Testicular Cancer- RLND

**Hospital Name**

**Address**

**Address**

**Postcode**

**Phone**

**Fax**

**Email**

**Helpline**

Patient Name

Patient Address

Patient Post Code

Date

Dear Patient Name

**TREATMENT SUMMARY**

This document provides a summary of your diagnosis, treatment and on-going management plan. It includes information about the potential side effects of your treatment, those that you should be aware of, act upon and who to contact. Your GP will also receive a copy of this summary.

|  |  |  |
| --- | --- | --- |
| **Date** |  | |
| **Consultant** |  | |
| **Nurse Specialist (Key Worker)** |  | |
| **Diagnosis** | Testicular Cancer | |
| **Date of diagnosis** |  | |
| **Treatment aim** | You have had surgery as part of your treatment for testicular cancer | |
| **Summary of completed treatment and relevant dates:** | | |
| **Summary of surgery & staging:** | Retroperitoneal Lymph Node Dissection | |
| **On-going Services or Treatment:** | | |
| **Infertility – Retrograde ejaculation** | This surgery has caused retrograde ejaculation whereby on ejaculating your sperm is ejected back into the bladder rather than out through the penis. This means it is likely you are unable to father a child in the normal way.  Before your surgery you will have been asked if you wanted to store your sperm. If you do this, make a note of the following;   * The length of time the sperm storage facility have agreed to store your sperm * You will have to discuss further sperm storage costs with your GP * How you access the stored sperm (Contact the unit that you stored the sperm at) | |
| **Medication on completion of treatment** | You will be discharged after your surgery with pain killers (analgesics), pain can continue for up to 3 months after surgery.  You will also be given a medication to thin your blood to prevent blood clots (anti-coagulant).   * Pain medication: This usually includes paracetamol and possibly oxycodone * Anti-coagulant: This medication is called tinzaparin. It is a small injection given into the tummy or upper arm; you will be taught how to give this before you leave the ward. You will take this medication for 28 days. | |
| **Follow up** | * Your outpatient appointments while you are under our care will bedependent on your final pathology andconsultant’s recommendation. A clinic letter with this detail will have been sent to you and your GP * You may be required to have a CT scan or an x-ray prior to hospital appointments. The number and timing of these will depend on your final pathology and consultant’s instructions. If you are unsure, please contact your specialist nurse to check. * You will also be required to have blood tests, including tumour markers (AFP, BHCG, LDH) prior to or at your hospital appointments   It is **your** responsibility to ensure you attend for any scans or blood tests before your appointment; we need these in order to review you at your consultation. | |
| **Possible Consequences of Treatment** | Pain  Lymphocele  Infertility  Difficulties ejaculating (retrograde ejaculation)  Large scar  Psychological issues | |
| **Additional information or concerns including lifestyle and support needs:** | Keep your anti embolism stockings to wear on flights in the 3 months following surgery.  You can resume your normal level of activity/exercise approximately 6 weeks after your surgery  You can resume driving a car when you no longer require pain medication for post-surgical pain, check with your specific driving insurance policy | |
| **Prescription Charge exemption arranged** | Yes/ No | |
| **Other service referrals can be made to the following:** | Pastoral Care and Psychological Support Team (self-referral):  XXXXX  Support groups: There are many groups around the UK.  On line information and support: [www.orchid-cancer.org.uk/Testicular-cancer](http://www.orchid-cancer.org.uk/Testicular-cancer)  Macmillan cancer support Tel: 020 7840 7840  Macmillan Cancerline: 0808 808 0000 (free phone)  [www.macmillan.org.uk](http://www.macmillan.org.uk)  You can access further support and information at The Maggies Centre, Charring Cross Hospital, Fulham Palace Road, London W6 8RF.Tel: 020 7386 1750 | |
| **Signs and Symptoms to look out for and seek advice on:** | | |
| In relation to surgical complications :   * Passing fresh(bright red) blood in your urine * Sweats * Pulsating chest/calf pain (DVT/PE) – **URGENT – Call an ambulance** * Pain on passing urine (urine infection/cystitis) * Bladder or kidney pain (usually severe lower back pain)   Other symptoms to seek advice about:   * + Unintended weight loss (more than 3kg)   + Loss of appetite | | |
| **Contacts for general queries advice and support** | | Contact your GP or practice nurse |
| **If you require access to a member of the specialist team involved in your cancer care; you should contact:** | | **Normal working hours: 9-5:**  Your clinical nurse specialist: XXXXX  Clinic Appointments: XXXXX  **Out of hours/emergencies:**  XXXX hospital switch board or call your out of hours GP |

Yours sincerely

Electronically Approved By:

PRIVATE AND CONFIDENTIAL

cc.

Patient GP Name

Patient GP Address

Patient GP Post Code

GP READ CODES FOR COMMON CANCERS (For GP Use only). Other codes available if required.

(Note: System codes are case sensitive so always ensure codes are transcribed exactly as below)

|  |  |  |  |
| --- | --- | --- | --- |
| **System 1** | **(5 digit codes)** | **All other systems** | **Version 3 five byte codes**  **(October 2010 release)** |
| **Diagnosis:** |  | **Diagnosis** |  |
| Lung Malignant Tumour | XaOKG | Malignant neoplasm of bronchus or lung | B22z. |
| Carcinoma of Prostate | X78Y6 | Malignant neoplasm of prostate | B46.. |
| Malignant tumour of rectum | XE1vW | Malignant neoplasm of Rectum | B141. |
| Bowel Intestine | X78gK | Malignant neoplasm of Colon | B13.. |
| Large Bowel | X78gN | Malignant neoplasm of female breast | B34.. |
| Female Malignant Neoplasia | B34.. | Malignant neoplasm of male breast | B35.. |
| Male Malignant Neoplasia | B35.. |  |  |
| **Histology/Staging/Grade:** |  | **Histology/Staging/Grade:** |  |
| Histology Abnormal | 4K14. | Histology Abnormal | 4K14. |
| Tumour grade | X7A6m | Tumour staging | 4M… |
| Dukes/Gleason tumour stage | XaOLF | Gleason grading of prostate Ca | 4M0.. |
| Recurrent tumour | XaOR3 | Recurrence of tumour | 4M6.. |
| Local Tumour Spread | X7818 |  |  |
| Mets from 1° | XaFr. | Metastatic NOS | BB13. |
| **Treatment** |  | **Treatment** |  |
| Palliative Radiotherapy | 5149. | Radiotherapy tumour palliation | 5149. |
| Curative Radiotherapy | XalpH | Radiotherapy | 7M371 |
| Chemotherapy | x71bL | Chemotherapy | 8BAD. |
| Radiotherapy | Xa851 |  |  |
| **Treatment Aim:** |  | **Treatment Aim:** |  |
| Curative procedure | Xallm | Curative treatment | 8BJ0. |
| Palliative procedure | XaiL3 | Palliative treatment | 8BJ1. |
| **Treatment toxicities/late effects**: |  |  |  |
| Osteoporotic # | Xa1TO | At risk of osteoporosis | 1409. |
| Osteoporosis | XaELC | Osteoporosis | N330. |
| Infection | Xa9ua |  |  |
| **Ongoing Management Plan** |  | **Ongoing Management Plan** |  |
| Follow up arranged (<1yr) | 8H8.. | Follow up arranged | 8H8.. |
| Follow up arranged (>1yr) | XaL.. |  |  |
| No FU | 8HA1. | No follow up arranged | 8HA.. |
| Referral PRN | 8HAZ. |  |  |
| **Referrals made to other services:** |  | **Referrals made to other services:** |  |
| District Nurse | XaBsn | Refer to District Nurse | 8H72. |
| Social Worker | XaBsr | Refer to Social Worker | 8H75. |
| Nurse Specialist | XaAgq |  |  |
| SALT | XaBT6 |  |  |
| **Actions required by the GP** |  | **Actions required by the GP** |  |
| Tumour marker monitoring | Xalqg | Tumour marker monitoring | 8A9.. |
| PSA | Xalqh | PSA | 43Z2. |
| Osteoporosis monitoring | XalSd | Osteoporosis monitoring | 66a.. |
| Referral for specialist opinion | Xalst |  |  |
| Advised to apply for free prescriptions | 9D05 | Entitled to free prescription | 6616. |
| Cancer Care Review | Xalyc | Cancer Care Review | 8BAV. |
| Palliative Care Review | XalG1 | Palliative Care Plan Review | 8CM3. |
| **Medication:** |  | **Medication:** |  |
| New medication started by specialist | XEOhn | Medication given | 8BC2. |
| Medication changed by specialist | 8B316 | Medication changed | 8B316 |
| Advice to GP to start medication | XaKbF |  |  |
| Advice to GP to stop medication | XaJC2 |  |  |
| **Information to patient:** |  | **Information to patient:** |  |
| DS1500 form claim | XaCDx | DS1500 completed | 9EB5. |
| Benefits counselling | 6743. | Benefits counselling | 6743. |
| Cancer information offered | XalmL | Cancer information offered | 677H. |
| Cancer diagnosis discussed | XalpL | Cancer diagnosis discussed | 8CL0. |
| Aware of diagnosis | XaQly |  |  |
| Unaware of prognosis | XaVzE |  |  |
| Carer aware of diagnosis | XaVzA |  |  |
| **Miscellaneous:** |  | **Miscellaneous:** |  |
| On GSF palliative care framework | XaJv2 | On GSF Palliative Care Framework | 8CM1. |
| GP OOH service notified | Xaltp | GP OOH service notified | 9e0.. |
| Carers details  National Cancer Survivorship Initiative DH Logo artwork (rgb)[1]  December 2010 | 9180. | Carer details | 9180. |