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Adapting the haematuria clinic during the Covid-19 pandemic

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Introduction & Objectives: One of the biggest challenges during the Covid-19 pandemic has been the continuation of cancer diagnostic services. Using a combination of virtual clinics and telephone triage assessments in a multi-professional team approach has allowed our haematuria pathway to continue to function. We reviewed how these interventions helped maintain the volume of patients through the haematuria service during the pandemic.

Materials & Methods: We reviewed prospective audit data collected on patients referred to the haematuria service between June 2019 and January 2021. Comparison was made in respect to the pathways before and during the pandemic. Data review included: time from primary care referral to hospital clinical review, time from clinic to CT, ultrasound and/or flexible cystoscopy and time to bladder tumour resection. All patients were invited to complete an on-line survey to document their experiences and the results were reviewed.

Results: 174 patients were referred via a two-week-wait cancer pathway (12 via internal pathways, 162 from primary care). Between 26/3/20 and 14/4/20 no referrals were received. Before the pandemic the number of referrals were 93 over 9 months (10.3 referrals per month), post-covid 81 referrals were sent over 9.5 months (8.5 referrals per month). 12 patients were not investigated in the usual timeframe (COVID positive, shielding, patient choice and non-attendance) and were excluded from final analysis. Of 162 patients, 51 were women, and 111 were men. The average age was 64.4 years (SD+/-14.51, range 20-91). Table 1 shows the relative timing of investigations and treatment pre and during the Covid pandemic:

	Pre-Pandemic	During-Pandemic	Significance (P)
	(19/6/19-26/3/20)	(27/3/20-8/1/21)	
Mean age (years)	62.59 (SD+/-15.71)	66.45 (SD+/-12.85)	P=0.045
Median time referral to clinic (days)	7 (IQR 11-5)	5 (IQR 7-4)	P<0.01
Median time CT from clinic (days)	4 (IQR 7-1)	0	P<0.01
Median time USS from clinic (days)	3 (IQR 6-1)	1 (IQR 2-1)	P<0.01
Median time flexi from clinic (days)	0	0	-
Median time surgery from clinic (days)	24 (IQR 33-11)	13 (IQR 15-13)	P=0.06

69 patients completed the online patient experience survey during the pandemic, with an age range of 19 to 88. 15% of participants received a cancer diagnosis during this time. 55% were happy to have received results virtually with 97% reporting that this was done sensitively. 84% of patients reported that they understood the next steps in their management pathway and 74% were clear about the supportive care available to them. An equal number of patients were reviewed by nurses and doctors.

Conclusions: The adaptation to our services may have resulted in several improvements, namely in the time frames of patients being seen and assessed. Reducing clinic burden by creating virtual follow-ups is acceptable to patients and utilising nurse practitioners, doctors and supportive staff may help to improve pathways in the long-term beyond the present pandemic.