

## Document Control

<b>Title</b> <b>Haematology Postal clinic Standard Operating Procedure</b>			
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<b>Consulted with the following stakeholders: (list all)</b> <ul style="list-style-type: none"> <li>Clinical lead</li> <li>Lead Haematology CNS</li> <li>Modern Matron for Cancer Services</li> <li>Dr Todd, Consultant Haematologist</li> </ul>		<b>Contact responsible for implementation and monitoring compliance:</b> Cancer Manager Modern Matron for Cancer Services	
		<b>Education/ training will be provided by:</b> Dr Tony Todd, Consultant Haematologist	
<b>Approval and Review Process</b> <ul style="list-style-type: none"> <li>Haematology governance group</li> </ul>			
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## 1. Processes

1.1. This service covers patients with chronic lymphocytic leukaemia (CLL), low grade lymphoma, and monoclonal gammopathy of uncertain significance (MGUS) who satisfy the eligibility criteria for enrolment in the postal clinic service.

1.2. Once a week secretary checks postal clinic box in the lab and retrieves any questionnaires to give to Dr Todd/ CNS Haematology

Secretary check for any non-responders in the diary.

## 2. FOR NON-RESPONDERS 14-60 days post guide date

2.1. Check on PAS to see if any blood tests were analysed around the guide date – if yes then possible lost questionnaire

2.2. Check clinical correspondence system to make sure no hospital admission or other intervention which may account for non-response

2.3. If no bloods and no appropriate explanation on Trak Care send 'standard missed appointment letter'

2.4. If suitable blood results available then call patient and do questionnaire over the telephone then follow flow chart for their condition as normal.

2.5. If no bloods but appropriate explanation on Trak Care then send fresh questionnaire and ask for return within 2 weeks

## 3. FOR NON-RESPONDERS >60 days post guide date

3.1. Discharge from outreach clinic and send standard discharge letter to GP, copied to original consultant

3.2. Make appointment in original consultant clinic

## 4. FOR RESPONDERS

4.1. Check blood results on PAS

4.2. Check clinical correspondence system for any relevant new information

4.3. Review questionnaire

4.4. Follow disease flowchart and select appropriate standard letter **and follow up interval**

4.5. Complete entry in notes,

Appendix 1: Decision Flow Diagram

**CLL Follow-up decision tree**

