

For GP use only: please code this letter as cancer treatment completed:

Snomed code 413737006	Cancer hospital treatment completed (situation)
8BCF.00	Read Cancer hospital treatment completed

GM Cancer standard template for primary breast cancer treatment summary

Please delete this title and box after reading these instructions.

Remove all wording that does not apply to a particular patient in order to personalise it to the individual.

If you need to localise this treatment summary, eg job titles do not match those used in your Trust or adding your Trust logo, please do so, but please retain all other information.

Remember to ensure sections don't overrun onto the next page or titles separate from the body of the text before sending.

Patient Name

Hospital Name

Patient Address

Hospital Address

Date of Birth: 00/00/0000

Hospital No: 01234567

NHS No: 999 999 9999

Dear **[INSERT PATIENT NAME]**

Thank you for attending your **[INSERT CLINIC NAME]** appointment on **[INSERT DATE]**.

Please find below the summary of your diagnosis, treatment and the ongoing management plan that we discussed. A copy of this has also been sent to your GP. Everyone's management plan is different, as it is based on their diagnosis and treatment. This plan is specific to your needs.

Our **(INSERT LOCAL TRUST SERVICE NAME)** has been designed to increase your knowledge and wellbeing and to help you move forward now that your initial treatment has finished. Please remember that if you do feel anxious or would like further advice at any time you are welcome to contact your Breast Care Nurse who can recommend a wide range of resources and services that have been designed to help you.

Key Contact Numbers:

Breast Care Nurse	Name: Contact Number:
Breast Cancer Care Coordinator	Name: Contact Number:

Diagnosis and Treatment to Date:

Diagnosis:	<i>Please give full details</i>	Date of Diagnosis:	
Histology:			

Summary of Treatment and relevant dates:*Please be specific and give full details, avoiding jargon.***Treatment aim:****Further Treatment and Management [Delete AS APPROPRIATE]****Further Treatment**

Radiotherapy	Leaflet given	<input type="checkbox"/>
Chemotherapy	Leaflet given	<input type="checkbox"/>
Hormone therapy (endocrine)	Leaflet given	<input type="checkbox"/>
Herceptin	Leaflet given	<input type="checkbox"/>
Bisphosphonates	Leaflet given	<input type="checkbox"/>

Further Management

You will be called for an annual clinical review	<input type="checkbox"/>
You will be called for a mammogram every year for 5 years following diagnosis or until your 50th birthday	<input type="checkbox"/>
You will be called for a mammogram every year for 3 years following diagnosis or until your 50th birthday	<input type="checkbox"/>
Bone density (DEXA) scan [PLEASE ADD DETAILS]	<input type="checkbox"/>

If you have any concerns about breast symptoms between mammograms it is important that you contact your Breast Care Nurse.

Possible Side Effects from the treatment(s) you have had

Some side effects can improve quickly, however some, such as fatigue, may take longer to improve. **If you are struggling to cope with side effects, or if the side effects are getting worse rather than better, please contact your Breast Care Nurse for advice.**

[DELETE IF NOT APPROPRIATE]**Possible side-effects from surgery**

- Changes in the look and feel of the breast, chest wall or armpit due to scarring from surgery.
- Numbness and/or long-term pain/discomfort around the site of surgery and upper arm.
- Swelling/Fluid build-up in the arm, hand or breast (lymphoedema) - please contact your Breast Care Nurse if this occurs so that they can arrange further assessment.

Possible side-effects from endocrine treatment

- Hot flushes.
- Aches and pains in joints.
- Feeling of tiredness or exhaustion (fatigue).
- Mood swings.
- Reduced libido (sex drive) and vaginal dryness.

Possible side-effects from radiotherapy

- Changes in the appearance of the breast, skin or nipple.
- Tiny visible blood vessels on the skin surface (often called 'spider veins' or 'telangiectasia').
- Long-term pain or discomfort of the breast or chest wall.
- Swelling/fluid build-up in the arm, hand or breast (lymphoedema) - please contact your Breast Care Nurse if this occurs so that they can arrange further assessment.
- Feeling of tiredness or exhaustion (fatigue).

Possible side-effects from Herceptin

- Feeling of tiredness or exhaustion (fatigue).



- Joint and muscle pains.
- Flu-like symptoms.
- Heart problems – your heart will be carefully monitored whilst taking Herceptin.

Your Herceptin Team will give further advice and details and address any issues at your appointment: **[ADD CONTACT DETAILS].**

Possible side-effects from chemotherapy

- Feeling of tiredness or exhaustion (fatigue) (may persist for several months after chemotherapy).
- Difficulty with concentration and memory (may persist for 1-2 years after treatment).
- Tingling, numbness or pain in fingers and toes (known as 'peripheral neuropathy').
- Increased risk of early menopause or infertility.
- Rare risk of developing second cancers.

Possible Immediate effects from Bisphosphonates

- Feeling of tiredness or exhaustion (fatigue).
- Flu-like symptoms.
- Poor blood supply to the jaw (Osteonecrosis). This is a rare side effect. If you have persistent jaw pain, loose teeth, swelling, redness or ulcers on the gums you should inform your Breast Care Nurse and see your dentist urgently.
- Thigh bone (femoral) fracture. This is a rare side effect. If you have persistent pain in your thigh, hip or groin, you should inform your Breast Care Nurse.

Although a common side effect there are also steps you can take to reduce the risk of developing lymphoedema. Your Breast Care Nurse can explain these and provide you with further information.

Additional information relating to lifestyle and support needs:

What can be done to reduce the risk of breast cancer returning?

- Taking medication as advised
- Regular physical activity
- Maintaining a healthy weight
- Reducing alcohol intake
- Stopping smoking

Your Breast Care Nurse can give you details of support with any of the above.

National Breast Screening Programme

Once you have completed your breast cancer follow up (usually 5 years of annual mammograms) you should continue to have mammograms every 3 years:

- The national breast screening programme invites women aged 50-70 for a mammogram every 3 years.
- If you are under 50 at the end of your cancer follow-up you will continue to have mammograms with your breast cancer team until you reach the age of 50 and then join the national breast screening programme.
- If you have been told you are a gene carrier you will join the national breast screening programme at the end of your breast cancer follow-up, regardless of your age.
- If you have had both breasts removed (a bilateral mastectomy) and are invited for breast screening, ask your breast screening unit for an opt-out letter or your GP can write to the Breast Screening Unit to inform them you do not require screening.



Symptoms of possible recurrence that will require investigation

Recurrence is uncommon but occasionally breast cancer can return in the breast, chest wall or armpit (**local recurrence**) or in a different part of the body (**secondary breast cancer**).

If you notice any new lumps in your breast (either side), armpit, or mastectomy scar, or new changes to the breast shape, skin or nipple, it is important that you contact your Breast Care Nurse to arrange assessment.

The image below shows the possible symptoms of secondary breast cancer. If you experience these symptoms, with no obvious other cause (e.g. a common cold, a back injury etc) they need to be reported to your Breast Care Nurse.

Secondary Breast Cancer
Also known as metastatic or advanced breast cancer

If you have had breast cancer be aware of these **RED flags*** for secondary breast cancer.
There are 5 main areas that secondary breast cancer can appear.

- BRAIN**
Frequent headaches, vomiting (first thing in the am), dizzy, visual disturbance, fits, impaired intellectual function, mood swings, balance, fatigue. Family members and friends may say you are not your normal self.
- BONE**
Pain in bones — commonly thigh, arm ribs and back. Can be dull ache or sharp shooting pain. Bone pain with no obvious cause or haven't fallen over, report any new, unusual and increasing pain.
- LYMPH NODES**
Swelling or lumps and pressure in chest/armpit/neck areas, dry cough.
- LUNG**
Sharp pain on breathing in chest and back area, non productive cough, fatigue, blood clots can also cause shortness of breath.
- LIVER**
Bloating, affected appetite, weight loss, fatigue, weak, pain near ribs on right hand side.

Please visit abcdiagnosis.uk
Twitter: [@abcdiagress](https://twitter.com/abcdiagress)
Facebook: [facebook.com/abcdiagress](https://www.facebook.com/abcdiagress)

***RED FLAG SYMPTOMS NEED TO BE REPORTED TO YOUR BREAST CARE NURSE**

abc
After Breast Cancer Diagnosis

For additional information please visit abcdiagnosis.co.uk

Other Useful Contact Numbers: [DELETE AS APPROPRIATE]

Surgical Secretary	<i>[INSERT CONTACT DETAILS]</i>
Prosthetic Nurse	<i>[INSERT CONTACT DETAILS]</i>
Herceptin Team	<i>[INSERT CONTACT DETAILS]</i>
Bisphosphonates Team	<i>[INSERT CONTACT DETAILS]</i>
Psychologist	<i>[INSERT CONTACT DETAILS]</i>
Other <i>[INSERT DETAILS]</i>	<i>[INSERT CONTACT DETAILS]</i>
Other <i>[INSERT DETAILS]</i>	<i>[INSERT CONTACT DETAILS]</i>

Treatment Summary Completed by:	
Copy sent to GP:	<input type="checkbox"/>
Copy sent to Consultant:	<input type="checkbox"/>
Copy sent to other Health Care Professional(s):	<i>[INSERT DETAILS]</i>

ADDITIONAL NOTES FOR GP

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Personalised Care and Support Plan <input type="checkbox"/> (attached)	
Health and Wellbeing Information and Support given	<i>[INSERT DETAILS]</i>
Prescription Charge exemption certificate <input type="checkbox"/>	Free prescription reminder <input type="checkbox"/>
Advice given on services available on prescription	<i>[INSERT DETAILS]</i>
Advice given to apply for Personal Independence Payment (PIP)	Yes/No/Not applicable

Will <i>[INSERT PATIENT NAME]</i> be self-managing?	Yes / No <i>[DELETE AS APPROPRIATE]</i> <i>[IF NO PLEASE STATE REASON]</i>
Advise entry onto primary care palliative or supportive care register?	Yes/No/Not applicable
DS1500 application completed?	Yes/No/Not applicable
Prescription Charge exemption certificate	Yes/No/Not applicable

Required GP actions (e.g. ongoing medications/ osteoporosis screening)
Cancer Care Review
Follow instructions as per oncology treatment summary on completion of adjuvant treatments.
<i>All treatment summaries are subject to review in light of evidence based changes to clinical protocols and treatment toxicity.</i>
<i>Additional resources and information for primary care staff are available through www.gatewayc.org.uk</i>