

Freedom of Information Request	FOI 21-171	12 th May 2021
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Please can you provide the pathway for oncology patients who have developed thromboembolism. I believe this pathway is referred to as the cancer associated thromboembolism pathway (CAT). I am after where patients admit, where they are treated and with what medication plus what if any follow ups are in place.

The Health has a dedicated cancer associated thrombosis (CAT) service which is an outpatient service. Patients are usually diagnosed and subsequently referred via two routes, either:

1. Patients with symptoms of thrombosis are seen acutely via their GP, as a medical admission, or through accident and emergency. The patient will undergo a scan for thrombosis as either a doppler ultrasound of the leg (for deep vein thrombosis) or a CTPA for pulmonary embolus.
2. Or a pulmonary embolus is picked up incidentally on a cancer staging scan.

Within the Health Board the current practice is to commence the patient on weight adjusted dalteparin (Fragmin) ensuring that the patient has enough dalteparin for a month. The healthcare professional will also ensure that the patient is able to administer the daily injection, either by teaching them (or a family member) to do it or arranging for District Nurse visits. The patient will then be referred to the CAT clinic.

It is our aim that patients will be seen within 4-weeks. Pre-COVID patients would be seen either at Royal Gwent Hospital, Ysbyty Ystrad Fawr or Nevill Hall Hospital dependent upon their geographical location. We would stress that not all clinicians refer their patients, but our aim to see all patients referred within 4-weeks.

During the pandemic, however, all initial contacts have been undertaken by telephone.

At the clinic patients will have the concept of CAT 3 explained to them, questions answered and long-term plans discussed. For those with no contraindications or drug interactions, conversion to an oral agent will be discussed and potential plan put in to place.

Most patients will have regular follow-up, the frequency depending on the complexity of their condition and stability of their anticoagulation.

Complex cases are presented at the weekly CAT Multi-Disciplinary Team meeting.