Including:

Rotherham NHS Foundation Trust’s Cancer Clinics

Referral Guidelines
Urgent Referral Proformas (2 week wait)

Palliative Care, Chemotherapy, Radiotherapy and Other Specialist Services

Support Groups

February 2010
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Appendix A – Referral form for suspected Neurological Cancer

Appendix B – Referral form for suspected Children’s & Adolescent Cancer
1. **INTRODUCTION**

This directory is intended for the use of healthcare professionals and provides details of the cancer Multidisciplinary Teams (MDTs) currently available at The Rotherham NHS Foundation Trust (TRFT).

The directory also incorporates guidelines and proformas for the urgent referral of patients with suspected cancer.

Details of where to send such referrals are also included. The directory will be updated on an annual basis.

**High Quality, Timely Cancer Care**

The Rotherham NHS Foundation Trust prides itself on providing high quality cancer care to patients in a timely manner.

The high quality and timeliness of our cancer services is evidenced by the Cancer Waiting Times achievement as well the North Trent Cancer Network Peer Review Reports. These can be viewed at [http://www.performance.doh.gov.uk/cancerwaits/](http://www.performance.doh.gov.uk/cancerwaits/) and [http://www.cquins.nhs.uk/published_reviews.php](http://www.cquins.nhs.uk/published_reviews.php) respectively.

Consequently, you can be assured that patients you refer to the Trust with suspected cancer will receive the highest quality cancer care, quickly.

**Choose and Book**

Patients are booked into virtual Clinical Assessment Clinics (CAS) and are then telephoned by appointments staff who negotiate a convenient appointment with the patient. Since the booking you make into the CAS clinic on the Choose and Book system is only a virtual booking, please ensure that you do not give the letter generated by the Choose and Book system for this virtual appointment to the patient since we have had instances of patients not properly reading the letter and arriving very early in the morning for virtual clinic appointments that do not exist.

We are now working hard to set up the systems and processes required to move to direct booking via Choose and Book for all patients referred with suspected cancer.

**Amendments or Comments**

If you have any amendments or further suggestions for inclusion in this Directory please contact:

Mrs Nicki Doherty, Lead Cancer Manager,
Earl of Scarbrough Macmillan Suite
Level D
The Rotherham NHS Foundation Trust
Moorgate Road
Rotherham, S60 2UD
Tel: 01709 307662
Email: nicki.doherty@rothgen.nhs.uk

February 2010
2.1 THE ROTHERHAM LOCALITY CANCER TEAM

**NHS Rotherham**
Dr John Radford; Director of Public Health
Dr Richard Cullen; Primary Care Cancer Lead
Keith Boughen; Planned Care Planning Lead (Cancer Commissioner)
Mike Ireland; Head of Contracting

**Rotherham NHS Foundation Trust**
Prof J A Lee; Director of Cancer Services
Sue Clenton; Lead Oncologist           Tel 01709 307629
Janine Birley; Macmillan Lead Cancer Nurse:    Tel 01709 307629
Nicki Doherty; Lead Cancer Manager:       Tel 01709 307667
3.1 BREAST DISEASE CLINICS AT THE ROTHERHAM NHS FOUNDATION TRUST

Referrals by fax to Miss M Donlon’s secretary:

**Combined Breast Clinic:** Fax: 01709 304180
Tel: 01709 304470

Alternatively, please book the patient into the appropriate virtual CAS clinic via Choose and Book and attach the relevant electronic referral proforma which has been uploaded to your practice’s computer system. All referral proformas must be attached to the virtual CAS booking within 24 hours of making the booking.

Locally agreed referral guidelines for suspected breast cancer are included in this section to assist you in making your referral.

**Breast Cancer Multidisciplinary Team**

Miss M Donlon (Surgeon) 01709 304470
Mr M. Al-Gailani (Surgeon) 01709 307507
Miss P. Dudani (Surgeon) 01709 304470
Dr M Hatton (Clinical Oncologist) 0114 2265080
Dr S Varkey (Radiologist) 01709 304547
Dr F Cooke (Radiologist) 01709 304547
Dr L Harvey (Histopathologist) 01709 304600
Miss M Fletcher (Breast Care Nurse) 01709 304725 & 304726
Mrs A Parkin (Breast Care Nurse) 01709 304725 & 304726
Mrs S Beard (Breast Care Nurse) 01709 304725 & 304726
Mrs C Barrass (Superintendent Radiographer Advanced Practitioner) 01709 304942
Mrs E Breckin (Radiographer) 01709 304362

**Breast Clinics:**

**Outpatient Reception G**  **Wednesday morning**

<table>
<thead>
<tr>
<th>Consultant</th>
<th>Secretarial</th>
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<tbody>
<tr>
<td>Miss M Donlon</td>
<td>Ms B Green</td>
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<tr>
<td>Miss P Dudani</td>
<td>Ms L Parkin</td>
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<tr>
<td>Mr M Al-Gailani</td>
<td>Ms A Jermy</td>
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**Outpatient Reception G**  **Wednesday afternoon**

<table>
<thead>
<tr>
<th>Consultants</th>
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<tbody>
<tr>
<td>Miss M Donlon</td>
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<tr>
<td>Mr M Al-Gailani</td>
<td>Ms A Jermy</td>
</tr>
<tr>
<td>Dr M Hatton</td>
<td>Miss K Allen</td>
</tr>
<tr>
<td>Miss P Dudani</td>
<td>Ms L Parkin</td>
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</tbody>
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**Breast Care Nurses**

Michelle Fletcher Clinical Nurse Specialist 01709 304726
Stephanie Beard Clinical Nurse Specialist 01709 304725
Ann Parkin Clinical Nurse Specialist 01709 307242
Rotherham Breast Clinic

Definition of Clinical Terms.

The following definitions apply to the entry of data on the Breast Database and consequently are used to determine the prior probability of outcomes for guidelines and policies.

**MASTALGIA:** either of the following.

1. **Pain:** Subjective expression of discomfort in the breast in the absence of stimulation to the area.

2. **Tenderness:** Subjective expression of discomfort in the breast on palpation of the area.

**PALPABLE ABNORMALITY:** any of the following.

1. **Lump:** Discrete, focal mass, usually palpable in the breast with the flat of the hand or palmar aspect of the digits.

2. **Thickening:** Discernible differences in consistency of the breast, in relation either to the remainder of the breast or the opposite breast.

3. **Nodularity:** Discernible nodule (<1cm) or nodules, palpable with the sensitive distal aspect of the digits, and not usually with the flat of the hand.

**DISCHARGE:** Fluid evident from the nipple(s), classified as either:

1. Spontaneous or evoked by compression,
2. bloody or not,
3. unilateral or bilateral and
4. single or multi-duct in origin.
Breast Cancer: Referral Guidelines for Suspected Cancer

*It is important that all referrals are faxed to 01709 304180.*

Breast Cancer: Guidelines for Urgent Referral

- Patients with a discrete lump in the appropriate age group (e.g. age >30)
- Signs which are highly suggestive of cancer such as:
  - Ulceration
  - Skin nodule
  - Skin distortion
  - Nipple eczema
  - Recent nipple retraction or distortion (< 3 months)
  - Unilateral nipple discharge which stains clothes

Conditions that require referral - but not necessarily urgently

- Discrete lump in a younger woman (e.g. age < 30 years)
- Asymmetrical nodularity that persists at review after menstruation
- Abscess
- Persistently refilling or recurrent cyst
- Intractable pain not responding to reassurance, simple measures such as wearing a well supporting bra and common drugs
- Nipple Discharge Age < 50 with bilateral discharge sufficient to stain clothes
- Age < 50 with bloodstained discharge
- Age > 50 with any nipple discharge

N.B. The Rotherham Hospital Breast Clinic would be happy to see any patients with breast problems. We aim to see all referrals within 2 weeks.

If you would like to discuss any problems with us,  
Please phone 01709 304470
3.2 COLORECTAL CANCER CLINICS AT THE ROTHERHAM NHS FOUNDATION TRUST

Referrals for urgent suspected colorectal cancers should be made by fax, using the included proforma to:

The Two Week Wait Office
Tel: 01709 307162
Fax: 01709 307163
Fax: 01709 307164

Alternatively, please book the patient into the appropriate virtual CAS clinic via Choose and Book and attach the relevant electronic referral proforma which has been uploaded to your practice’s computer system. All referral proformas must be attached to the virtual CAS booking within 24 hours of making the booking.

Referral guidelines for suspected colorectal cancer are included in this section to assist you in making your referral.

Colorectal Multidisciplinary Team

Mr M M Bassuini (Lead Clinician) 01709 304551
Miss M Mottahedeh (Surgeon) 01709 304551
Mr R Slater (Surgeon) 01709 307503
Dr J Garner (Surgeon) 01709 307503
Dr L Harvey (Histopathologist) 01709 304600
Dr P Spencer (Radiologist) 01709 304413
Dr J Hornbuckle (Clinical Oncologist) 01142 265073
Mrs J D’Silva (Nurse Consultant) 01709 307287
Sr E Cooper (Colorectal Nurse Specialist) 01709 307154
Dr P Bassumani (Consultant Gastroenterologist) 01709 307854
Ms. B. Hoeroldt (Consultant Gastroenterologist) 01709 307346
Dr P J Willemse (Consultant Gastroenterologist) 01709 304270
Mrs K Sukumar (Palliative Care Nurse Specialist) 01709 307180
Mrs R Ullah (MDT Co-ordinator) 01709 307687
Dr N H Choudhary (Lead Dietitian for Oncology Services) 01709 304291

Joint Colorectal Clinic:

Outpatients Reception G Friday morning
Consultant Secretarial
Mr M M Bassuini Mrs E Hughes 01709 304551
Miss M Mottahedeh Mrs E Hughes 01709 304551
Mr R Slater Miss S D’Silva 01709 307503
Dr J Hornbucke 01142 265073
Dr S Clenton 01142 265746

Colorectal Nurse Specialists:
Sr E Cooper 01709 307154

Stoma Specialist Nurse:
Sr K Barlow 01709 307154

Macmillan Specialist Nurses:
Mrs K Sukumar, Mrs A Harriman, Mr W Greenwood 01709 307180
Colorectal Endoscopy Sessions
Main Endoscopy Session  Friday All day (parallel to Colorectal Clinic)
Mr M M Bassuini  Tuesday PM (alternate weeks)
Miss M Mottahedeh  Tuesday PM (alternate weeks)
Mr R Slater  Monday AM
Mrs J D’Silva  Every day

Colorectal Cancer: Guidelines for Urgent Referral

It is recommended that these symptom and sign combinations WHEN OCCURRING FOR THE FIRST TIME should be used to identify patients for urgent referral under the two week standard.

- Rectal bleeding WITH a change in bowel habit to looser stools and/or increased frequency of defecation persistent for 6 weeks. Age Threshold: All ages
- A definite palpable right-sided abdominal mass. All ages
- A definite palpable rectal (not pelvic) mass. All ages
- Iron deficiency anaemia WITHOUT an obvious cause (Hb < 11 g/dl in men or < 10 g/dl in postmenopausal women). Any age
- Rectal bleeding persistently WITHOUT anal symptoms.* Over 60 yrs†
- Change of bowel habit to looser stools and/or increased frequency of defecation, WITHOUT rectal bleeding and persistent for six weeks. Over 60 yrs†

NB. Patients with the following symptoms and no abdominal or rectal mass are at very low risk of cancer:

- Rectal bleeding with anal symptoms.*
- Change in bowel habit to decreased frequency of defecation and harder stools.
- Abdominal pain without clear evidence of intestinal obstruction.

Bowel Screening
Specialist Screening Practitioner is Maxine Webster

* Anal symptoms include soreness, discomfort, itching, lumps and prolapse as well as pain.
† Age 60 years is considered to be the maximum age threshold. Local Cancer Networks may elect to set a lower age threshold (e.g. 55 years or 50 years)
3.3 GYNAECOLOGY CANCER CLINICS AT THE ROTHERHAM NHS FOUNDATION TRUST

Referrals for urgent suspected gynaecological cancers should be made by Fax, using the included proforma to:
The Two Week Wait Office
Tel: 01709 307162
Fax: 01709 307163  Fax: 01709 307164
Alternatively, please book the patient into the appropriate virtual CAS clinic via Choose and Book and attach the relevant electronic referral proforma which has been uploaded to your practice’s computer system. All referral proformas must be attached to the virtual CAS booking within 24 hours of making the booking.

Locally agreed referral guidelines for suspected gynaecological cancer are included in this section to assist you in making your referral.

Gynaecological Cancer Multidisciplinary Team
Mr C S Ramsden  (Lead Clinician)  01709 304193
Mr H N Lotfallah  (Gynaecologist)  01709 304610
Dr R Gosakan  (Gynaecologist)  01709 304324
Mr R Faraj  (Gynaecologist)  01709 304191
Dr A Hussein  (Histopathologist)  01709 304600
Dr L Chua  (Radiologist)  01709 307116
Sr C Dawson  (Gynaecology-Oncology Clinical Nurse Specialist)  01709 307302

All patients referred with a suspected gynaecological cancer will be sent appointments in the Gynaecology Outpatients, the Colposcopy Clinic or the Hysteroscopy Clinic as appropriate.

Each patient will be sent information regarding their appointment details and the relevant patient information sheet regarding investigation.

Gynaecology OPD Clinics  Greenoaks (situated behind the main hospital in the grounds near the Day Surgery Centre)
Consultant  Secretarial
Monday afternoon
Mr C S Ramsden  Miss R Malt  01709 304193
Wednesday afternoon
Dr R Gosakan  Mrs S Hanby  01709 304324
Thursday afternoon
Mr H N Lotfallah  Mrs K Coles/Mrs C Simms  01709 304610
PMB Clinic  Endoscopy Unit (Level C – main hospital)
Mr H N Lotfallah  Tuesday afternoon
Hysteroscopy Clinic  Endoscopy Unit (Level C – main hospital)
Dr R Gosakan  Wednesday morning
Colposcopy Clinic  Endoscopy Unit (Level C – main hospital)
Dr R Gosakan  Thursday morning
Mr H N Lotfallah  Monday afternoon
Mrs S Ibbotson* / Sr C Nelson**  Tuesday morning
* Nurse Consultant
** Nurse Practitioner
Gynaecological Cancer: Guidelines for Urgent Referral

- Patients found on examination of the cervix to have clinical features that raise the suspicion of cervical cancer

- Any woman with a palpable abdominal or pelvic mass that is not obviously uterine fibroids or not of gastrointestinal or urological origin should have an urgent ultrasound scan. If the scan is suggestive of cancer, or if ultrasound is not available, an urgent referral should be made.

- A woman, not on hormone replacement therapy, presents with postmenopausal bleeding

- A woman, on hormone replacement therapy, presents with persistent or unexplained postmenopausal bleeding after cessation of hormone replacement therapy for 6 weeks

- When a woman taking Tamoxifen presents with postmenopausal bleeding

- A woman has persistent intermenstrual bleeding and a negative pelvic examination

- An unexplained vulval lump is found upon vulval examination of a woman with vulval symptoms

- Vulval bleeding due to ulceration
3.4 HEAD AND NECK CANCER CLINICS AT THE ROTHERHAM NHS FOUNDATION TRUST

Referrals for urgent suspected head & neck cancers should be made by Fax, using the included proforma, or by telephone to:

The Two Week Wait Office
Tel: 01709 307162
Fax: 01709 307163
Fax: 01709 307164
Alternatively, please book the patient into the appropriate virtual CAS clinic via Choose and Book and attach the relevant electronic referral proforma which has been uploaded to your practice’s computer system. All referral proformas must be attached to the virtual CAS booking within 24 hours of making the booking.

The National Referral Guidelines for Suspected Head & Neck Cancer are included in this section to assist you in making your referral.

Head & Neck Cancer Multidisciplinary Team
(Rotherham team members listed below are part of a single Head and Neck MDT for the North Trent Cancer Network)
Mr A Patterson (Lead Clinician) 01709 304459
Mr S Richards (Head and Neck Surgeon) 01709 304558
Dr P Spencer (Radiologist) 01709 304413
Sr J Lunn (Head and Neck Clinical Nurse Specialist) 01709 304205

Clinics
Wednesday morning  Out Patients Reception D
Fast track neck/thyroid lump clinic.
Consultant  Secretarial
Mr S Richards  Miss S Moores  01709 304558

Monday afternoon  Out Patients Reception D
Head & Neck Clinic  Neck / Thyroid Lump
Consultant  Secretarial
Mr S Richards  Miss S Moores  01709 304558
Mr A Patterson  Mrs S Proctor  01709 304459

Macmillan Specialist Nurses
Mrs K Sukamar, Mrs A Harriman & Mr W Greenwood  01709 307180

Dietician
Mrs C Denning  01709 304291
Miss D Stephen  01709 304297

Speech Therapist
Miss S Dent  01709 304941
Head & Neck Cancer: Guidelines for Urgent Referral

- Hoarseness persisting for > 6 weeks.
- Ulceration of oral mucosa persisting for > 3 weeks.
- Oral swellings persisting for > 3 weeks.
- All red or red and white mixed patches of the oral mucosa.
- Dysphagia persisting for 3 weeks.
- Unilateral nasal obstruction particularly when associated with purulent discharge.
- In patients with unilateral unexplained pain in the head and neck area for more than 4 weeks, associated with otalgia but with normal otoscopy, an urgent referral should be made.
- In patients with unexplained tooth mobility persisting for more than three weeks an urgent referral to a dentist should be made
- Unresolving neck masses for > 3 weeks.
- Orbital masses.

The level of suspicion is further increased if the patient is a heavy smoker or heavy alcohol drinker and is aged over 45 years and male. Other forms of tobacco use (chewing Betel, Gutkha, Pan) should also arouse suspicion.
3.5 LUNG CANCER CLINIC AT THE ROTHERHAM NHS FOUNDATION TRUST

Referrals for urgent suspected lung cancers should be made by Fax, using the included proforma, or telephone to:
The Two Week Wait Office
Tel:  01709 307162
Fax:  01709 307163  Fax:   01709 307164
Alternatively, please book the patient into the appropriate virtual CAS clinic via Choose and Book and attach the relevant electronic referral proforma which has been uploaded to your practice’s computer system. All referral proformas must be attached to the virtual CAS booking within 24 hours of making the booking.

The National Referral Guidelines for Suspected Lung Cancer are included in this section to assist you in making your referral.

Patients will be seen within two weeks and an investigation plan agreed. This might include a CT scan and bronchoscopy at the first appointment.

Lung Cancer Multidisciplinary Team
Dr N Qureshi  (Lead Clinician)  01709 307168
Dr P Bardsley  (Physician)  01709 304154
Dr G Basran  (Physician)  01709 304159
Dr J M Murali  (Clinical Oncologist)  0114 2265092
Mr T J Locke  (Cardiothoracic Surgeon)  0114 2266811
Dr S Varkey  (Radiologist)  01709 304547
Prof. J A Lee  (Histopathologist)  01709 304119
Mrs J Roberts  (Lung Cancer Nurse)  01709 304727
Mrs S Davies  (Lung Cancer Nurse)  01709 307180
Mrs K Sukumar  (Macmillan Nurse)  01709 307180
Mrs A Harriman  (Macmillan Nurse)  01709 307180
Mr W Greenwood  (Macmillan Nurse)  01709 307180

Joint Lung Oncology Clinic   Wednesday morning   Reception A
Consultants   Secretarial
Dr N Qureshi  Mrs J M Brighelli  01709 307168
Dr J M Murali  0114 2265092
Mr T J Locke  0114 2266811

Outpatients – One Stop Chest Clinic   Monday, Tuesday, Thursday & Friday
Consultants   Secretarial
Dr N Qureshi  Mrs J M Brighelli  01709 307168

Specialist Lung Cancer Nurses
Mrs S Davies  01709 304727
Mrs J Roberts  01709 304727
The Lung Cancer Nurse Specialists work as part of the Lung MDT and are able to provide information about different types of treatment as well as emotional and psychological support to patients and their families.

Macmillan Specialist Nurses
Ms K Sukumar, Mrs A Harriman & Mr W Greenwood  01709 307180

Dietitian
Dr N H Choudhary  01709 304291
LUNG CANCER REFERRAL GUIDELINES (Based on NICE Guidelines)

An urgent referral for a chest x-ray should be made when a patient presents with:-

- Haemoptysis, or
- Any of the following unexplained persistent (that is, lasting more than 3 weeks) symptoms and signs:-
  - Chest and/or shoulder pain
  - Breathlessness
  - Weight loss
  - Chest signs
  - Hoarseness
  - Finger clubbing
  - Cervical and/or supraclavicular lymphadenopathy.
  - Cough with or without any of the above.
  - Features suggestive of metastases from a lung cancer (for example, in brain, bone, liver or skin).

An urgent referral to the Two Week Wait Office should be made for either of the following:-

- Persistent haemoptysis in smokers or ex-smokers who are aged 40 years and older.
- A chest x-ray suggestive of lung cancer (including pleural effusion and slowly resolving consolidation).

Immediate referral to the Two Week Wait Office should be considered for the following:-

- Signs of superior vena cava obstruction (swelling of the face and/or neck with fixed elevation of jugular venous pressure).
- Stridor.

It would be helpful to send a blood sample for U&Es at the time of the referral. This is needed so that a CT scan with contrast can be given if indicated at the clinic visit (avoiding unnecessary delay).
3.6 Lymphoma & Haematology Malignancies at The Rotherham NHS Foundation Trust

Referrals for urgent suspected lymphoma should be made by Fax, using the included proforma to:

The Two Week Wait Office
Tel: 01709 307162
Fax: 01709 307163
Fax: 01709 307164

Alternatively, please book the patient into the appropriate virtual CAS clinic via Choose and Book and attach the relevant electronic referral proforma which has been uploaded to your practice’s computer system. All referral proformas must be attached to the virtual CAS booking within 24 hours of making the booking.

The National Referral Guidelines for Suspected Lymphoma are included in this section to assist you in making your referral.

Lymphoma Multidisciplinary Team
(Rotherham team members listed below are part of a single Haemat-Oncology MDT for the North Trent Cancer Network)

Dr P C Taylor (Lead Clinician) 01709 307111
Dr H Barker (Consultant Haematologist) 01709 304720
Dr F Hiwaizi (Locum Consultant Haematologist) 01709 30 4188
Dr S Varkey (Radiologist) 01709 304413
Prof. J A Lee (Histopathologist) 01709 304119
Mrs M Ward Haematology Clinical Nurse Specialist 01709 304170

Clinic Details:

Tuesday afternoon & Wednesday morning
Consultant  Secretarial
Dr H F Barker  Mrs S Ward 01709 307112
Mrs Trisha Astbury 01709 307119
Fax: 01709 830694

Wednesday morning & Thursday afternoon
Consultant  Secretarial
Dr P C Taylor  Mrs S Ward 01709 307112
Mrs Trisha Astbury 01709 307119
Fax: 01709 830694

Monday morning, Tuesday afternoon, Wednesday morning, Thursday afternoon
Consultant  Secretarial
Dr F Hiwaizi  Mrs S Ward 01709 307112
Mrs Trisha Astbury 01709 307119
Fax: 01709 830694
Haematological Malignancies: Guidelines for Urgent Referral

- Blood count/film reported as suggestive of acute leukaemia or chronic myeloid leukaemia.
- Lymphadenopathy (> 1 cm) persisting for 6 weeks.
- Hepatosplenomegaly.
- Bone pain associated with anaemia and a raised ESR (or plasma viscosity).
- Bone x-rays reported as being suggestive of myeloma.
- CT or MRI scan showing nodal hypertrophy reported as suggestive of lymphoma.
- Constellation of 3 or more of the following symptoms:
  - Fatigue,
  - Drenching night sweats,
  - Weight loss,
  - Generalised itching,
  - Breathlessness,
  - Bruising,
  - Recurrent infections,
  - Bone pain.
  - Fever
  - Bleeding
  - Alcohol induced pain
  - Abdominal pain
  - Lymphadenopathy
  - Splenomegaly

If you are considering referral of a patient whom you think has a haematological malignancy, Dr Taylor or Dr Barker would always be keen to encourage telephone conversation regarding the details of the case to facilitate both the most appropriate and the speediest referral.
3.7 Skin Cancer Clinics at The Rotherham NHS Foundation Trust

Referrals for urgent suspected skin cancer should be made by Fax, using the included proforma to:

The Two Week Wait Office
Tel: 01709 307162  Fax: 01709 307163  Fax: 01709 307164

Alternatively, please book the patient into the appropriate virtual CAS clinic via Choose and Book and attach the relevant electronic referral proforma which has been uploaded to your practice’s computer system. All referral proformas must be attached to the virtual CAS booking within 24 hours of making the booking.

Please note that Basal Cell Carcinoma is not included in the Two Week Wait for Suspected Skin Cancers

The National Referral Guidelines for Suspected Skin Cancer are included in this section to assist you in making your referral.

Skin Cancer Multidisciplinary Team:
Dr A Muncaster  (Lead Clinician)  01709 307289
Dr M L Wood  (Dermatologist)  01709 304160
Prof. J Lee  (Histopathologist)  01709 304119
Dr Murali  (Clinical Oncologist)  0114 226 5092
Mr R F Crosher  (Oral & Maxillofacial Surgeon)  01709 307296
Mr A Patterson  (Oral & Maxillofacial Surgeon)  01709 304459
Mr. J. Rochester  (General Surgeon)  01709 304574
SpN R Mellows  (Nurse Specialist)  01709 304735
Mrs D. Wagstaff  (MDT Co-ordinator)  01709 307185

Clinics
Dermatology Outpatients Department

Urgent Skin Cancer Clinics  (Specialist Nurse in attendance)

Consultant  Secretarial
Thursday morning
Dr A Muncaster  Mrs G McClean  01709 307289

Wednesday morning
Locum Consultant  Miss K Richardson  01709 304161

Friday morning
Dr M L Wood  Mrs J Pearson  01709 304160

Multidisciplinary Skin Oncology Clinic (Tertiary referrals only)
Every Thursday  (from April 2010 – fortnightly until April 2010)

Consultant  Secretarial
Dr A Muncaster  Mrs G McClean  01709 307289
Locum Consultant  Miss K Richardson  01709 304161
Dr M L Wood  Mrs J Pearson  01709 304160
Mr R F Crosher  Mrs J Ramsden  01709 307296
Mr A Patterson  Ms S Proctor  01709 304459
Mr. J. Rochester  Mrs. P. Bell  01709 304574
Dr O. Murali  01142 265092

Specialist Nurse
Rowena Mellows  01709 304735
Skin Cancers: Guidelines for Urgent Referral
(Amended by Rotherham General Hospitals NHS Trust)

A. Malignant Melanoma

- Pigmented lesions on any part of the body which have one or more of the following features:
  - Growing in size
  - Changing shape
  - Irregular outline
  - Changing colour
  - Mixed colour
  - Ulceration
  - Inflammation

**NB.** Malignant melanomas are usually 5mm or greater at the time of diagnosis, but a small number of patients with very early malignant melanoma may have lesions of a smaller diameter than this.

B. Squamous Cell Carcinoma

- Slowly enlarging, non-healing lesions which may be crusted, ‘warty’ ‘eroded’ or indurated (commonly on face, scalp, back of hand) with growth over a period of 1 – 2 months.

- Patients in whom invasive squamous cell carcinoma has been diagnosed from a biopsy undertaken in general practice but refer at outset rather than biopsy if clinically suspicious.

- Such individuals who are therapeutically immuno suppressed after an organ transplant have a high incidence of skin cancers mainly squamous cell carcinoma and these tumours can be unusually aggressive and metastasise. Transplant patients who develop new or growing cutaneous lesions should be referred under the two week standard.

**PLEASE NOTE THAT BASAL CELL CARCINOMA IS NOT INCLUDED IN THE TWO WEEK WAIT FOR SUSPECTED SKIN CANCERS**

Basal Cell Carcinomas are not referred in via a 2 week wait route. There is a clinic for these routine patients that can be booked via the electronic Choose and Book System.
3.8 UPPER GASTROINTESTINAL CANCER CLINICS AT THE ROTHERHAM NHS FOUNDATION TRUST

Referrals for urgent suspected upper GI cancers should be made by Fax, using the included proforma to:

The Two Week Wait Office
Tel: 01709 307162
Fax: 01709 307163
Fax: 01709 307164

Alternatively, please book the patient into the appropriate virtual CAS clinic via Choose and Book and attach the relevant electronic referral proforma which has been uploaded to your practice’s computer system. All referral proformas must be attached to the virtual CAS booking within 24 hours of making the booking.

Referral guidelines for suspected upper GI cancer are included in this section to assist you in making your referral.

Upper GI Cancer Multidisciplinary Team

Mr M M Lambertz  (Lead Clinician)  01709 307165
Mr J C Cooper  (Surgeon)  01709 304779
Dr P Willemsé  (Gastroenterologist)  01709 304270
Dr B Forgacs  (Radiologist)  01709 304544
Prof J A Lee  (Histopathologist)  01709 304119
Dr L Harvey  (Histopathologist)  01709 304593
Dr J Hornbuckle  (Clinical Oncologist)  0114 2265083
Dr S Clinten  (Clinical Oncologist)  01142 265746
Ms C Garrison  (Nurse Specialist)  01709 304077
Mrs L Burns  (MDT Coordinator)  01709 307691

New Patients Clinics:

Outpatient Reception A  Monday afternoon

Outpatient Reception D  Friday morning
Consultant  Mr M M Lambertz  Secretarial  Ms H Drury  01709 307165

Outpatient Reception A  Thursday morning
Consultant  Mr J C Cooper  Secretarial  Mrs V Keelan  01709 304779

Nurse-Led Follow-up Clinic:

Outpatient Reception A  Monday afternoon

Endoscopy Suite  Monday morning
Consultant  Mr M M Lambertz  Secretarial  Ms H Drury  01709 307165

Macmillan Palliative Care Specialist Nurses:
Mrs A Harriman, Mrs K Sukumar & Mr W Greenwood  01709 307180

Dietician
Dr Nasir Choudhary  01709 304291
Upper GI Cancers: Guidelines for Urgent Referral

- Dysphagia – food sticking on swallowing (any age)

- Dyspepsia at any age combined with one or more of the following ‘alarm’ symptoms:
  - Weight loss
  - Proven anaemia
  - Vomiting

- Dyspepsia in a patient aged 55 years* or more with at least one of the following ‘high risk’ features:
  - Onset of dyspepsia less than one year ago
  - Continuous symptoms since onset

- Dyspepsia combined with at least one of the following known risk factors:
  - Family history of Upper GI cancer in more than 2 first degree relatives
  - Barrett’s oesophagus
  - Pernicious anaemia
  - Peptic ulcer surgery over 20 years ago
  - Known dysplasia, atrophic gastritis, intestinal metaplasia
  - Jaundice
  - Upper abdominal mass

* Age 55 years is considered to be the maximum age threshold. Local Cancer Networks may elect to set a lower age threshold (e.g. 50 years or 45 years).
3.9 UROLOGICAL CANCER CLINICS AT THE ROTHERHAM NHS FOUNDATION TRUST

Referrals for urgent suspected urological cancers should be made by Fax, using the included proforma, or by telephone to:
The Two Week Wait Office
Tel: 01709 307162
Fax: 01709 307163  Fax: 01709 307164
Alternatively, please book the patient into the appropriate virtual CAS clinic via Choose and Book and attach the relevant electronic referral proforma which has been uploaded to your practice’s computer system. All referral proformas must be attached to the virtual CAS booking within 24 hours of making the booking.

The National Referral Guidelines for Suspected Urological Cancer are included in this section to assist you in making your referral.

Urological Cancer Multidisciplinary Team
Mr Z Abbasi (Lead Clinician) 01709 304552
Mr B T Parys (Urological Surgeon) 01709 304061
Mr I Edhem (Urological Surgeon) 01709 307239
Prof. J A Lee (Histopathologist) 01709 304119
Dr A Hussein (Histopathologist) 01709 304600
Dr P Spencer (Radiologist) 01709 304413
Dr O Din (Clinical Oncologist) 01142 265077
Jan Farrell (Nurse Specialist) 01709 304584
Denise Foulds (Nurse Specialist) 01709 304584
Michelle Brailsford (Nurse Practitioner) 01709 304584
Jenny Lynock (Nurse Practitioner) 01709 307255

Urology Clinics:
Monday morning  Uro-Oncology Clinic  Scarborough Suite
Consultant  Secretarial
Mr Z Abbasi  Mrs M Milner 01709 304552

Monday morning, Tuesday afternoon, Thursday morning  Dept. of Urology
Consultant  Secretarial
Mr I Edhem  Mrs S Dearing 01709 307239

Tuesday morning, Wednesday morning, Thursday afternoon  Dept. Of Urology
Consultant  Secretarial
Mr B T Parys  Mrs D Brown 01709 304061

Thursday afternoon  Dept. of Urology
Consultant  Secretarial
Mr Z Abbasi  Mrs M Milner 01709 304552

Flexible Cystoscopies  Endoscopy Suite
Monday morning
Consultant  Secretarial
Mr B T Parys  Mrs D Brown 01709 304061

Thursday morning
Consultant  Secretarial
Mr Z Abbasi  Mrs M Milner 01709 304552

Friday morning
Consultant  Secretarial
Mr I Edhem  Mrs S Dearing 01709 307239
Urological Cancers: Guidelines for Urgent Referral

- Macroscopic haematuria in adults.
- Microscopic haematuria in adults over 50 years.
- Swellings in the body of the testis.
- Palpable renal masses.
- Solid renal masses found on imaging.
- An elevated age specific PSA in men with a ten year life expectancy.
- A high PSA (> 20ng/ml) in men with a clinically malignant prostate or bone pain.
- Any suspected penile cancer.

PSA testing of asymptomatic men or screening for prostate cancer is not national policy. It is recommended that a PSA test, except in men clinically suspicious of prostate cancer should only be performed after full counselling and provision of written information.
4.1 BRAIN / CNS TUMOUR REFERRAL GUIDELINES

Referrals for urgent suspected brain/CNS tumours should be made by Fax, using the appropriate Proforma attached as an appendix to this document to Sheffield Teaching Hospitals NHS Trust (Royal Hallamshire Hospital)

Fax : 0114 226 8795

The National Referral Guidelines for Suspected Brain/CNS Tumours are included in this section to assist you in making your referral.

Patients will either be seen at Sheffield Teaching Hospitals or at The Rotherham NHS Foundation Trust in one of the following clinics:

General Neurology Clinics:

**Tuesday morning – Outpatient Reception A**

<table>
<thead>
<tr>
<th>Consultant</th>
<th>Secretarial</th>
<th>Telephone</th>
<th>Fax</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr N Jordon</td>
<td></td>
<td>01709 307228</td>
<td>01709 307238</td>
</tr>
<tr>
<td>Dr S E Price</td>
<td></td>
<td>01709 304749</td>
<td>01709 307113</td>
</tr>
</tbody>
</table>

**Thursday afternoon – Outpatient Reception B**

<table>
<thead>
<tr>
<th>Consultant</th>
<th>Secretarial</th>
<th>Telephone</th>
<th>Fax</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr S E Price</td>
<td></td>
<td>01709 304749</td>
<td>01709 307113</td>
</tr>
</tbody>
</table>

**Brain Tumours: Guidelines for Urgent Referral**

- Subacute progressive neurological deficit developing over days to weeks (e.g. weakness, sensory loss, dysphasia, ataxia).

- New onset seizures characterised by one or more of the following:
  - Focal seizures
  - Prolonged post-ictal focal deficit (longer than one hour)
  - Status epilepticus
  - Associated inter-ictal focal deficit

- Patients with headache, vomiting and papilloedema.

- Cranial nerve palsies (e.g. diplopia, visual failure including optician defined visual field loss, unilateral sensorineural deafness).

**Consider urgent referral for:**

- Patients with non-migrainous headaches of recent onset, present for at least one month, when accompanied by features suggestive of raised intra cranial pressure (e.g. woken by headache; vomiting; drowsiness). Not typical of migraine.

**NB.** This last guideline is intended to provide the primary care physician with the discretion to decline urgent referral if there are other known features (e.g. depression, somatisation disorder) making a diagnosis of brain tumour very unlikely.
4.2 CHILDREN’S & ADOLESCENT TUMOURS

Referrals for urgent suspected children’s and adolescent tumours should be made by Fax, using the appropriate proforma attached as an appendix to this document to Sheffield Children’s Hospitals NHS Trust

Fax: 0114 226 7874

The National Referral Guidelines for Suspected Brain/CNS Tumours are included in this section to assist you in making your referral.

Cancer 2 Week Wait Referrals For Out Patient Appointments

Procedure For General Practitioners

Sheffield Children’s NHS Foundation Trust guarantees that all patients referred to this hospital with a suspicion of malignancy will receive an appointment to be seen within 14 days of the date of referral. This note is intended to give General Practitioners guidance on the procedures to be followed. All referrals made in this way are brought to an appropriate consultant on the day of arrival. The consultant will advise which clinic they should be seen in. In many cases these referrals are seen in a general paediatric medical or surgical clinic first within the time required of this system.

Suspicion Of Cancer Referral Form
This Trust uses a referral form specifically designed to provide clinicians with as much relevant information regarding the referral as possible. A copy of the referral form is attached as an appendix to this document. You are requested to complete the referral form as fully as possible, ensuring that the demographic details of the patient are correct and up to date. It is important to include a contact telephone number for the patient where possible. The completed form should be FAXED to the following telephone number: 0114 2267874

What You Can Expect From Us
You can expect us to take the following actions on receipt of a referral for suspected cancer:
- We will take the referral by hand to an appropriate cancer specialist.
- We will agree an appointment with the patient which will be within 14 days of the date of the decision to refer.
- We will contact the referring General Practitioner, by telephone, to advise him/her of the date of the appointment.

DNA’S
If a patient does not attend their first outpatient appointment (DNA), we will contact the patient to offer a new appointment which will be within 14 days of the date of the original appointment. We will contact the referring General Practitioner to advise him/her of the new appointment. If the patient subsequently DNA’s the second appointment we will discharge the patient back to the care of the GP.

Suspicion Of Cancer Referrals And Choose & Book
We receive an average of less than 4 suspected cancer referrals each month in all specialties. This means that there is not a requirement, unlike most Trusts, to have specific 2 week wait cancer referral clinics or designated appointment slots on PAS. For this reason, GP’s should not use Choose and Book for suspicion of cancer referrals.
The alternative method of referral is to refer directly to a consultant oncologist or haematologist by letter or fax. It is however, often helpful to discuss cases on the telephone to ensure they are seen in the appropriate clinic or outside a routine clinic if more urgent.

The consultant staff are:

Dr Mary Gerrard  Consultant Paediatric Oncologist  - Solid tumours (including lymphomas)
Prof Ajay Vora  Consultant Paediatric Haematologist - Leukaemia and Transplant
Dr Jenny Welch  Consultant Paediatric Haematologist - Leukaemia and Haemoglobinopathies/red cell disorders
Dr Jeanette Payne  Consultant Paediatric Haematologist - Leukaemia and Haemophilia/bleeding disorders and thrombosis
Dr Vicki Lee  Consultant Paediatric Oncologist  - Brain tumours, Bone tumours, Retinoblastomas
Dr Anna Jenkins  Consultant Paediatric Oncologist  - Late effects
Dr Dan Yeomanson  Locum Consultant Paediatric Oncologist covering maternity leave

You can access the consultant medical staff by telephoning Sheffield Children’s Hospital on 0114 271 7000 and requesting switch board to bleep the doctor you wish to speak to. In normal working hours the Consultant on call may direct you to a colleague who may be the most appropriate consultant for a direct referral. Out of working hours acute referrals are taken by the on call consultant.
Children’s Tumours: Guidelines for Urgent Referral

a) Abnormal blood count
If reported as requiring urgent further investigation.

b) Petechiae/Purpura
These findings are always an indication for urgent investigation.

c) Fatigue
In a previously healthy child when combined with either of the following:
- Generalised lymphadenopathy
- Hepatosplenomegaly

d) Bone Pain
Especially if it is:
- Diffuse or involves the back.
- Persistently localised at any site.
- Requiring analgesia.
- Limiting activity.

e) Lymphadenopathy
More frequently benign in younger children but referral is advised if one or more of the following characteristics are present, particularly if there is no evidence of previous local infection:
- Non tender, firm/hard and > 3cms in maximum diameter.
- Progressively enlarging.
- Associated with other signs of general ill health, fever and/or weight loss.
- Involves axillary nodes (in the absence of any local infection or dermatitis) or supraclavicular nodes.
- Seen as a mediastinal or hilar mass on chest x-ray.

f) Headache
Of recent origin with one or more of the following features:
- Increasing in severity or frequency.
- Noted to be worse in the mornings or causing early wakening.
- Associated with vomiting.
- Associated with neurological signs (e.g. squint, ataxia).
- Associated with behavioural change or deterioration in school performance.

g) Soft Tissue Mass
Any mass which occurs in an unusual location should be considered suspicious particularly if associated with one or more of the following characteristics:
- Shows rapid or progressive growth.
- Size > 3cms in maximum diameter.
- Fixed or deep to fascia.
- Associated with regional lymph node enlargement.
4.3 SARCOMA REFERRAL GUIDELINES

Referrals for urgent suspected sarcoma should be made by Fax, using the included proforma, or by telephone to:
The Two Week Wait Office
Tel: 01709 307162
Fax: 01709 307163
Fax: 01709 307164

Sarcomas are malignant neoplasms of mesodermal origin and are subdivided into those from bone and soft tissue.

A. Soft Tissue Sarcomas:

A mass in the soft tissues often with the following features:

- Larger size, often >5cm
- Deep to the deep fascia, especially around the girdles where most of the mesodermal tissue is situated.
- Recent increase in size or pain (Lumps can be painless)
- Recurrence of a mass after previous excision.
- Fixity to adjacent structures or lack of mobility.
- Older age groups (>50 years of age).
- Association with neurofibromatosis.

B. Patients with radiological suspicion of a primary bone tumour based on evidence of bone destruction, new bone formation, soft tissue swelling and periosteal elevation.
5. VISITING CLINICAL ONCOLOGISTS  
(From Weston Park Hospital)

There are four visiting consultants to the Rotherham District General Hospital. They each offer site-specialisation. They can be contacted at Weston Park Hospital and are happy to discuss cases on the telephone. (See also the references to individual Multidisciplinary Teams)

<table>
<thead>
<tr>
<th>Consultants</th>
<th>Specialisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Matthew Hatton</td>
<td>Breast</td>
</tr>
<tr>
<td>Tel: 0114 226 5244</td>
<td></td>
</tr>
<tr>
<td>Email: <a href="mailto:matthew.hatton@sth.nhs.uk">matthew.hatton@sth.nhs.uk</a></td>
<td></td>
</tr>
</tbody>
</table>

| Dr Omar Din        | Urology          |
| Tel: 0114 226 5090 |                  |
| Email: omar.din@sth.nhs.uk |        |

| Dr J Hornbuckle   | Colorectal       |
| Tel: 01142 265747 |                  |
| Email: Joanne.Hornbuckle@sth.nhs.uk |    |

| Dr S Clenton      | Colorectal       |
| Tel: 0114 2265746 |                  |
| Email: Susan.Clenton@sth.nhs.uk |    |

| Dr J Murali       | Lung/Skin        |
| Tel: 01142 265092 |                  |
| Jayaram.mohanamurali@sth.nhs.uk |    |
6. SUPPORT SERVICES

**Lung Cancer Nurse Specialists**
Leone Green
Josie Roberts
Tel: 01709 304727

**Dermatology Nurse Specialist – Skin Cancer**
Rowena Mellows
Tel: 01709 304735

**Breast Care Nurse Specialists**
Michelle Fletcher
Stephanie Beard
Ann Parkin
Tel: 01709 304726
Tel: 01709 304725
Tel: 01709 307242

**Colorectal Nurse Specialist**
Elizabeth Cooper
Tel: 01709 307154

**Urology Nurse Specialists**
Jan Farrell (Nurse Specialist)
Denise Foulds (Nurse Specialist)
Michelle Brailsford (Nurse Practitioner)
Tel: 01709 304584
Tel: 01709 304584
Tel: 01709 304584

**Clinical Nurse Specialist – Haematology**
Maddie Ward
Tel: 01709 304170

**Gynaecology-Oncology Clinical Nurse Specialist**
Catherine Dawson
Tel: 01709 307302

**Upper GI Clinical Nurse Specialist**
Christine Garrison
Tel: 01709 304077

**Head and Neck Clinical Nurse Specialist**
Judith Lunn
Tel: 01709 304205
Referrals to be made by telephone.

**Macmillan Cancer Information and Support Manager**
Paula Lowson
Tel: 01709 307659
7. ROTHERHAM REHABILITATION SERVICES

TRFT = The Rotherham Foundation Trust  
NHSR = NHS Rotherham

Nutrition and Dietetic Services

Manager:
Mrs J Ward  
Tel: 01709 304297

Lead Dietician for Oncology Services:
Dr Nasir Choudhary  
Tel: 01709 304291

Comprehensive care is provided either during a hospital stay or in clinic which can be either in hospital out patients or in a community based clinic. Support for patients can be given also in their own home or when admitted to the Hospice for care. Referral is by medical or dental practitioner. Some General Practitioners have direct access to a Dietician within their own practice.

Occupational Therapy - TRFT

Manager: Lindsay Haigh.  
Tel: 01709 304313

Occupational Therapy - NHSR

Principal Community OT: Anna Turner  
Tel: 01709 855962 (based at Laudsdale)

<65yrs at Kirk House, Browning Road, Herringthorpe, Rotherham S65 2LG  
>65yrs based in Social Services buildings e.g. Maltby Civic Centre, Crinoline House, Wath Town Hall

Kirk House: 01709 835835  
Crinoline House: 01709 382121  
Maltby Civic Centre: 01709 812637  
Wath Town Hall: 01709 873678 (ask for Duty Officer)

Physiotherapy Department - TRFT

Head of Service: Ms Diane Simpson.  
Tel: 01709 304400

Physiotherapy - NHSR

Receptionist: 9.00am – 4.00pm  
Acting Head Physiotherapist: Mr Paul Chapman  
Tel: 01709 304825

Social Work Department - TRFT

Contact: Duty Social Worker  
Tel: 01709 304427

Community Social Work

Crinoline House: 01709 382121  
Maltby Civic Centre: 01709 812637  
Wath Town Hall: 01709 873678
Speech and Language Therapy
Contact: Susan Dent
Tel: 01709 423230 and 307307

Stoma Care Nurse Specialist:
See entry under Colorectal Nurse Specialist

The Park Rehabilitation Centre
Badsley Moor Lane,
Rotherham,
S65 2QL
Telephone: 01709-302323
Fax No: 01709-30231

Community lead - Barbara Cooper
Tel: 01709 423217

Rotherham Community Health Centre (domiciliary AHP services)
Greasbrough Road
Rotherham
S60 1RY
Tel: 01709 423000
8. PALLIATIVE CARE SERVICES

8.1 Primary Care Services

District nurses
Contact via GP surgery

District Nurse Evening Service
Contact times: 5.30pm – 9.30pm
Tel: 0778 841 5970 (for staff and patient use)
Fax/Answerphone: 01709 304 077 (for staff communication only)

District Nurse Night Service
Contact times: 9.00pm – 6.00am
Tel: 0378 552 716 (for staff and patient use)
Fax/Answerphone: 01709 304 077 (for staff communication only)

CARATS Fast Response Service
This service works closely with the hospice and mainstream services to provide intensive palliative terminal care in patient’s homes preventing admission to hospital or facilitating earlier discharge from hospital.

This is a time-limited service normally 3 – 5 days. An appropriate longer term care package is arranged for patients/carers if necessary prior to discharge from CARATS fast response service.

Contact times: 8.30am – 6.00pm
Tel: 07668 401 162
Alternatively Bleep via RGHT switchboard 01709 820 000 bleep 477
Pager 07659113070

8.2 Palliative Care Services

The Rotherham palliative care services are a specialist multi-professional team who endeavour to promote quality of life from the point of diagnosis through changing phases of illness.

The team has specialist knowledge relating to the symptom management, psychological, social and spiritual needs and this may include a need for bereavement support.

The palliative care approach is promoted with all health care professionals acting as a resource and through educational programmes.

The following all contribute to the Palliative Care MDT.

This MDT meets every Wednesday at 1pm at Rotherham Hospice, all patients referred to palliative care services (excluding lymphoedema and Hospice at Home) are discussed at the MDT meeting.

The Rotherham Hospice
The Rotherham Hospice is situated on Broom Road overlooking Herringthorpe playing fields.

It provides high quality palliative care for people (and their families) living with cancer and other life threatening illnesses.
Staff working in the hospice include a skilled team of doctors, nurses, occupational therapists, physiotherapists, health care support workers, volunteers, chaplains and many others.

There are eight beds in the in-patient unit, which provide pain and symptom control, end of life care and urgent respite.

**Day Hospice**

The day Hospice is open Monday to Friday 10am to 3pm

Patients are referred to the Day Hospice for the management of physical, psychological and social problems in relation to their diagnosis and also to give carers a break.

The Day Hospice provides an opportunity for patients to attend weekly in a relaxed and friendly environment where they can talk confidentially to trained members of the Hospice team. It provides a social atmosphere and, if desired, participation in recreational activities.

For further information about any of the hospice services contact:

- **Reception** Tel: 01709 308900
- **Consultant** Tel: 01709 304671
- **Nurse Manager** Tel: 01709 308901
- **Sister Day Care** Tel: 01709 308909
- **In-Patient Unit** Tel: 01709 308905

**Hospital Palliative Care Team**

*Maccmillan Palliative Care CNS*

- Ann Harriman
- Kelsi Sulumar
- Wayne Greenwood

Monday to Friday 08.00 to 18:00
Tel: 01709 307180 (Answerphone)
Pager: 82680 via RGH Switchboard
Fax: 01709 307181

**Consultants in Palliative Medicine**

- Fiona Hendry and Georgina Keenleyside

Tel: 01709 304671
Fax: 01709 304672
Out patient clinic Monday PM

**Community Palliative Care Team**

*Community Macmillan Palliative Care CNS*

- Karen Jones Tel: 01709 308931
- Tony Lawton Tel: 01709 308932
- Bernadette Lund Tel: 01709 308934
- Chris Clay Tel: 01709 308935

Monday to Friday 9am - 5pm. Office Hours: 9am - 10.30am and 4pm-5pm

**BHF Palliative Care CNS for Heart Failure**

- Marion Jones Tel: 01709 308941
  Pager: 07699740706

**Macmillan Palliative Care CNS for Nursing Homes**

- Brenda Young: Tel: 01709 308933
Community Palliative Medicine Service
Advice and Domiciliary Visiting if required

Fiona Hendry
Consultant in Palliative Medicine
Kevin Bolster, Speciality Doctor
Contact: 01709 308938

Written referrals faxed or telephone referrals accepted to:
Tel: 01709 304671 Fax: 01709 304672

Hospice at Home Service

The Hospice at Home service employs a team of skilled health and social care trained Macmillan generic support staff to provide hands on care and support to patients, carers and their families with a palliative care diagnosis. In addition, the recent funding of Macmillan Cancer Support will provide new posts for an Equalities Link Worker.

Hospice at Home and Marie Curie Service Manager
Louise Evans Tel: 01709 308923 / 077899 35806
Email: louise.evans@rotherhampct.nhs.uk

Lymphoedema Service

Lymphoedema Specialist Nurse
Merri Collinson Tel: 01709 308928

Oncology and Palliative Care Dietician

Dr N H Choudhary Tel: 01709 304291
Referral via Dietetics Department Rotherham General Hospital

Psychologist – Currently vacant

Out of Hours Palliative Care Telephone Advice Service

Telephone: 01709 308905
Weekdays: 5.00pm – 09:00am
Weekend and Bank Holidays 24 hours.

This service is for any professional to contact about any problem encountered when caring for a palliative care patient who they feel they would like to discuss or ask advice about. This may be a physical or psychological symptom or just a practical question.

Junior nurses and doctors should consult their immediate seniors for advice before using this service.

This service is not primarily intended for patients / carers to use directly as there are professionals with general palliative care skills working out of hours who can provide initial advice and care.
Referral Criteria

The following criteria should be met:

- The PATIENT has a life threatening illness where curative treatment is not possible and a palliative care approach has been decided upon. This would usually refer to a patient with cancer but the service is based on a palliative care need rather than diagnosis and can cover other illnesses.

- The PROFESSIONAL seeking advice should have seen the patient themselves and already consulted a more senior professional caring for the patient, if available (i.e. more senior medical or nursing colleague on duty).

- The PROBLEM is urgent and, in the view of the caller, must be dealt with before the usual team caring for the patient is next on duty. (Non urgent problems could be dealt with the next day).

- The ADVICE required will enable the caller to provide better, more effective palliative care to a patient in need.

Who Will Answer The Call?

The call will be answered by the nurse in charge of the Hospice In patient unit. The nurse will have direct access to the doctor on call (Medical Director or Hospice Clinician). You may be advised directly by the nurse or she / he may wish to consult with the doctor and either one of them will then telephone you back with advice. The doctor on call has access to a Consultant in Palliative Medicine.

It is an ADVICE line not a VISITING service.
9. CHEMOTHERAPY SERVICES

9.1 Sheffield Teaching Hospitals NHS Foundation Trusts’ Chemotherapy Services

Chemotherapy at Sheffield Teaching Hospitals NHS Foundation Trust is administered on four ward areas at Weston Park Hospital and in two outpatient areas, Chemotherapy Suite and Day Case Services Unit and on Ward P3, P3 Day Case Unit and in Medical Outpatients at the Royal Hallamshire Hospital.

Weston Park Hospital Chemotherapy
Patients involved in clinical trials may be treated in the Cancer Research Centre. All patients receiving oral chemotherapy will attend the Outpatient Department. On commencement of treatment patients are given the contact numbers for the hospital telephone (0114) 2265000 and advised to ask for the ward or department where they have had their treatment.

Clinical Director, Chemotherapy Services
Dr Linda Evans  Tel: 0114 2265264

Lead Nurse, Chemotherapy
Sister Pauline Pledge  Tel: 0114 2265131

Matron, Outpatient Services
Denise Wilkinson  Tel: 0114 2265330

Matron, Inpatient Services
Sue Shepley  Tel: 0114 2265309

Professor of Medical Oncology
Professor R E Coleman  Tel: 0114 2265213

Royal Hallamshire Hospital Chemotherapy
On commencement of treatment all patients are given a 24 hour contact number for ward P3 – (0114) 271 3625 and (0114) 271 3626 – and a contact number for normal working hours for P3 Day Case Unit – (0114) 271 3607.

Head of Service, Haematology Chemotherapy
Dr Josh Wright  Tel: 0114 2711731

Lead Chemotherapy Nurse
Yvonne Goddard  Tel: 0114 2713625

Matron, Haematology
Martin Salt  Tel: 0114 2713629

Pharmacist, Haematology
Jane Davis  Tel: 0114 2712274
Intrathecal Chemotherapy
Intrathecal chemotherapy is administered at both Weston Park Hospital and the Royal Hallamshire Hospital

Dr Josh Wright  
Consultant Haematologist  
Intrathecal Lead  
Tel: 0114 2711731

Dr Jo Hornbuckle  
Consultant Medical Oncologist  
Deputy Intrathecal Lead  
Tel: 0114 2265747

Sister Clare Warnock  
Intrathecal Trainer  
Tel: 0114 2265311
9.2 The Rotherham NHS Foundation Trust’s Chemotherapy Services

Chemotherapy at Rotherham NHS Foundation Trust is administered within two areas, as follows:

1. Chemotherapy Suite

Patients under the care of a Consultant Oncologist at the Cancer Centre, Weston Park Hospital in Sheffield have the opportunity to receive Outreach Chemotherapy.

Locally, Chemotherapy is administered for Breast Cancer within the Patient Access, Outpatient Chemotherapy Suite based on level C, Junction Three, Rotherham NHS Foundation Trust.

The Chemotherapy Suite is open Monday to Friday 08.30 until 16.30 hrs. As patients receiving Outreach Chemotherapy are under the care of a Consultant Oncologist based at Weston Park Hospital they are encouraged to contact the Cancer Centre directly for advice on the following telephone number:

| TELEPHONE NUMBER: 0114 2265000 |

2. Ward B7 Haematology Ward/Day Care Unit

Haematology Chemotherapy is administered on an Inpatient and Outpatient basis within the Haematology Unit. Inpatient Haematology Chemotherapy is administered on Ward B7, whilst Outpatient Haematology Chemotherapy is administered in the Day Care Unit based on Ward B7.

There is a 24 hour advice line for Haematology patients receiving Chemotherapy as outlined in the following Table:

<table>
<thead>
<tr>
<th>24 Hour Telephone Advice Service for Haematology Patients receiving Chemotherapy</th>
</tr>
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<tbody>
<tr>
<td>Patients are given a relevant fact-sheet relating to their specific needs, which state the open access to the hospital referral system we operate on B7. The fact-sheet advises the patient to contact Ward B7 on the following telephone number at any time day or night, seven days a week for any concerns or problems they may be experiencing. The Haematology Nurse Specialist is available Monday – Friday 09:00- 17:00 for advice and support.</td>
</tr>
<tr>
<td>TELEPHONE: 01709 304170</td>
</tr>
</tbody>
</table>

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10. **Radiotherapy Services**

The Radiotherapy Department at Weston Park Hospital (part of Sheffield Teaching Hospitals NHS Foundation Trust) has seven linear accelerators, superficial and orthovoltage units. All linear accelerators have MLCs and portal imaging. IMRT is also carried out in the department. There is Virtual and Conventional Simulation available.

Stereotactic Radiosurgery is provided by a unit attached to the department which treats a small number of malignant cases each year. Patients are referred via the neurosurgeons.

There is a low dose rate selectron unit for gynaecological cancers situated in an extension off ward 2. Radioisotopes are also used in the hospital for both diagnostic and therapeutic purposes.

There is also a Medical Physics Department which provide the treatment planning for the patient and machine maintenance. The physicists of this department are responsible for calibration of the treatment units and checking both machines and calculations. The Impression Suite provides support to the department by producing accessories to aid patient treatment e.g. immobilisation devices.

**Clinical Director, Radiation Services**
A consultant clinical oncologist who has clinical responsibility for the other oncologists working in radiotherapy, the radiotherapy department, and medical physics department.
Dr Simon Pledge  
Tel: 0114 2265502

**Senior Manager, Radiation Services**
Responsible for the management of the Radiotherapy Department
Mrs Moira Tomlinson  
Tel: 0114 2265291

**Department Superintendents**
There are a number of radiotherapy superintendents in the department who are available for advice.
Tel: 0114 2265291  
Tel: 0114 2265683

**Research Radiographers**
Responsible for co-ordinating radiotherapy research trials within the department.
Mrs Gillian Brown  
Tel: 0114 225296

**Stereotactic Superintendent**
Responsible for the Stereotactic Radiosurgery unit.
Mrs Joanne Rodgers  
Tel: 0114 2711784

**Main Reception**
Receives patients attending for radiotherapy, radiology and impression suite.
Tel: 0114 2265290

**Head of Radiotherapy Physics**
Manages the physicists and technicians within Radiation Services.
Dr John Conway  
Tel: 0114 2265183

**Deputy Head of Radiotherapy Physics**
Deputy to the above.
Dr Stephen Tozer-Loft  
Tel: 0114 2265174
11. SUPPORT GROUPS

**Breast Cancer Support Group Rotherham**
Chairperson: Mary Beech  Secretary: Sandra Ripon
Tel: 0114 2877246  Tel: 01909 568416

**Breast Cancer Care Helpline (National)**
Tel: 0808 800 6000

**Cancer Action Rotherham**
NHS Rotherham, Oak House, Moorhead Way, Bramley, Rotherham, S66 1YY
Tel: 01709 302174
email info@carotherham.org.
Website: [http://www.carotherham.org/](http://www.carotherham.org/)

**Cancer Research Campaign (Rotherham)**
13 Fox Close
Kimberworth Park
Rotherham  S61 3BE
Mrs S Walker  Tel: 01709 552543

**Crossroads Care**
Crossroads Care Rotherham
Unit H, The Point
Bradmarsh
Rotherham
South Yorkshire
S60 1BP
Tel: 01709 360272
Website: [http://www.crossroadsrotherham.co.uk/](http://www.crossroadsrotherham.co.uk/)

**Cruse Bereavement Care**
17 Newman Court, Moorgate
Rotherham
Helpline:  Tel: 01709 362744
Local Contact: Mrs V Whitehouse,  Tel: 01709 511909

**Dearne Valley Cancer Support Group**
Chair: Peter Foster  Tel: 01709 582180

**Gynaecological Cancer Support Group**
Contact: Catherine Dawson, Gynaecology-Oncology Clinical Nurse Specialist
Tel: 01709 307302

**Laryngectomy Support Group**
Contact: Miss S Dent & Mrs E Hallam
Speech/Language Therapy Departments:
The Rotherham NHS Foundation Trust and Doncaster Gate Hospital
Tel: 01709 304941 and 01709 304990

**Marie Curie Community Nursing**
Doncaster Gate Hospital
Locality manager Mrs Gill Mennell
Tel: 01709 304834
Rotherham Macmillan Benefits Advice Service
Contact: Katy Lewis
Macmillan Benefits Advice Service
Enterprise House, Bridge Street, Rotherham, S60 1QJ
Tel 01709 823645
Fax 01709 515865
Email: macmillanwelfarerights@rotherham.gov.uk

Rotherham Macmillan Cancer Information and Support Manager
Contact: Paula Lowson
Earl of Scarborough Suite
C Level, Rotherham Foundation Trust
Tel: 01709 307659

Macmillan Cancer Support
Helpline 9am-8pm
Tel: 08088082020
Website: www.macmillan.org.uk

Parents Association of Children with Tumours and Leukaemia
Sheffield Children’s Hospital
Western Bank, Sheffield
Tel: 0114 2724570

Rotherham Cancer Care Centre (Complementary Therapies and Support)
Contact: Angela Brintcliffe
93 Badsley Moor Lane
Clifton
ROTHERHAM
South Yorkshire
S65 2PS
Tel: 01709 375729

Voluntary Action Rotherham
The Spectrum
Coke Hill, Rotherham, South Yorkshire S60 2HX
Tel: 01709 829821
Website: http://www.varotherham.org.uk/