



Please delete before use	Letter Name	Gynae_EoTS_EndometrialPIFU_102023
	Created	
	Reviewed	November 2023
	Review date	November 2025

**GM Cancer standard template for endometrial cancer treatment summary**

This Treatment Summary is designed specifically for the following endometrial cancers:

- ENDOMETRIAL G1-2, STAGE 1A NO LVSI, NO XRT
- ENDOMETRIAL Stage 1b, G1-2, no LVSI. May have TAHBSO +/- brachy
- ENDOMETRIAL G1-2, STAGE 1B NO LVSI WITH BRACHY

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, e.g. 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.

**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

**Patient Name**

**Hospital Name**

**Patient Address**

**Hospital Address**

**Date of Birth:**

**Hospital No:**

**NHS No:**

Dear **[INSERT PATIENT NAME]**

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

Please find below the summary of your diagnosis and treatment for endometrial cancer, possible effects of treatment and your ongoing management plan that we discussed. A copy of this has also been sent to your GP. This plan is specific to your needs and has been designed to increase your knowledge and wellbeing as you move forward in your cancer care.

Please remember that if you do feel anxious or would like further advice or to talk through a concern or symptom at any time, you are welcome to contact your Clinical Nurse Specialist Team. They are there to support you as and when you need. Ongoing support and advice is also available from your Cancer Care Coordinator who works within the Cancer Nurse Specialist Team. They have a wealth of knowledge about resources and support that are available to you and are often a good first point of contact.

**Your Key Contact Numbers:**

<b>Gynaecology Clinical Nurse Specialist</b>	<b>Name:</b> <b>Contact Number:</b>
<b>Gynaecology Cancer Care Coordinator/ Cancer Support Worker</b>	<b>Name:</b> <b>Contact Number:</b>

Please note that there is no CNS service at the weekend/bank holidays. If you require immediate support, please call NHS 111, or the district nurses (if you have a designated district nurse) for advice. If you feel you need more immediate attention, please attend your local Accident and Emergency Department.

**Diagnosis and Treatment to Date:**

<b>Diagnosis:</b>		<b>Date of Diagnosis:</b>	
<b>Stage:</b>			
<b>Treatment aim:</b>			
<b>Summary of Treatment and relevant dates:</b>			
<i>Please be specific and give full information on detail, dates and intent, avoiding jargon.</i>			

**Further Treatment and Management (ongoing tests and appointments):**  
[DELETE AS APPROPRIATE]

**Low Risk Stage 1a endometrioid adenocarcinoma, G1-2, no LVSI**

Your Clinical Nurse Specialist Team will be in contact in 3 months for a telephone review appointment. You will remain under the care of the Clinical Nurse Specialist Team for the next 5 years. During this time, your Clinical Team will be available to support you as and when you need. At any point, should you have any worries or concerns or would like to discuss a new symptom or side effect of treatment, please contact your Clinical Nurse Specialist Team directly without delay.

**Intermediate Risk Stage 1b endometrioid adenocarcinoma, G1-2, no LVSI**

Your Clinical Nurse Specialist Team will be in contact in 3 months for a telephone review appointment.

You will remain under the care of the Clinical Nurse Specialist Team for the next 5 years. During this time, your Clinical Team will be available to support you as and when you need. At any point, should you have any worries or concerns or would like to discuss a new symptom or side effect of treatment, please contact your Clinical Nurse Specialist Team directly without delay.

**Or**

You will be required to attend a clinic appointment every 4 months for the next 2 years.

After 2 years, you will no longer have regular clinical appointments scheduled. Instead, your Clinical Nurse Specialist Team will be available to support you as and when you need. At any point, should you have any worries or concerns or would like to discuss a new symptom or side effect of treatment, please contact your Clinical Nurse Specialist Team directly without delay.

### Things for you to do:

- If you do not receive a date for your follow-up test as per the above schedule, or if your tests are cancelled and rebooked, please contact your Cancer Care Coordinator to discuss.
- Please contact your GP to schedule an appointment for a Cancer Care Review. This should take place at 3 months and 12 months after your cancer diagnosis.
- We recommend you have your annual flu jab

### Possible short and long term side effects from the treatment(s) you have had [Delete AS APPROPRIATE]

Some side effects can improve quickly; however some 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 Gynaecology Clinical Nurse Specialist for advice.**

#### Possible side-effects from surgery

- Lower abdominal pain (post-operative adhesions)
- Weakening of abdominal scar (hernia)
- Premature menopause
- Fluid filled cysts (lymphocysts) (if lymph nodes has been surgically removed)
- Swelling/fluid build-up in one or both legs (lymphoedema) (if lymph nodes has been surgically removed)
- Weakening of bones (Osteoporosis) (if premenopausal pre op)
- Sexual concerns/dysfunction
- Change in bladder/bowel habit
- Pain with sex
- Emotional concerns and worries

#### Possible side-effects from radiotherapy

- Fatigue
- Diarrhoea
- Problems urinating
- Vaginal scarring or dryness

**Although lymphoedema is not a common side effect, the risk is higher if you have had surgery to remove the lymph nodes as well as radiotherapy. There are steps you can take to reduce the risk of developing lymphoedema and your Clinical Nurse Specialist can explain these and provide you with further information.**

### Symptoms of possible recurrence that will require investigation

- Vaginal bleeding and/or discharge
- Bleeding after sex
- Persistent abdominal bloating that last longer than 4 weeks
- Persistent pelvic or abdominal discomfort that lasts longer than 4 weeks.
- Leg swelling

- Unexplained weight loss

After you have had treatment for cancer it can be a worrying time. Please remember that you will have the same aches and pains you may have always had. If you develop a new health problem, it may not be related to your recent cancer and its treatment.

## Personalised Care for Cancer:

Access to Health and Wellbeing Information and Support is a continuous element of your care. Your Support Plan can be reviewed at any point if you feel your needs have changed. Please contact your Clinical Nurse Specialist at any time if you feel your needs have changed and you would like referring to a service for further support.

### Referral/advice given on services available

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> Allied Healthcare Professional | <input type="checkbox"/> Benefits Advice Service   | <input type="checkbox"/> Bowel / Bladder Continence Service            | <input type="checkbox"/> Complementary Therapist |
| <input type="checkbox"/> Dietitian                      | <input type="checkbox"/> District Nurse  | <input type="checkbox"/> Macmillan Cancer Information & Support Centre | <input type="checkbox"/> Occupational Therapist  |
| <input type="checkbox"/> Physical Activity              | <input type="checkbox"/> Physiotherapist   | <input type="checkbox"/> Sexual Dysfunction                            | <input type="checkbox"/> Therapist               |
| <input type="checkbox"/> Social Worker                  | <input type="checkbox"/> Speech & Language Therapist   | <input type="checkbox"/> Stoma Service                                 | <input type="checkbox"/> Support Group           |
| <input type="checkbox"/> Vocational Rehab               | <input type="checkbox"/> Prehab for cancer and Recovery Programme (please continue engaging in rehabilitation) | <input type="checkbox"/> Lymphoedema service                           |  |

## General Information relating to your lifestyle, wellbeing and support needs:

A number of lifestyle choices can affect your ongoing health and wellbeing. These can help you regain or build physical strength, reduce severity of side effects and reduce the risk of developing secondary cancers or other health issues. This is also an important time for you to regain or feel more in control of your health and wellbeing, often 'lost' when you are diagnosed with cancer.

### Managing your wellbeing: Looking after yourself in good times and bad

We can all struggle on a day-to-day basis. Dealing with a diagnosis of cancer and undergoing treatments can be particularly challenging and it may add an additional level of complexity in looking after yourself when you are not feeling your best. You may notice that you are more worried and stressed than usual, or you may feel sluggish and low. Adjusting and adapting to everything you have been through can take time, and sometimes it needs a bit of extra support and effort to figure out how to be okay when life is proving challenging.

### Exercise and Physical Activity:

It has been proven that engaging in regular exercise or physical activity (ideally 3 times a week) can address feelings of anxiety, experience of fatigue and low mood. It can also improve heart health, muscle strength and maintaining a healthy weight. Even a small amount of physical activity is helpful if you are able. You may need to change the type of activity you do to your specific needs and limitations, so we advise talking to your GP before you start. Please visit [www.prehab4cancer.co.uk](http://www.prehab4cancer.co.uk) for more information and helpful resources.

**Eating Well:**

Eating a healthy balanced diet is an important part of maintaining good health and can help you feel better. This means eating a wide variety of foods in the right amounts and maintaining a healthy body weight. Depending on the surgery you have had on your bowel you may need additional advice and support to achieve this.

**Reducing alcohol to within safe limits:**

The current UK guidelines to keep health risks to a low level for both men and women are to avoid or not to regularly drink more than 14 units a week (6 pints of average-strength beer or 10 small (125ml) glasses of low-strength wine).

**Stopping smoking:**

If you are a smoker, giving up smoking will improve blood circulation, lower blood pressure, reduce the risk of a stroke, improve your immune system (ability to fight infection), and help to improve your breathing or stop it from getting worse.

**If you would like more help and advice, please speak to your Gynaecology Clinical Nurse Specialist Team.**

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

<b>Personalised Care and Support Plan</b> <input type="checkbox"/> (attached)	
<b>Prescription Charge exemption certificate</b> <input type="checkbox"/>	<b>Free prescription reminder</b> <input type="checkbox"/>
<b>Health and Wellbeing Information and Support given</b>	<b>see referral advice given on services available</b>
<b>Advice given to apply for benefits assessment if required</b>	Yes/No/Not applicable
<b>SR1 application completed?</b>	Yes/No/Not applicable
<b>Required GP actions</b> (e.g. ongoing medications/ osteoporosis screening)	
Cancer Care Review	
Follow instructions as per oncology treatment summary on completion of adjuvant treatments	
<b><i>All treatment summaries are subject to review in light of evidence based changes to clinical protocols and treatment toxicity.</i></b>	
<b><i>Additional resources and information for primary care staff are available through <a href="http://www.gatewayc.org.uk">www.gatewayc.org.uk</a></i></b>	