

Recommendations

Box 1 Recommended safety netting information to communicate to the patient

High Priority Cancer Safety Netting Advice (Include in patient communication)
The likely time course (time to resolution of self-limiting condition) of current symptoms (e.g. cough, bowel symptoms, pain)
Specific information about when and how to re-consult if symptoms do not resolve in the expected time course
Specific warning symptoms and signs of serious disease (e.g. cancer)
Who should make a follow up appointment with the GP, if needed (usually requesting the patient make the appointment, sometimes the doctor)
Intermediate Priority (Consider including in patient communication)
If a diagnosis is uncertain, give a clear explanation for the reasons for tests or investigations (e.g. to exclude the possibility of serious disease or cancer)
If a diagnosis is uncertain, that uncertainty should be communicated to the patient

Box 2 Recommended safety netting actions that GPs should take during or shortly after the consultation

High Priority Cancer Safety Netting Advice (Include in consultations)
Safety net advice should be documented in the medical notes
GPs should consider referral after repeated consultations for the same symptom where the diagnosis is uncertain (e.g. three strikes and you are in).
The GP should ensure that the patient understands the safety netting advice
GPs should take additional measures to ensure that safety netting advice is understood in patients with language and literacy barriers
GPs should keep up to date on current guidelines for urgent referral for suspected cancer
Intermediate Priority (Consider including in consultations)
If symptoms do not resolve, further investigations should be conducted even if previous tests are negative
Safety netting advice should be given verbally

Box 3 Recommended safety netting actions for Practices.

High Priority Cancer Safety Netting Advice – (Ensure patient communication procedures are in place)
The practice should have procedures in place to ensure that patients are aware of how to obtain results of investigations
Practices should ensure that current contact details are available for patients undergoing tests/investigations or referrals
The practice should have a system for communicating abnormal test results to patients
Practices should have a system for contacting patients with abnormal test results who fail to attend for follow up
High Priority (Ensure reliable practice systems are in place)
Practice systems should be in place to document that all results have been viewed, and acted upon appropriately
Practices should have policies in place to ensure that tests/investigations ordered by locums are followed up
Practices should conduct significant event analysis for delayed diagnoses of cancer (focusing on symptoms, signs, diagnostic procedures, continuity of care and reasons for delay)
Intermediate Priority (Consider using reliable practice systems)
Practice systems should be able to highlight repeat consultations for unexplained recurrent symptoms/signs
Practices should conduct an annual audit of new cancer diagnoses
Practices should participate in cancer awareness campaigns
Practice staff involved in processing /logging of results should be aware of reasons for urgent referral under the 2 week wait