Clinical Audit Of A Symptomatic Breast Clinic In North Wales District General Hospital

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Abstract

We describe an audit of our symptomatic new patient breast clinic over a period of 4 weeks. A total of 162 new patients attended over 8 consecutive clinics during 4 weeks, from 03 October 2010 to 02 November 2010, were included in the audit. Urgent suspected cancer referrals were seen significantly sooner than routine referrals. 90% of the urgent suspected cancer referrals were seen within 20 days of GP referral to the first appointment in the clinic and 30% in case of routine referrals. 100% of patients diagnosed with breast cancer had their first treatment within 62 days of an urgent GP referral with suspected breast cancer. 100% of patients diagnosed with breast cancer had their first treatment (both surgical/non-surgical) within 31 days of the decision to treat. We achieved 100%, compared to audit standards based on British Association of Surgical Oncology guidelines (BASO) for breast cancer management. Hence, we closed the audit cycle.

INTRODUCTION

There is increased workload on the symptomatic breast clinics due to recent increased public awareness. With this comes greater patient expectations and demands by general practitioners (GP) of higher standards of care. We audited our symptomatic new patient breast clinic to see whether it meets the audits standards based on British Association of Surgical Oncology guidelines (BASO) for breast cancer management.

PATIENTS AND METHODS

A retrospective audit was performed on 8 consecutive symptomatic breast clinics (4 weeks period) at Wrexham Maelor Hospital in October 2010. Data were collected from the scanned data collection forms from the clinic, patient’s notes and histopathology reports. Information on demographics, referral and waiting periods was obtained from the MDT co-ordinator and the IT department. All the palpable breast lumps are triple assessed by clinical examination, imaging by ultrasound examination or mammography and core biopsy. All patients had a clinical examination prior to imaging. Mammograms and ultrasound scans were reported by the radiologist in the clinic on the same day. Biopsy reports were discussed with the patients in the next week follow-up clinic following discussion in the multi-disciplinary team meeting. The data was inputted into excel sheets and analysed.

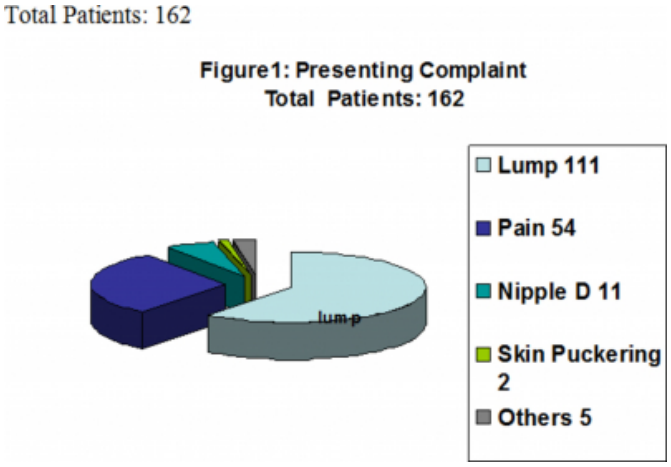
RESULTS

A total of 162 new patients were seen during the period of study that included 147 urgent suspected cancer referrals and 15 routine referrals. All referral letters from the General practitioners were re-prioritized by the consultant surgeon into urgent suspected cancer and routine categories based upon the presence of a discrete lump, patient's age, and clinical suspicion. The mean age of all new patients was 38 (range 20-90) years. 90% of the patients referred as urgent suspected cancer were seen within 20 days and 100% within 30 days from the date of referral. 30% of the patients referred as routine were seen within 20 days and 100% within 70 days from the date of referral.

162 patients were seen in the symptomatic new patient breast clinic, out of which, 111 presented with lumps (68.5%), 54 with pain (33%), 11 with nipple discharge (6.7%), 2 with skin puckering (1%) and 3 with breast implant related problems (2%) (Figure1).

Figure 1

Figure 1: Presenting Complaint

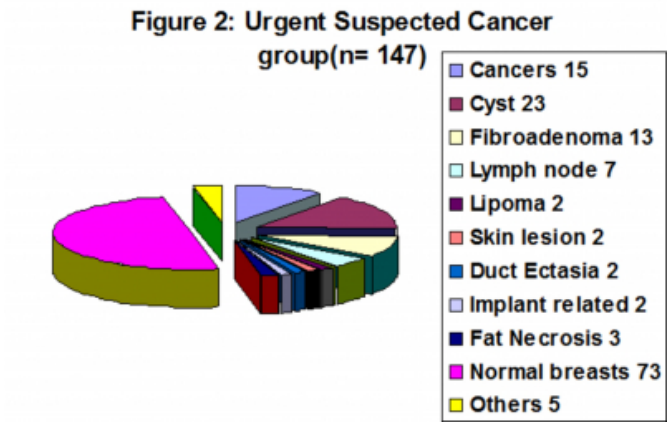


31 patients (19%) had core biopsies in the clinic, out of which, 16 cases were reported as benign and 15 as malignant.

The breakdown of the diagnoses of women attending the symptomatic breast clinic in the urgent suspected cancer group of patients (n=147) was as follows: 15 cancers, 23 cysts, 13 fibroadenomas, 7 lymph nodes, 2 lipomas, 2 skin lesions, 2 duct ectasia, 2 breast implant related problems, 3 fat necrosis and 73 normal breasts (Figure2).

Figure 2

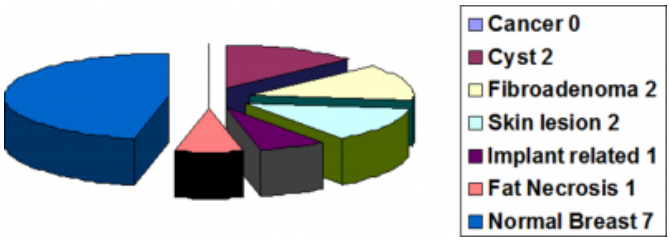
Figure 2: Urgent Suspected Cancer group (n= 147)



In the routine referral group (n=15), there were no cancers, 2 cysts, 2 fibroadenomas, 2 skin lesions,1 breast implant related problem,1 fat necrosis and 7 normal breasts (Figure3).

Figure 3

Figure 3: Routine referral group (n= 15)



Audit Standard 1 (BASO Guidelines): 100% of patients diagnosed with breast cancer should have their first treatment within 62 days of an urgent GP referral with suspected breast cancer.

Result: 100% of patients diagnosed with breast cancer had their first treatment within 62 days of an urgent GP referral with suspected breast cancer.

Audit Standard 2 (BASO Guidelines): 100% of patients diagnosed with breast cancer should have their first treatment (both surgical/non-surgical) within 31 days of the decision to treat.

Result: 100% of patients diagnosed with breast cancer had their first treatment (both surgical/non-surgical) within 31 days of the decision to treat.

CONCLUSION

Two thirds of patients were presented to the clinic with lumps and one-third with pain. Half of the patients were diagnosed to have normal breasts.10% of patients referred as urgent suspected cancer were found to have cancers.

We achieved 100%, compared to audit standards based on British Association of Surgical Oncology guidelines (BASO) for breast cancer management. Hence, we closed the audit cycle.

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