

*There are national requirements for hospitals to provide a rapid service for this pathway. This is to ensure that those patients who need treatment can start it as soon as possible. **It is therefore very important that you attend all the appointments we offer you.***

### What you need to do

- Please be available for the next two months for appointments.
- Please ensure that your GP has your correct phone number. You will receive a call very soon to plan diagnostic tests.
- 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.
- If you have an emergency and cannot keep your appointment, please let us know immediately by calling the hospital directly on the relevant number below. 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.
- If a translator is required, please let the hospital know in advance

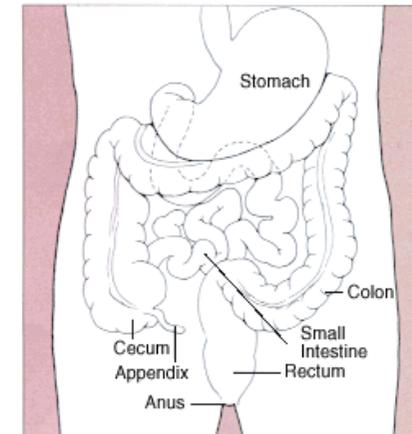
North Middlesex University Hospital - 020 8887 2000

Royal Free - 020 7794 0500

University College London Hospital - 020 3447 5308

Whittington Hospital - 020 7272 3070

## Pathway information for patients being investigated for possible Colorectal (Bowel) Cancer



Your GP has referred you to a specialist because your symptoms need further investigation. You can expect to be seen quickly to find out what is wrong with you.

There are many common conditions that these symptoms could be linked to, including the possibility of cancer. Most people who have an urgent referral **do not** have cancer.

Because this referral is urgent, it means that you will be offered an appointment at hospital within two weeks, but it may be within a week. You may need to be available for further tests over the next four weeks in order to receive a diagnosis quickly.

Version: 1

Date: January 2020

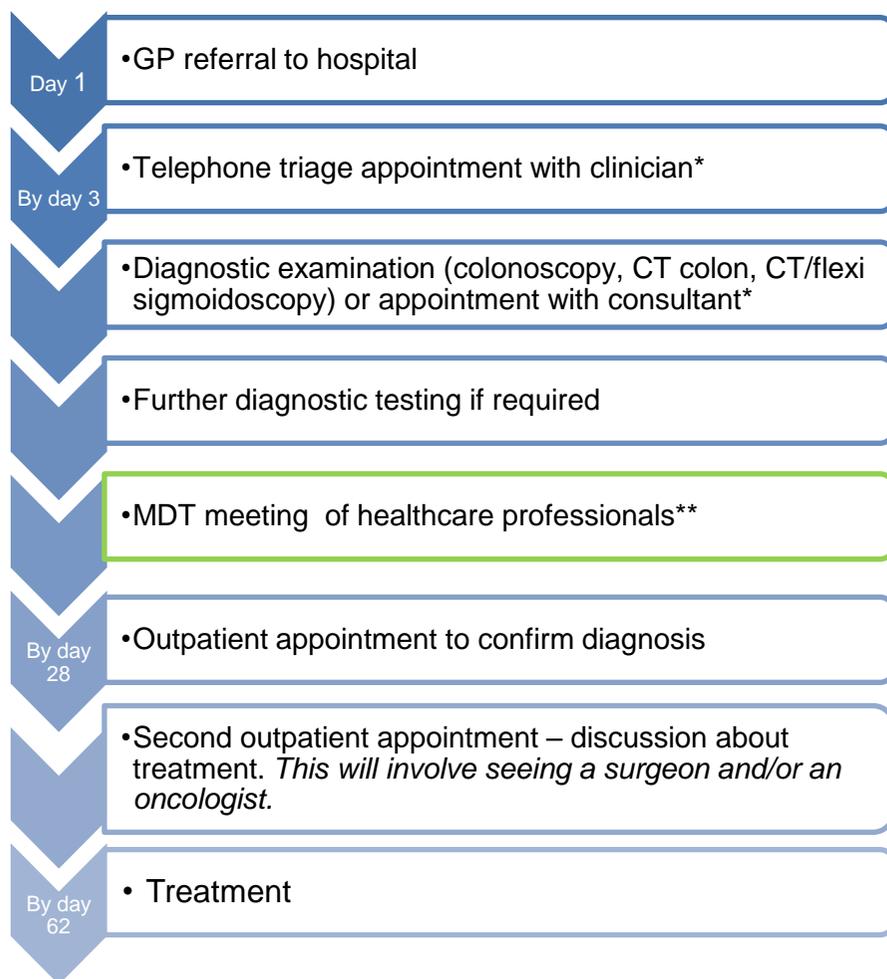
Date to be revised: January 2021

Designed in collaboration with NCEL Cancer Alliance

## Colorectal Pathway

The appointments and tests you need to have to examine your symptoms are described as a **pathway**.

This diagram shows the order of the appointments from referral to treatment. Most people will not need all of these tests, if cancer is ruled out early in the pathway.



\*this may include bowel preparation

\*\*You will not need to attend this

## Glossary

### Telephone Triage

A clinician will contact you by telephone at an agreed time and date. They will then discuss the reasons for your referral from your GP and will either book you into an appropriate diagnostic test or book you an appointment to see a consultant. This triaging appointment aims to speed up your pathway and make sure you do not attend any unnecessary appointments at the hospital.

### Colonoscopy

A colonoscopy is an examination to look at the lining of your whole large bowel, to see if there are polyps or a cancer within any part of it. A long flexible tube with a bright light and a tiny camera on the end is inserted through your back passage and enables the doctor or nurse to get a clear view of the bowel lining. During the test, if anything is seen that needs further investigation, photographs and samples (biopsies) can be taken. Simple polyps (non-cancerous growths) can be removed during a colonoscopy.

### Flexible – Sigmoidoscopy

Flexible sigmoidoscopy looks inside the rectum (back passage) and the lower part of the large bowel (sigmoid colon). This is where the majority of polyps (non-cancerous growths) and bowel cancers start. During this procedure, if the doctor or nurse sees anything that needs further investigation, samples (biopsies) can be taken for examination in the laboratory.

### CT colonography

CT Colonography (also known as virtual colonoscopy) involves using a CT scanner to produce x-ray images of the large bowel and rectum. This can be used for patients who are not suitable for regular colonoscopy due to other medical reasons. During the procedure, gas is used to inflate the bowel via a thin flexible tube placed in your back passage. CT scans are then performed with you lying on your back, and then on your front, to enable the doctors to get a clear set of scans of your bowel. You will be asked to hold your breath for approximately 20 seconds in both positions.

### CT scan

A computerised tomography (CT) scan uses X-rays and a computer to create detailed images of the inside of the body.

### MDT (Multi-disciplinary Team)

An MDT meeting is a meeting of the group of professionals who together make decisions regarding recommended treatment of individual patients. This includes professionals such as consultant oncologists, surgeons, specialist nurses and imaging specialists.  
*You do not need to attend this meeting.*

### Bowel Preparation

Bowel preparation for a colonoscopy is undertaken to clear the large bowel of faeces in order to ensure a clear view of the lining of the bowel during the procedure. Specific instructions for how to take the Bowel prep will be sent to you by the Endoscopy bookings team.