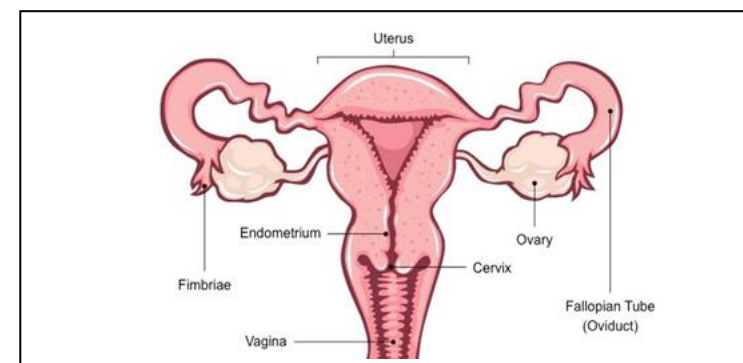


## Glossary

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.
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.
Gynaecological cancer	Gynaecological cancers start in a woman's reproductive system. There are five sites from which cancer can arise: – womb (endometrial), ovary, vulva, vagina and cervix.
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.
MDT (Multi-disciplinary Team)	An MDT meeting is a meeting of the team of professionals who agree on the most effective tests and treatments that should be recommended to an individual patient. This includes consultant oncologists, surgeons, specialist nurses, pathologists and imaging specialists.
MRI scan	An MRI scan uses a combination of a powerful magnet and radio waves to scan your body and provides detailed images of your pelvis.
Specialist centres	Some hospitals provide specialist treatment for patients with gynaecological cancer – in north and east London, the specialist centres are at UCLH and the Royal London Hospital . You may be referred to one of these hospitals 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 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.

## 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.

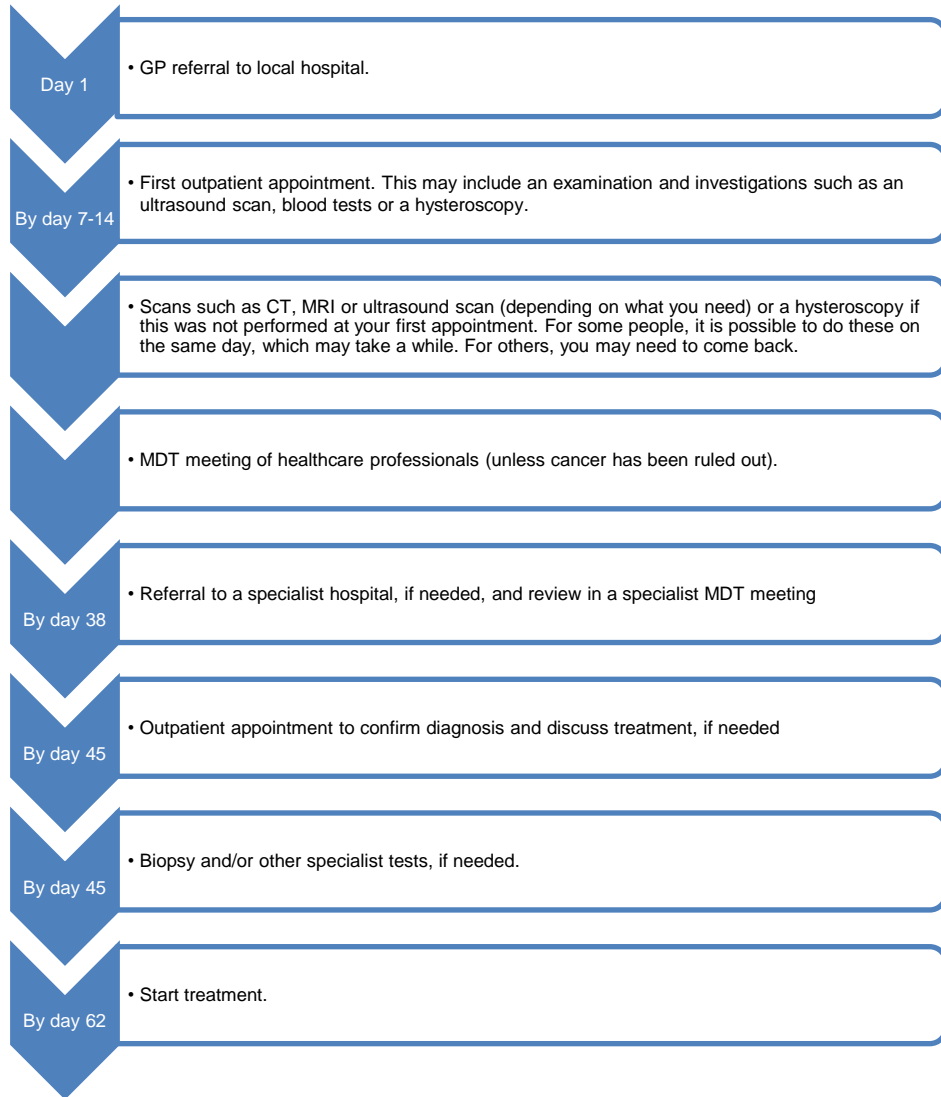
Most patients referred for further tests do **not** have cancer. However it is important that you have these tests quickly so, if needed, we can diagnose you and start treatment as soon as possible.

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**. This diagram 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.



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 may 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 the Royal London Hospital. 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 the relevant hospital Monday-Friday, 9am-5pm on:**

**Barnet and Chase Farm - 020 8216 5308**  
**North Middlesex University Hospital - 020 8887 2000**  
**Royal Free - 020 7794 0500 ext 36652**  
**University College London Hospital - 0203 447 8636**  
**Whittington Hospital - 0207 288 5279**

### 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 the above number. You will then need to arrange another appointment.
- We suggest that you bring a friend or family member to appointments if you can. [Dependent on COVID restrictions at your local hospital]
- Please bring a list of your current medications to each appointment.
- 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.