guidelines last updated?*

Trust response:

1. 2WW GP referral form
2. It is age -dependent. Full details on the 2WW GP referral form.
 - a. Yes. Full details on the 2WW GP referral form attached below.
 - b. No
3. 2020.

PATIENT DETAILS				GP DETAILS	
Surname:	[MERGED FIELD]	First Name:	[MERGED FIELD]	Name:	[MERGED FIELD]
D.O.B.:	[MERGED FIELD]	Gender:	[MERGED FIELD]	Code:	[MERGED FIELD]
Age:	[MERGED FIELD]	NHS No.:	[MERGED FIELD]	Address:	[MERGED FIELD]
Address:	[MERGED FIELD]			Post code:	[MERGED FIELD]
Post code:	[MERGED FIELD]	Mobile:	[MERGED FIELD]	Tel. No.:	[MERGED FIELD]
Home Tel.:	[MERGED FIELD]	Other Tel Name:		E-mail:	[MERGED FIELD]
Other Tel:		First Language:			
Interpreter required?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			

PATIENT ENGAGEMENT AND AVAILABILITY	
I confirm the following: I have discussed the possibility that the diagnosis may be cancer; I have provided the patient with a 2WW referral leaflet and advised the patient that they will need to attend an appointment within the next two weeks	
GP Name:	Date of decision to refer (dd/mm/yy):

REFERRAL CRITERIA
Prostate cancer
Refer men using a suspected cancer pathway referral (for an appointment within 2 weeks) for prostate cancer if their <input type="checkbox"/> prostate feels malignant on digital rectal examination <input type="checkbox"/> PSA levels are above the age-specific reference range

PSA PRIMARY CARE TEST GUIDANCE												
Consider a prostate-specific antigen (PSA) test and digital rectal examination to assess for prostate cancer in men with: <ul style="list-style-type: none"> any lower urinary tract symptoms, such as nocturia, urinary frequency, hesitancy, urgency or retention or erectile dysfunction or visible haematuria The Prostate Cancer Risk Management Programme March 2016 advises that before having a PSA test, men should not have: <ul style="list-style-type: none"> an active urinary infection (*wait until 6 weeks post treatment with Antibiotics) ejaculated in the previous 48 hours exercised vigorously in the previous 48 hours had a prostate biopsy in the previous 6 weeks Before performing a PSA test, the conditions above should be met in order to ensure that, where possible, a raised PSA result is the result of prostate cancer, not a confounding physical condition												
<table border="1"> <thead> <tr> <th colspan="2">Age adjusted PSA normal values:</th> </tr> <tr> <th>Age</th> <th>PSA Below (ug/l)</th> </tr> </thead> <tbody> <tr> <td>40-49</td> <td>2.5*</td> </tr> <tr> <td>50-69</td> <td>3.0**</td> </tr> <tr> <td>70 and over</td> <td>5.0*</td> </tr> <tr> <td>80 and over</td> <td>10.0*</td> </tr> </tbody> </table>	Age adjusted PSA normal values:		Age	PSA Below (ug/l)	40-49	2.5*	50-69	3.0**	70 and over	5.0*	80 and over	10.0*
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(*Agreed at Kent and Medway Urology TSSG 31 st October 2019) (**Prostate Cancer Risk Management Programme, 2016)												

Bladder and renal cancer
Refer people using a suspected cancer pathway referral (for an appointment within 2 weeks) for bladder cancer if they are:
<input type="checkbox"/> aged 45 and over and have:
▪ unexplained visible haematuria without urinary tract infection or
▪ visible haematuria that persists or recurs after successful treatment of urinary tract infection, or
<input type="checkbox"/> aged 60 and over and have unexplained non-visible haematuria and either dysuria or a raised white cell count on a blood test
<input type="checkbox"/> abnormal imaging suggestive of renal tract malignancy (please attach report)
Testicular cancer
Consider a suspected cancer pathway referral (for an appointment within 2 weeks) for testicular cancer in men if they have:
<input type="checkbox"/> a non-painful enlargement or change in shape or texture of the testis
<input type="checkbox"/> abnormal ultrasound imaging suggestive of testicular cancer (please attach report)
GUIDANCE FOR IMAGING
Consider a direct access ultrasound scan for testicular cancer in men with unexplained or persistent testicular symptoms
Penile cancer
Consider a suspected cancer pathway referral (for an appointment within 2 weeks) for penile cancer in men if they have either:
<input type="checkbox"/> a penile mass or ulcerated lesion, where a sexually transmitted infection has been excluded as a cause, or
<input type="checkbox"/> a persistent penile lesion after treatment for a sexually transmitted infection has been completed
<input type="checkbox"/> with unexplained or persistent symptoms affecting the foreskin or glans

REFERRAL WHERE NICE NG 12 GUIDANCE IS NOT MET
NOTE: Whilst guidance assists the practice of healthcare professionals, they do not replace their knowledge, skills or clinical judgement. Tick the following boxes if you are unsure if a patient meets the NICE criteria
<input type="checkbox"/> I am very concerned my patient has cancer but they do not meet the NICE NG 12 criteria
If yes, please state why you have suspicions:

CLINICAL INFORMATION		
NOTE: Please ensure urgent blood tests are undertaken for FBC, electrolytes and creatinine		
Relevant clinical details including past history of cancer, family history and examination findings:		
Anticoagulation	Yes	<input type="checkbox"/>
Cognitive Impairment (e.g. dementia/learning disability, memory loss etc.)	Yes	<input type="checkbox"/>
Is a hoist required to examine the patient?	Yes	<input type="checkbox"/>

PATIENT'S WHO PERFORMANCE STATUS	
<input type="checkbox"/> 0	Able to carry on all normal activity without restriction
<input type="checkbox"/> 1	Restricted in physically strenuous activity but able to walk and do light work
<input type="checkbox"/> 2	Ambulatory and capable of all self-care but unable to carry out any work activities; up and about more than 50% of waking hours
<input type="checkbox"/> 3	Symptomatic and in a chair or in a bed for greater than 50% of the day but not bedridden
<input type="checkbox"/> 4	Completely disabled; cannot carry out any self-care; totally confined to bed or chair

ADDITIONAL GP GUIDANCE

NOTE: If significantly compromised by other co-morbidities or with limited life expectancy consider a discussion with the patient and carer regarding whether investigation is necessary

Consider non-urgent referral for bladder cancer in people aged 60 and over with recurrent or persistent unexplained urinary tract infection

PATIENT CLINICAL INFORMATION FROM MERGED GP ELECTRONIC RECORDS

Allergies:	[MERGED FIELD]
Active Problems:	[MERGED FIELD]
Investigations:	[MERGED FIELD]
Significant past history:	[MERGED FIELD]
Current medication:	[MERGED FIELD]
Repeat medication:	[MERGED FIELD]