**Primary Care Update**

**12th February 2025**

**Barts Health NHS Trust for Non-Specific Symptom (NSS) referrals**

Following our update in November we would like to share the current waiting time of **1 week** for NSS referrals into our RDC clinic (formerly MRADC)

We apologise for the recent service delays and the impact this has had, and we fully understand the worries and concerns that this brings to you, your patients and their families.

The RDC service at Barts Health NHS Trust has been reviewed and the pathways within have now been decoupled as follows:

* Sarcoma can be referred to via ERS using

Urgent Suspected Cancer – Sarcoma Soft Tissue not BONE - RAS - (RLH) - Barts Health NHS Trust - R1H

* NSS & MUO (malignancy of unknown origin, identified by basic imaging) will remain as pathways under the RDC at Royal London Hospital, please refer via ERS using

Urgent Suspected Cancer-Multidisciplinary Rapid Access Diagnostic RAS Barts Health NHS Trust R1H

With regard to the RDC clinic (NSS & MUO), a demand & capacity model has been undertaken and work is ongoing to finalise funding for substantive team members. The cancer alliance GP leads and PLACE cancer GP leads have been involved in the development of the clinic model.

We have included some alternative referral routes below which you may still wish to consider:

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| **Alternative Referral Routes/Pathways** |
| * Direct access diagnostic pathways - [Early Cancer Diagnosis PCN DES and QOF Support Guide July 2024.pdf](https://www.nelcanceralliance.nhs.uk/sites/default/files/2024-07/Early%20Cancer%20Diagnosis%20PCN%20DES%20and%20QOF%20Support%20Guide%20July%202024.pdf)
* [Barts Health GP Direct Access to CT for Suspected Pancreatic Cancer – North East London](https://primarycare.northeastlondon.icb.nhs.uk/home/diagnostics/barts-health-gp-direct-access-to-ct-for-suspected-pancreatic-cancer/)
* [City & Hackney Direct Access CT for Unintentional Significant Weight Loss](https://gps.cityandhackneyccg.nhs.uk/pathways/direct-access-for-unintentional-significant-weight-loss)
* Another suspected cancer pathway (e.g. upper GI for abdominal pains/anaemia, etc) <https://www.gatewayc.org.uk/cancer-maps/>
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Filter function tests should be used to support the referral pathway and to support GPs to refer patients via the most appropriate route (that is, non-specific symptoms or site-specific). This leads to a higher referral quality, reduces the risk of test duplication later in a patient’s pathway and ensures all necessary pre-investigations (e.g. kidney function) have been completed, removing potential delays further along the pathway.

Working with the GP Leads and NSS expert reference group a filter function test bundle has been created on the pathology ordering systems (T-Quest and [Cyberlab Guide](https://nhs.sharepoint.com/%3Af%3A/s/msteams_61464c/Ej7YurbdjZdHnOorGpEAcT8BP755UM_uYyoPqxl8Aqnu1g?e=3zj6VG)), the name of the test bundle is RDC NSS Pre-Referral Test Bundle.

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| ‘**RDC NSS Pre-Referral Test Bundle’** |
| FBC | U&Es with eGFR | Protein Electrophoresis (Serum EP) | HbA1c |
| CRP | LFTs | TSH | Bone |
| *PSA (male only)* | *CA12-5 (female only)* | B12 | Ferritin |
| Folate | FIT |  |  |

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You may also wish to consider ordering the following ‘optional’ tests as recommended by the Faster Diagnosis Framework where clinically indicated:

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| ‘**RDC NSS Optional Tests’** |
| Coeliac serology | LDH | GGT | HIV  |
| Hep B/C serology | Clotting (for lymphadenopathy referrals) | glucose |

If you have any questions about the changes to the service or if you require an update on a patient, you have referred on the NSS pathway, please do contact us:

📞07715 805 112, Monday to Friday, 9am to 5pm

📧 bhnt.rapidaccessdiagnosticclinic@nhs.net

**Appendix - a guide to abbreviations**

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| **Acronym**   | **Term**  | **Description**   |
| **NSS**   | Non-Specific Symptoms (Source: NHS)  | Patients who present with non-specific symptoms or **vague symptoms** (or combinations of non-specific symptoms) that can indicate several different cancers currently don’t have an established effective referral pathway  |
| **MUO**  | Malignancy of Undefined Primary Origin (Source: NICE)  | Metastatic malignancy **identified on the basis of a limited number of tests, without an obvious primary site**, before comprehensive investigation.  |
| **CUP (provisional)**  | Provisional Carcinoma of Unknown Primary Origin (Source: NICE)  | Metastatic epithelial or neuro-endocrine malignancy **identified** **on the basis of histology or cytology, with no primary site detected** despite a selected initial screen of investigations, before specialist review and possible further specialised investigations.  |
| **CUP (confirmed)**  | Confirmed Carcinoma of Unknown Primary Origin (Source: NICE)  | Metastatic epithelial or neuro-endocrine malignancy **identified on the basis of final histology**, **with no primary site detected** despite a selected initial screen of investigations, specialist review, and further specialised investigations as appropriate.  |
| **RAS** | Referral Assessment Service (Source: NHS Digital) | Allows the provider to review the referral information **before a clinic appointment is generated**. This facility supports complex care pathways, where it’s not always clear whether a patient needs a consultant appointment or a diagnostic test first. A RAS set up by the provider will ensure patients’ referrals are triaged correctly. |
| **RDC** | Rapid Diagnostic Centre (Source: BHRUT & Barts Health)  | A **clinically led service** at the Trust that provides a one stop clinic where symptoms are fully investigated to provide a timely diagnosis  |