Appendix 6: Summary of the findings for each included audit.(WTA 1-241)

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 1) **Year:** 2001 **Institution type:** PCT **Study type:** clinical audit **Cancer site:** Brain & CNS **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 7.00 to 4.01	**Aims:** To assess the effectiveness of the 2WW system for CNS/brain tumours and to contrast this with the number of patients with neurological cancers identified independently of this system. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To determine the proportion of patients in whom referral guidelines were followed and had CNS/brain cancers $ To determine the number of patients during the audit period with neurological cancers who were not identified by the system **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 45 **Patient population:** 45 patients referred to neurology departments (43 case notes available) **Population source:** Not stated	**Data source:** Referral letters held by the GP practices and hospital case notes. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** 2WWR GP referral letters were compared to DoH referral guidelines. **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** No **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** No **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** 13/43 (30%) of referrals did not follow DoH guidelines **Other results** $ 4/43 2WW patients had CNS tumours (2 astrocytomas, 2 cerebral metastases). The remainder were diagnosed with chronic daily headache (10), epilepsy (5), migraine (3), demyelination (2), essential tremor (2), other (17).	**Comments:** Few details of the audit conduct were given, making appraisal difficult. During the audit period = 69 neurological cancers were identified independently of the 2WWR. Pre-2WWR, 12 patients were referred as emergencies, none of which had CNS/brain cancer. **Dissemination:** Journal publication(WTA 242)

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 2) **Year:** **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** Mixed **Design:** Prospective before and after **Recruitment time frame (follow-up, where reported):** Year beginning 1.4.1996 vs year beginning 1.4.1999	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Not stated **Extra outcomes (audit criterion not relating to the 2 week wait policy** Referral to diagnosis =< 4 w **Extra outcomes (non-criterion based):** Decision to operate to 1st therapeutic procedure	**Sample type** Consecutive series **Sample size:** **Patient population:** Not stated **Population source:** 1996: histopathology database 1999: all referrals to breast clinic	**Data source:** Period 1: histopathology database Period 2: audit proformas **How collected:** Data on all breast clinic referrals were entered into proformas by clinicians, then scanned into a clinical database. Missing data were captured by casenote review. **How validated:** Detailed review of a random selection of cases, cross-correlation with the patient administration system (PAS) for diagnosis, and comparison with the histopathology database. **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Yes **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Yes **Tool design:** Not stated **Collection validity:** Yes **TF justified:** Yes **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Period 1: 60% <= 2 w (median time 11 d) Period 2: 87% <= 2 w (median time 8 d) **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** Referral to 1st therapeutic procedure Period 1: median time = 56 d	**Comments:** Some methodological details, such as source checking, suggested this was a well-conducted audit, even though aims and objectives were not stated explicitly. Unfortunately the report was supplied without the tables mentioned in the text (care pathway, results, including patient numbers), making overall evaluation impossible. **Dissemination:** Not stated

Period 2: median time 47 d	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 3) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.00 to 30.09.00	**Aims:** To evaluate the timeliness of care and treatment provided to women who are found to have breast cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The following 2WW relating criterion (all derived from the British Association of Surgical Oncology (BASO) guidelines) was used: $ 80% of patients, found to have cancer, should be seen by the specialist within 2 w of receipt of referral. **Extra outcomes (audit criterion not relating to the 2 week wait policy** The following criteria (all derived from the British Association of Surgical Oncology (BASO) guidelines) were used: $ >90% patients, found to have cancer, should have on site access to triple assessment. $ >90% patients should be admitted for an operation within 2 W of surgical decision to operate for diagnostic purposes. $ >90% patients should be admitted for 1st therapeutic operation within 3 w of informing patient of surgical need $ Histological node status should be obtained in 90% of invasive tumours planned for curative operation. $ Where node sampling has been undertaken a minimum of 4 nodes should be excised in 90% of cases, with the exception of women >80 years. **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 45 **Patient population:** Patients diagnosed with breast cancer and treated between 01.04.00 and 30.09.00. Age range was 31 to 93 years. **Population source:** The Patient Administration System (PAS).	**Data source:** PAS, patient's case notes, Management Services Information, and the PATH Histology System. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Unclear **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Seen within 14 days of receipt of referral: 23/29 patients referred by their GP (14/15 GPM/SFB (17 days for 1 patient); 7/9 NFB (16 days for 1 patient, 23 days for 1 patient); 1/3 NRB (16 days for 1 patient, 18 days for 1 patient); 1/2 ROS (20 days for 1 patient)). Mean, median, mode days between receipt of GP referral and 1st appointment (n=29):	**Comments:** The audit (for 1999/2000) was commissioned by the Primary Care Trusts. Data sources were listed, but it was not stated whether all were used for each patient, and which ones were used for measuring the audit indications. Although data on the GP's suspicion of malignancy were reported, it was not clear how many of the referrals would have come under the urgent 2WW rule of the DoH guidelines, or how many patients with a referral by the GP marked with suspicion of malignancy or urgent were seen within 14 days.

9.6, 9, 9 (range 0-23). **Results relating to conformity of GP referral with guidelines:** **Other results** When a referral is received by the Trust, it is given an appointment type code. 15 patients had a GPM/SFB code (suspected malignancy/suspected fastrack breast), 9 were coded NFB (new fastrack breast), 3 NRB (new routine breast), and 2 ROS (routine outpatients surgery clinic). 16 patients were referred from the Breast Screening Unit and 29 by their GP. Data were reported on whether the GP referrals indicated suspicion of malignancy: 16 GP suspected malignancy 3 not marked by GP 3 not suspected by GP 4 unsure 3 marked urgent by GP Time period of symptoms that women reported to GPs ranged from 7 days to 18 months.	The audit looks at the number of patients seen within 14 days of the trust's receipt of the referral as opposed to the GP's decision to refer. **Dissemination:** The results were disseminated to Audit leads, three referring primary care trusts, the Health Authority, the cancer services co-ordinator, the general manager, two breast care nurses, and the Medical Director.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 4) **Year:** 2000 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.01.99 to 30.08.99	**Aims:** To carry out an audit of breast cancer patients. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The following 2WW relating criteria (all derived from the British Association of Surgical Oncology (BASO) guidelines) were used: $ The unit should see >80% of patients, who have cancer, within 2 W of receipt of referral. $ >90% patients should be admitted for an operation within 2 W of surgical decision to operate for diagnostic purposes. **Extra outcomes (audit criterion not relating to the 2 week wait policy** The following criteria (all derived from the British Association of Surgical Oncology (BASO) guidelines) were used: $ >90% patients should be admitted for 1st therapeutic operation within 3 w of informing patient of surgical need $ Histological node status should be obtained in 90% of invasive tumours planned for curative operation. $ Where node sampling has been undertaken a minimum of 4 nodes should be excised in 90% of cases. $ >90% of patients diagnosed with cancer should have had on-site simultaneous access to triple assessment. $ Overall inadequate cytology rate should be <20% for all new patients undergoing triple assessment. $ >90% of patients subsequently proven to have cancer should have a preoperative fine needle aspiration or core biopsy that is diagnostic of cancer. **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 50 **Patient population:** Patients diagnosed with breast cancer and admitted for treatment at the hospital trust (n=50). One patient was previously operated on at another hospital, and was excluded due to missing data. 15 patients were referred from the Breast Screening Unit to a consultant clinic appointment, and 34 were referred by their GP directly to the breast clinic. **Population source:** Patient administrative system (PAS) using the diagnostic codes (ICD 10): C50.1, C50.9 and C79.	**Data source:** Patient administration system (PAS), patient's case notes, the PATH Histology System and coding information. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Unclear **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Seen within 14 days: 13/34 (5 SFB, 7 NFB, 1 NRB (that was marked urgent)) Mean, median, mode days between referral and 1st appointment (n=34):	**Comments:** This audit is the second of a two-part audit, commissioned by a Health Authority. The first part of that audit is also included in this review.(WTA 29)

19, 13, 10 (range 2-47) 3 patients did not attend their 1st appointments and one patient changed their first appointment. The time taken is from their new booking date. Time from referral to appointment ranged from 30 to 39 days (n=3). **Results relating to conformity of GP referral with guidelines:** **Other results** Referrals were coded into one of three appointment types, details of which are shown in the previous related audit:(WTA 29) suspected fast track (SFT, n=6), new fast track breast (NFB, n=15), and new routine breast (NRB, n=9). No code was given to 4 referrals (recorded as urgent (n=1) or for the clinic (n=3) by the GP).	Not much data were provided on the methodology of the audit. Data sources were listed, but it was not stated whether all were used for each patient, and which ones were used for measuring the 2WW criterion. **Dissemination:** The results were disseminated to the local health authority, the general manager of the Surgical Service Unit, and the breast care nurse.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 5) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 04.12.02 to 03.01.03.	**Aims:** **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To evaluate the efficacy of GP patient referrals to the Trusts specialist consultants for breast. Indicators in the audit were intended to assess timely and accurate referral according to urgent/non-urgent status and to highlight any significant shortcomings of the referral process. The audit also evaluated whether new referral forms were being used. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 50 **Patient population:** New patients referred by their GP to the Breast Clinics at a single hospital, who attended between 04.12.02 and 03.01.03 (n=50). 3 patients were male. The age range was 14 to 82 years. The type of referral was 'urgent' for 36 patients, 'non-urgent' for 12, and not stated for 2. At the hospital, referrals were allocated an appointment type: GPM (n=36) = urgent, to be seen within 2 weeks; NFR (n=9) = priority, to be seen within 3 weeks; and NRB (n=5) = routine. **Population source:** Not stated	**Data source:** Referral forms, the patient administration System (PAS), and case notes. The consultant breast surgeon also filled in a specially designed data collection sheet for each patient in clinic. **How collected:** The correct completion of the referral forms was assessed (not stated by whom) and a consultant opinion was sought to assess the suitability of urgent/non urgent status. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** No **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Seen within 14 days: 34/50 6 urgent referrals were not seen within 14 days (5/36 GPM and 1/5 NRB). Reason for not being seen within 14 days (5 urgent referrals): 2 did not attend 1st appointment, 1 referred during Christmas break and regular clinic cancelled for 2 weeks, 1 given routine appointment as the only physical symptom was breast pain (non-urgent criteria) but had previous history of cancer, and 1 reason not clear.	**Comments:** The audit was commissioned by the Primary Care Trusts. The actual indicators used in the audit were not pre-specified in the methods section. The authors reported that 36 patients were referred as urgent (urgent 'referral type') and 36 were given a GPM appointment type. Only 3 referrals were considered, by the consultant to have been given an inappropriate appointment type (an urgent referral considered unnecessary for 2 referrals). However, 39 referrals were deemed urgent according to the medical symptom type. These figures therefore do not appear to add up. The authors did not report the upgrading of any non-urgent referrals.

Results relating to conformity of GP referral with guidelines: The medical symptoms indicated an urgent criteria for 39 and non-urgent criteria for 11 patients. Hospital consultants deemed 3 patients to have been given an inappropriate appointment type (by hospital): 2 GPM (referred as urgent, consultant disagreed that urgent referral was necessary) 1 NFR (referred as routine (to be seen within 3 weeks), no reason stated for a priority appointment) **Other results** Referral type (43 were faxed and 7 posted): New breast form 43 Old form 4 Letter 3 0/50 were diagnosed with cancer	The actual reasons for failing to meet the 2ww target was reported for only 5 patients (not clear if these were all GPM referrals), yet in a summary table of the 'breakdown of urgent referral not seen within 2W, 6 referrals were recorded (5 GPM and 1 NRB). It was not stated why a routine referral was included here, especially as 1 routine referral was classified by the consultant assessment as an inappropriate urgent referral. It is assumed that this is the same referral, although it was classified as 'NFR (within 3 weeks)' for the results relating to the consultant assessment. An NFR appointment type was not defined and it is therefore unclear if this was a typographical error or not. If this was an error, then it is unclear whether the referral was an NFR or an NRB. **Dissemination:** The results were disseminated to the associated specialist registrar, consultant general surgeon, consultant breast surgeon, staff grade in breast surgery, breast care nurse, Assistant Director Clinical Standards, four primary care trusts and the Clinical Governance Committee.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 6) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.01 to 30.09.01	**Aims:** To establish the timeliness of care and treatment for women subsequently proven to have a diagnosis of breast cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The following 2WW related criterion (all derived from the British Association of Surgical Oncology (BASO) guidelines) was used: $ 80% of patients, found to have cancer, should be seen by the specialist within 2 w of receipt of referral. **Extra outcomes (audit criterion not relating to the 2 week wait policy** The following criteria (all derived from the British Association of Surgical Oncology (BASO) guidelines) were used: $ >90% patients, found to have cancer, should have on site access to triple assessment. $ >90% patients should be admitted for an operation within 2 W of surgical decision to operate for diagnostic purposes. $ >90% patients should be admitted for 1st therapeutic operation within 3 w of informing patient of surgical need $ Histological node status should be obtained in 90% of invasive tumours planned for curative operation. $ Where node sampling has been undertaken a minimum of 4 nodes should be excised in 90% of cases, with the exception of women >80 years. **Extra outcomes (non-criterion based):**	**Sample type** Not stated **Sample size:** 51 **Patient population:** Patients diagnosed with breast cancer and treated at the Hospital Trust during the audit period (n=51). 10/51 patients were excluded as no data were available. 12 patients were referred from the Breast Screening unit and 29 by their GP. **Population source:** The Hospital Patient Administration System (PAS).	**Data source:** PAS, patient's case notes, Management Services Information, and the PATH Histology System. **How collected:** Data was collected by the clinical audit facilitator. The method used was not stated. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Unclear **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Unclear **Attrition:** No **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Seen with 14 days (GP referrals): 20/29 (14/14 GPM; 4/12 NFB) Mean time between receipt of referral and 1st appointment (n=29): 14 days (range 0 to 38; GPM range 0 to 14; NFB range 0 to 34). **Results relating to conformity of GP referral with guidelines:**	**Comments:** The audit (for 1999/2000) was commissioned by the three Primary Care Trusts. There were inconsistencies in some of the numbers being reported, e.g. in the text it was stated that 27 patients were referred by their GP, yet 29 were presented in summary tables. NFB was explained as next fastrack breast, and NRB as next routine breast, where as in other audits for this trust NFB is new fastrack breast, and NRB is new routine breast.

Other results When a referral is received by the Trust, it is given an appointment type code. 14 patients had a GPM code (GP suspected malignancy), 12 were coded NFB (next fastrack breast), and 1 NRB (next routine breast). 1 patient was not coded and 1 patient was coded as PP, the abbreviations of which were not explained. For referrals categorised as NFB, the GP did not suspect malignancy in 1, suspicion of malignancy was not marked in 1, and the GP was unsure in 10 referrals.	The audit looks at the number of patients seen within 14 days of the trust's receipt of the referral as opposed to the GP's decision to refer. **Dissemination:** The results were disseminated to Audit leads, referring primary care trusts, the Health Authority, cancer services co-ordinator, the general manager of the Surgical Service Unit, breast care nurses, and the Medical Director.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 7) **Year:** 2001 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** Breast **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.01 to 30.06.01	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 55 **Patient population:** Patients with breast cancer in the 3 month period (n=55, 39 casenotes obtained). **Population source:** List of patients with breast cancer obtained from the Histopathology Department.	**Data source:** Case notes. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Time from referral to first appointment for the 24 patients referred urgently was between 1 and 13 days. Time from referral to first appointment for the 8 patients referred routinely was between 4 and 19 days (6 were within 14 days). Mean for all referrals was 7.2 days, median 7 days. **Results relating to conformity of GP referral with guidelines:** **Other results** Referral source: 22 urgent faxed GP referral	**Comments:** This audit was reported as a Powerpoint presentation, therefore, very little detail was given. The two week rule was not mentioned, no aims or objectives were stated and very little information on methodology was reported. A high proportion of eligible patients' notes were not found. The results unrelated to the 2WW which have been presented in the results section relate to presenting symptoms, first investigation, confirmatory test, time from referral to confirmatory test, oncology referrals, hormonal/cytotoxic chemotherapy, time from oncology referral to oncologist's appointment date, time from referral to date of surgery, surgical procedures, stage, definitive treatment, and time from referral to definitive treatment.

3 other GP referral 7 breast screening service 3 under review in Breast Clinic 1 from another consultant 1 admitted via A&E 1 from SHO in Psychiatry 1 private patient	Results relating to the time from referral to first appointment were reported separately for 'urgent' referrals and 'routine' referrals, with no explanation of which types of referrals were classed as urgent and which as routine. 24 referrals were classed as urgent referrals, although only 22 patients had been referred as an urgent faxed GP referral. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 8) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.10.00 to 31.10.00	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 63 **Patient population:** 63 (1 m) urgent referrals for suspected breast cancer in the audit timeframe. 4 patients were excluded: not urgent, referred back to GP. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 51/59 (86%) seen =< 14 d 5 seen 15-16 d (post x 4, delayed fax x 1) 3 seen 17-21 d (delay in GP fax/clinic cancelled) 4/59 referrals received =< 24 h 4 received > 1 <= 2 d (delayed fax x 3, post) 1 received > 2 <= 3 d (delayed fax) 3 received > 4 <= 5 d (delayed fax x 2, post) 3 received > 5 <= 6 d (post)	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

4 received > 6 <= 7 d (delayed fax x 2, post) **Results relating to conformity of GP referral with guidelines:** 51/59 referrals were appropriate and met guidelines **Other results** 51 fax, 8 post Dx cancer = 14 No evidence cancer = 40 Awaiting further investigation = 1 Awaiting medical notes = 4	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 9) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.11.00 to 30.11.00	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 74 **Patient population:** 74 urgent referrals for suspected breast cancer in the audit timeframe. 1 patient was excluded: not urgent, referred back to GP. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 68/73 (93%) seen =< 14 d 2 seen 15-16 d (next OPA x 1, DNA + next OPA) 3 seen 17-21 d (next OPA x 2, DNA + next OPA) 64/73 referrals received =< 24 h 5 received > 1 <= 2 d (delayed fax x 3, post) 1 received > 2 <= 3 d (delayed fax) 1 received > 3 <= 4 d (post) 1 received > 5 <= 6 d (post)	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

1 received > 6 <= 7 d (post) **Results relating to conformity of GP referral with guidelines:** 57/73 referrals were appropriate and met guidelines **Other results** 67 fax, 6 post Dx cancer = 10 No evidence cancer = 62 Awaiting review = 1	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 10) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 01.02.01 to 30.04.01	**Aims:** To audit the time each patient with a symptomatic breast disease waited before seeing her family doctor and to assess if the delay had affected the management of the patient in any way. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The audit also looked at the quality of GP referrals, to see if the established national and local guidelines were adhered to (that is appropriateness of 2-week wait and the impact on the breast clinic in respect of other patients who have not been referred under the 2-week referral services). **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** **Sample size:** 80 **Patient population:** Consecutive patients with symptomatic breast disorders (referred as urgent by the GP) seen in the fast-access breast clinic (n=70, mean age 46 years, range 18-84). 10 non-urgent referrals seen within the study period were also included in the analysis to determine the appropriateness of such referrals. **Population source:** Not stated	**Data source:** Referral letters. The data source for histology data is not stated. **How collected:** The data collected included age of patient, patient's complaint, duration of the complaint, date when an appointment was made with their GP, date of actual appointment with GP and number of working days between receipt of referral letter and actual appointment with the hospital doctor. The date of referral to the breast surgeon was taken as the date the referral letter was written by the GP. It is not stated whether a predefined form was used or who collected the data. Data were recorded using Microsoft Excel software. **How validated:** **Process of applying audit criteria:** All referrals were vetted by the breast specialist and categorised into one of three groups based on the information on the referral letters that indicated whether the reason for referral was malignant, probably malignant, benign or indeterminate. The three groups were urgent, soon and routine. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** No **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: For 60/70 patients, the interval between the GP seeing the patient and writing the letter was within 2 days. The remaining 10 referrals were written within 3 to 4 days. Mean waiting time for 2WW referrals (n=70) to see the specialist was 6.6 days (range 5 to 17).	**Comments:** It is not stated how the 10 non-urgent referrals were selected from those referred during the timeframe of the audit. It would have been more appropriate to include all patients referred non-urgently during the timeframe of the audit, as a sample of 10 appears too small. The authors' conclusion relating to the impact of a delay on the outcome of breast cancer and anxiety

Amongst the referrals categorised as urgent by the specialist, 19/20 (95%) were seen within 5 days and the other was seen on the 7th day of referral due to a personal problem related to the patient. Amongst the referrals categorised as soon by the specialist, 17/20 (85%) were seen within 10 days and the remainder were seen within 15 days of referral. Amongst the referrals categorised as routine by the specialist, all were seen within one month of referral. **Results relating to conformity of GP referral with guidelines:** In 65% referrals the national and local guidelines were met. **Other results** Of the 70 patients referred as urgent by their GPs, 20 were considered as urgent, 20 as soon and 30 as routine by the breast specialist. Of the urgent referrals, adequate information required to determine the degree of urgency was provided in the referral letters of 18/20 patients. In the remaining groups 28/50 referral letters contained relevant but limited information. Of the 10 non-urgent referrals, 5 of the referral letters contained relevant but limited information. 1 of these patients had a breast cancer, the other 9 patients were appropriately referred as non-urgent. All 10 were seen by the specialist within 4 weeks. Malignancy was suspected in 12/20 patients classified as urgent by the specialist, 10 were histologically proven as malignant. 7/12 patients thought to be malignant were positively identified by the referring GPs as malignant and referred as such. All 20 patients classified as soon by the specialist had benign breast conditions, with breast pain being the main presenting symptom. None of the 30 patients classified as routine by the specialist had a malignant breast lesion. Almost all patients presented to their GP with painful nodular breast, in 9 cases the painful nodular breast lesion had disappeared at the time the patient was seen by the specialist.	levels does not follow from the results of their study, as this was not measured by their study. Further data relating to the population source, how participants were chosen from the population of non-urgent referrals and how data were collected are required to assess the possibility of bias in the results. The authors do not specifically state where they obtained data relating to the duration of the patient's complaint. The method of data collection and whether a predefined form was used are also not stated. The appropriateness of referrals was assessed by one clinician and decisions were not checked by a second. The authors do not state how referrals without adequate information were assessed for level or urgency by the breast specialist. They also do not state whether any of the non-urgent referrals were appropriate according to the guidelines for urgent referral. Other results reported include the time interval between the patient making their GP appointment and being seen by the GP, mean duration of symptoms and the prime reason for contacting the GP. **Dissemination:** The audit was published in a peer-reviewed journal.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment

Audit ID no.:
(WTA 11)
 	
Year:
2000
 	
Institution type:
General hospital
 	
Study type:
clinical audit
 	
Cancer site:
Breast
 	
Audit type:
2WWR
 	
Design:
Not stated
 	
Recruitment time frame (follow-up, where reported):
January to March 2000 (date of follow-up not stated)
	Aims:
	To investigate referral patterns, to establish if guidelines are being followed and to identify areas where improvements may be made to enable the service to meet demand.
	
	Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):
	To investigate referral patterns, to establish if guidelines are being followed and to identify areas where improvements may be made to enable the service to meet demand.
	Standards: All patients referred urgently for suspected breast cancer will meet the following criteria: Urgent - patient over 35 years with suspected breast cancer, appointment within 2 weeks
	$ lump
	$ persistent nodularity
	$ nipple or skin change
	$ other definite evidence of cancer regardless of age
	
	Extra outcomes (audit criterion not relating to the 2 week wait policy
	
	Extra outcomes (non-criterion based):
	Referrals made as a percentage of total practice population and radiological investigations performed.
		Sample type
		Consecutive series
		
		Sample size:
		83
		
		Patient population:
		All referrals made in quarter 4 (January to March 2000) and included in two week wait monitoring data (n=83).
		
		Population source:
		Not stated
			Data source:
			GP referral letter or proforma.
			
			How collected:
			Not stated
			
			How validated:
			
			Process of applying audit criteria:
			Not stated
			
			Statistical method (before and after studies only):
			Descriptive statistics.
				Involvement:
				Not stated
				Motive:
				Yes
				Project plan:
				No
				Source integrity:
				Unclear
				Appropriateness:
				Yes
				Inclusion criteria:
				Yes
				Source check:
				Not stated
				Tool design:
				Not stated
				Collection validity:
				Not stated
				TF justified:
				No
				Process conduct:
				N/a
				Reporting:
				Unclear
				Analysis:
				Yes
				Attrition:
				Yes
				Re-audit:
				Not stated

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** $ 70 (84%) referrals were in line with the guidelines. $ 10 (12%) patients presented with more than one symptom. $ 2 (2%) patients not referred in line with the guidelines had had previous breast cancer. **Other results** $ 11 (13%) patients were diagnosed with cancer, all of which were referred in line with the guidelines. $ 69 (83%) patients had radiological investigations carried out, 45 (65%) of which had a follow up appointment in a breast clinic.	**Comments:** The authors did not give sufficient information on their methodology to assess the validity of their audit, e.g. by whom and how it was decided which patients were referred according to the guidelines. The authors did not draw any conclusions from their results. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 12) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.06.00 to 11.10.00	**Aims:** To determine whether appropriate patients are being referred under the 2ww rule. To determine whether referred patients are receiving an appointment. To determine whether the referral matches the patient's complaints and signs. To determine how many of these patients are diagnosed with breast cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Referral criteria included national standards and locally agreed policies. **Extra outcomes (audit criterion not relating to the 2 week wait policy** None stated **Extra outcomes (non-criterion based):** Outcome of first OPD appointment.	**Sample type** Consecutive series **Sample size:** 97 **Patient population:** All those referred to the breast cancer service of a DGH. There were 95 females and 2 males. The average age was 50 years (range 24 to 80). 62 referrals were under the 2ww rule, 24 were considered to be urgent by their GP and 11 were non-urgent. **Population source:** Not stated	**Data source:** Data were extracted from case notes. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics were reported.	**Involvement:** Not stated **Motive:** Unclear **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** No **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: 95 of 97 were seen within two weeks. One patient cancelled the appointment sent and one patient was admitted to the hospital before the appointment. It is unclear by which routes these patients were referred. **Results relating to conformity of GP referral with guidelines:** Not reported. **Other results** Investigation was considered warranted in 75 cases. 17 of 73 patients had malignancy. (1 patient had care transferred to another care provider and 1 patient failed to attend investigation.)	**Comments:** This audit was poorly reported. While some results are listed not all those identified in the aims were provided. While the report stated that it aimed to assess whether appropriate referrals were being made, it did not state how judgements as to whether the appropriate patients were referred were to be made and no results pertinent to this aim were reported. The content of the locally agreed policies and the national standards were not listed. The methods used were reported in the sketchiest of detail. In addition, while headings were included in the report, no conclusions were drawn or recommendations made. Similarly action plans and re-audit plans were not addressed. **Dissemination:**

National guidelines suggest an urgent referral for women with a discrete mass or thickening if they are 35 or older compared with the local guidance which suggests referral of women with this symptom only if they are aged 50 years or older. The pickup rate was 33% (8 malignancies in 34 patients) using the local criterion compared with 29% (17 malignancies in 58 patients) using the national criterion.	Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 13) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 9.00	**Aims:** $ To ensure appropriateness of 2WWR for suspected breast cancers $ To determine the proportion of referrals from other routes dx with cancer $ To determine whether treatment for patients with breast cancer began appropriately soon. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ All 2WWR patients will be (a) appropriate, (b) seen =< 2 w $ No patient will be referred under 2WWR if unwilling $ All patients will begin treatment =< 1 mon from dx **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 99 **Patient population:** New patients referred to the breast surgeons during Sept 2000, including 27 2WWR patients. 37 were non prioritised, 26 were urgent, 3 were soon, 5 were routine and 1 was from another specialty. **Population source:** List of urgent breast referrals.	**Data source:** List of urgent breast referrals. Clinical notes. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Case notes were examined by the Audit clerk for compliance with criteria. Those not meeting criteria were peer reviewed by a consultant surgeon and the GP representative. **Statistical method (before and after studies only):** Descriptive statistics; bar charts	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Yes **Collection validity:** Not stated **TF justified:** No **Process conduct:** Yes **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 2WWR seen =< 2 w: 23/27 (85%) (Breaches: 1 x surgeon holiday, 3 postponed for personal reasons. All seen =< 3 w.) **Results relating to conformity of GP referral with guidelines:** Met criteria: 24/27 (89%) **Other results** Dx cancer: 8/99 (2WWR = 1, urgent = 5, 3 = non-urgent GP letter) Treatment began < 1 mon: 4/8	**Comments:** The audit appears to have been well-designed, piloted, conducted and reported. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 14) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.01.02 to 31.01.02	**Aims:** A case note audit was undertaken to elicit the following: $ Number of appropriate referrals $ Number of inappropriate referrals $ Reasons for inappropriateness of referrals $ Number of actual cancers detected **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 102 **Patient population:** All fast track referrals during the study period (n=102). **Population source:** Not stated	**Data source:** Case notes. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** No **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** 83/102 referrals were appropriate (i.e. they fell within the national referral guidelines criteria). 19/102 referrals were inappropriate (i.e. they did not meet the national referral guidelines criteria). Reasons for inappropriateness of referrals: Painful breasts x 3 Painful lump x 4 Discolouration x 1	**Comments:** This audit reports relevant data relating to the appropriateness of referrals under the 2WW guideline and the appropriateness of the guideline (i.e. proportion of patients subsequently diagnosed with cancer). However, many important details are omitted such as details of the population source, validity of the data source and data collection methods. Therefore, the validity of the audit's findings cannot be verified. There was no interpretation of the results or conclusions drawn. **Dissemination:** Not stated

Itchy nipple x 1 Mastitis x 1 Fibroadenoma under 30 years of age x 2 No abnormality in a 29 year old x 1 Sebaceous cyst x 1 Bilateral lumpy breasts x 2 Milk from breast x 1 Montgomery's Tubercle x 1 Breast abscess x 1 **Other results** Total number of fast tracks diagnosed as cancer = 10.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 15) **Year:** 1999 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 1.7.99 to 30.9.99	**Aims:** The authors did not state their aims but these appear to have been to assess referrals to a clinic from one PCT in a three month period. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Not stated **Extra outcomes (audit criterion not relating to the 2 week wait policy** None stated **Extra outcomes (non-criterion based):** None stated	**Sample type** Consecutive series **Sample size:** 119 **Patient population:** The sample included all patients referred to a clinic within 3 months and represents 45% of all referrals to the breast service and 45% of all malignancies diagnosed in that period. **Population source:** Clinicians were proved with a form to record all patients they saw in their clinics during the relevant period.	**Data source:** A preformed was provided for consultant staff to provide details of patients they saw. **How collected:** Proformas were returned to a two-week wait co-ordinator. **How validated:** Not stated **Process of applying audit criteria:** Consultant staff applied the criteria when they saw the patient in their clinic. **Statistical method (before and after studies only):** Data were presented in tabular format with a summary overview.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** No **Attrition:** Yes **Re-audit:** Unclear

Results	Comments
Results relating to meeting the 2WW criterion: 23 of 25 (92%) of 2ww patients were seen within 2 weeks. 1 of 2 breeches was owing to staff annual leave and 1 referral of 2 reached the hospital 5 days after the GP's decision to refer. No details were given as to the timeliness of patients not referred under the 2ww system. **Results relating to conformity of GP referral with guidelines:** Not stated **Other results**	**Comments:** No information as to the demography of the women referred was provided. Details of the methods used and examples of the forms used were given in an attached document.(WTA 243) This gave some details but important information on the process of the audit was omitted. The document implies that ongoing audit was planned but his is not made clear. **Dissemination:** Information was feed back to the involved consultants and the GPs who had referred patients.

Number diagnosed with cancer (by referral route): A total of 10 of 119 patients were subsequently diagnosed with cancer. 5 of 10 cancers were identified in patients referred under the two week wait system. This represented a pick up rate of 5 in 25 (20%). 2 of 10 cancers were identified in patients graded as urgent referrals by their GP. This represented a pick up rate of 2 in 22 (9%). 3 of 10 cancers were identified in patients whose GP did not give an indication of urgency. This represented a pick up rate of 3 in 55 (5%). Each of the three patients subsequently diagnosed with cancer had had their referrals upgraded by the hospital consultant (one to 'soon' and two to 'urgent'). No cancers were identified in any of the three patients referred as 'soon' or 14 patients referred as 'routine'. Regrading by the consultant at the local DGH: Of 22 urgent referrals, 6 were upgraded by the consultant to 2ww status and 2 were downgraded to 'soon'. Of 3 'soon' referrals, 1 was downgraded to 'routine' by the consultant. Of 14 'routine' referrals, 4 were upgraded to urgent and 8 were upgraded to 'soon' by the hospital consultant. In 55 patients where no indication of urgency was made by GPs, the hospital consultant graded the patients as follows: urgent - 21, soon - 24, routine - 10.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 16) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.11.00 to 30.11.00	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 136 **Patient population:** 136 urgent referrals for suspected breast cancer in the audit timeframe. 2 patients were excluded: DNA, OPA **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 129/134 (96%) seen =< 14 d 3 seen 15-16 d (Consultant AL, next OPA x 2) 1 seen 17-21 d (GP forgot to fax referral for 7 d) 1 seen 22-28 d (GP posted referral, no fax machine) 113/134 referrals received =< 24 h 7 received > 1 <= 2 d (delayed fax x 5, post x 2) 5 received > 2 <= 3 d (delayed fax x 3, post x 2) 1 received > 3 <= 4 d (delayed fax)	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

1 received > 4 <= 5 d (delayed fax) 2 received > 5 <= 6 d (post) 2 received > 6 <= 7 d (delayed fax) 2 received > 7 <= 8 d (post) 2 received > 8 <= 9 d (post) 2 received > 15 d (post) **Results relating to conformity of GP referral with guidelines:** 110/134 referrals were appropriate and met guidelines **Other results** Dx cancer = 15 No evidence cancer = 117 Awaiting review/investigation = 2	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 17) **Year:** 1999 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 1.7.99 to 30.9.99	**Aims:** The authors did not state their aims but these appear to have been to assess referrals to a clinic from one PCT in a three month period. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Not stated **Extra outcomes (audit criterion not relating to the 2 week wait policy** None stated **Extra outcomes (non-criterion based):** None stated	**Sample type** Consecutive series **Sample size:** 138 **Patient population:** The sample included all patients referred to a clinic within 3 months and represents 53% of all referrals to the breast service and 52% of all malignancies diagnosed in that period. **Population source:** Clinicians were proved with a form to record all patients they saw in their clinics during the relevant period.	**Data source:** A proforma was provided for consultant staff to provide details of patients they saw. **How collected:** Proformas were returned to a two-week wait co-ordinator. **How validated:** Not stated **Process of applying audit criteria:** Consultant staff applied the criteria when they saw the patient in their clinic. **Statistical method (before and after studies only):** Data were presented in tabular format with a summary overview.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** No **Attrition:** Yes **Re-audit:** Unclear

Results	Comments
Results relating to meeting the 2WW criterion: 34 of 40 (85%) of 2ww patients were seen within 2 weeks. 4 of 6 breeches were owing to a clinic being cancelled on a bank holiday and 1 of 6 was cancelled owing to staff leave and 1 referral of 6 reached the hospital 9 days after the GP's decision to refer. No details were given as to the timeliness of patients not referred under the 2ww system. **Results relating to conformity of GP referral with guidelines:** Not stated **Other results**	**Comments:** No information as to the demography of the women referred was provided. Details of the methods used and examples of the forms used were given in an attached document.(WTA 243) This gave some details but important information on the process of the audit was omitted. The document implies that ongoing audit was planned but this is not made clear. **Dissemination:** Information was feed back to the involved consultants and the GPs who had referred patients.

12 patients were subsequently diagnosed with cancer. 9 of 12 cancers were identified in patients referred under the two week wait system. 2 of 12 cancers were identified in patients graded as urgent referrals by their GP. 1 of 12 cancers was identified in a patient whose GP did not give an indication of urgency. This patient was graded as urgent by the consultant. None of 3 patients graded as "soon" or 12 patients graded as "routine" by their GPs were found to have cancer. 11 of 22 urgent referrals were upgraded by the consultant to 2ww status. 1 of 3 "soon" patients was upgraded to urgent (with one patient not accounted for). Of 22 "routine" patients, 5 were upgraded to urgent and 11 were upgraded to "soon" by the hospital consultant. In 51 patients where no indication of urgency was made by GPs, the hospital consultant graded the patients as follows: Urgent - 20, soon - 23, routine - 8.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 18) **Year:** 2002 **Institution type:** Health authority **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** January, February, March and May 2001	**Aims:** To examine in more detail the pathways through the system of a representative selection of patients, to identify any ways in which systems might be improved in terms of meeting the government targets. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Everyone with suspected cancer will be able to see a specialist within two weeks of their GP deciding that they need to be seen urgently and requesting an appointment (Department of Health. The new NHS: modern, dependable. December 1997). The authors also list the referral criteria (NHSE Referral guidelines for suspected cancer. April 2000). **Extra outcomes (audit criterion not relating to the 2 week wait policy** $ Maximum one month wait from diagnosis to treatment for breast cancer. $ Maximum two month wait from urgent GP referral to treatment for breast cancer. **Extra outcomes (non-criterion based):**	**Sample type** Convenience sample **Sample size:** 154 **Patient population:** Patients seen in breast clinics in January, February, March and May 2001 whose casenotes were available (54 from January, February and March and 100 from May). Several patients were excluded from the analysis, most commonly when they were follow-up patients and therefore not eligible. 1 patient was male. 13% referrals were aged 30 or under and 39% were aged 50 or over. **Population source:** Not stated	**Data source:** Case notes. **How collected:** SHO collected information from case notes. Data items collected are listed. Where relevant themes emerged through reading the notes, these were incorporated into the report. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** No **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** No **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** No **Reporting:** No **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Figures are estimated from a graph. Time from referral until seen (patients referred in May): 6/45 (13.3%) two-week targeted patients were seen within 14 days (range 11-50 days). Justification was given for 2 outliers of 35 days and 50 days, the range for the remainder was 11-27 days. The range in number of days for non-two-week targeted patients (n=44) was approximately 15 to 175. Time from receipt of referral until seen: 3/46 (6.5%) two-week targeted patients were seen within 14 days (range 6-about 60 days). The range in number of days for non-two-week	**Comments:** This is a poorly written audit. The author acknowledges that the sample from January, February and March is non-random and likely to be biased in favour of patients who were seen quickly, it is also not stated why patients from April were not included. The sample were 'clinic attenders' rather than patients referred by their GP. The author does not state how many patients were excluded and the reasons for exclusion (e.g. follow-up patients). The method of data collection was inconsistent; the author states that where relevant themes emerged through reading the notes, these were incorporated into the report. The population source was not stated, no information was given regarding a data collection tool and the author relied upon data recorded in case notes that were available at the time of his audit.

targeted patients (n=46) was approximately 13 to over 147 days. Time from referral to receipt of referral: Two-week targeted patients approximately 38/46 were received within 1 day (range 0-6 days). Non-two-week targeted patients (n=45) range 0-14 days. **Results relating to conformity of GP referral with guidelines:** **Other results** Of the May patients, 52% were referred as urgent, 50% were referred using the pro forma and 49% of referrals were faxed. 51% were two-week targeted. 11 patients were diagnosed as having breast malignancy (it is not clear whether this is out of the 100 patients seen in May or all 154 patients). 9/11 patients with cancer were referred urgently. 11% of urgent referrals were for patients who proved to have malignancy, compared with 3.3% of non-urgent referrals. 10/11 patients had surgery as their initial treatment, 1 started endocrine therapy.	The author's conclusion that in terms of speed and flexibility, the initial service offered to patients with malignancy suggested that it was excellent does not follow from the results; whilst all 11 patients diagnosed with a malignancy received initial treatment less than two weeks following diagnosis and 9/11 were diagnosed within a month of referral, only 5/11 received initial treatment within one month of referral and only 6/89 referrals in May were seen within 2 weeks of referral. No action plan was made, although some recommendations and suggestions were made. The graph displaying time from referral until seen shows data for 89 patients, although the author states that analysis of waiting times for appointments is restricted to May patients (n=100). In addition, the figures in the different graphs do not appear to add up. In the graph showing the 'time from referral to seen' 6 patients appear to have been seen within 14 days of referral, however in the graph showing 'time from receipt of referral until seen' only 3 patients appear to have been seen within 14 days of receipt of referral - which is not feasible as 'receipt of referral' should be after 'referral'. The author states that 63% of GP referrals did not indicate the date on which the decision to refer was made (or the date on which the patient was seen), therefore, some patients may have had to wait a little longer between seeing their GP and seeing a specialist than is indicated in the results. The author also presents results relating to the time from referral to diagnosis, time from being seen to diagnosis and time from referral to treatment for patients with malignancy. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 19) **Year:** N/S **Institution type:** Not stated **Study type:** research study **Cancer site:** Breast **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 1.9.00 to 30.9.00	**Aims:** To observe referral practices and to ascertain if referral guidelines are being followed and if they provide effective criteria for selection of patients with breast cancer. To determine the conformity of breast clinics to the two-week wait directive (Health Service Circular) enforced in 1999. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** Referrals should be made using a proforma not a letter alone; Referrals should be made appropriately in accordance to guidelines and graded urgent, soon or routine; The specificity and sensitivity of urgent referrals for picking up breast cancer should be optimal. **Extra outcomes (non-criterion based):** The time until definitive diagnosis.	**Sample type** Consecutive series **Sample size:** 177 **Patient population:** 177 patients (mean age 44.65, range 17-94) referred for a first appointment at the breast clinic. **Population source:** Not stated	**Data source:** Referral proformas or letters for new patients and patients' clinic notes (where these were absent or incomplete the hospital computerised records were used) **How collected:** It is not stated how the data were collected, although the specific data items collected are listed. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Mean waiting time for attending an 'urgent' appointment was 12.4 (standard deviation: 5.1) days. However 9/47 (19.1%) patients were offered and attended an appointment date beyond 14 days. Mean time (days) between the referral date and date appointment attended for a 'soon' appointment was 25.3 (standard deviation: 6.7), for a 'routine' appointment 26.7 (standard deviation: 7.7), for an 'ungraded' appointment 26.9 (standard deviation: 10). **Results relating to conformity of GP referral with guidelines:** 39/50 (78%) urgent referrals, 23/39 (58.9%) 'soon' referrals, 7/26 (26.9%) routine referrals and 12/62 (19.4%) ungraded referrals met urgent referral criteria. 11/50 (22%) urgent referrals were not in keeping with the guidelines.	**Comments:** This study looked at a lot of relevant 2 week wait data, using two different sources. However, the sources of data and data collection tool do not appear to have been validated. **Dissemination:** Not stated

Other results The proforma was used in 116/177 (65.5%) referrals, of the ungraded referrals 48/62 (77.4%) were letters not proformas. Of the referrals using a proforma 37/116 (31.9%) were incomplete - details are given. Outcome of referrals: 47 urgent referrals: 5 = breast cancer, 1 = no diagnosis, 41 = benign. 38 'soon' referrals: 0 = breast cancer, 4 = no diagnosis, 34 = benign. 25 routine referrals: 0 = breast cancer, 2 = no diagnosis, 23 = benign. 55 ungraded referrals: 1 = breast cancer, 54 = benign.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 20) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.01 to 30.06.01	**Aims:** To re-audit breast cancer referrals according to the Government waiting times standards. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The audit looked at the following indicators (DoH guidelines): $ Referrals to be faxed where possible. $ Referrals of suspected malignancy to be received by the Trust within 24 hours of decision to refer. $ Breast Referral forms to be used, fully completed and faxed. **Extra outcomes (audit criterion not relating to the 2 week wait policy** The audit looked at the feedback given to GPs according to the following indicators (DoH guidelines): $ Number of patients referred urgently for breast cancer. $ The proportion of urgent referrals found to have cancer. $ The number for non-urgent referrals subsequently found to have cancer. This was done by including the following data in the audit: $ % of referrals by fax/post/telephone $ % of GP suspected malignancy within 24 hours $ % breast referral forms used $ final histology data **Extra outcomes (non-criterion based):** The audit also looked at the type of appointment code assigned at the Trust, once the GP referral information was received; and final histological diagnosis, which was compared to indication on the GP referral.	**Sample type** Consecutive series **Sample size:** 200 **Patient population:** Patients referred by their GP who attended the Trust's Breast Clinics between 01.04.01 and 30.04.01 (n=200). On receipt, referrals were coded into one of three appointment types: GP suspects malignancy (GPM) for those where the GP suspects patients of having cancer (n=33); new fast track breast (NFB) for other urgent referrals that need to be seen in 2 weeks (n=115); and new routine breast (NRB) for those that can be booked into the next available slot (n=52). **Population source:** The Hospital Patient Administration System (PAS).	**Data source:** PAS, patient's case notes, Management Services Information, and the PATH Histology System. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Unclear **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Number of days between receipt of referral and 1st appointment (n=200) ranged between 2 and 56 (GPM (n=33): range 2 to 15). Referrals received within 24 hours: 103/200 (GPM 28/33; NFB 54/115; NRB 21/52)	**Comments:** This was a re-audit, following an audit for 2000/2001, commissioned by the Health Authority. Data sources were listed, but it was not stated whether all were used for each patient, and which ones were used for measuring the audit indications. The reporting of the GP categorisation within the

6 referrals took >9 days **Results relating to conformity of GP referral with guidelines:** **Other results** Type of referral (125 were faxed and 75 sent by post): Breast form 152 Referral form and letter 3 Letter to consultant 45 1 NRB and 1 NFB patients were incorrectly coded, and should have been coded as GPM (according to their case notes; GP classification was 'GP suspects malignancy'). 6 GPM patients had a GP classification of 'GP unsure', 2 had 'not suspected malignancy', and 1 was 'not marked on referral'. Number diagnosed with cancer (9/200) according to GP classification: 3/26 GP suspected malignancy (24 (6 also marked unsure)/26 = GPM) 1/3 GP marked urgent (this was a recurrence of a previous cancer) (0/3 = GPM) 3/68 GP unsure (6/68 = GPM) 1/101 GP not suspected malignancy (2/101 = GPM) 1/2 not marked by GP (1/2 = GPM)	different appointment types was not very clear, especially in terms of linking this data to the number of cancers diagnosed (reported according to GP classification and not appointment type). The audit did not look at the number of patients that were seen within 14 days of decision to refer. **Dissemination:** The results were disseminated to Audit leads, referring primary care trusts, the general manager of the Surgical Service Unit, breast care nurses, and the cancer services co-ordinator.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 21) **Year:** 2000 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Partially prospective before and after **Recruitment time frame (follow-up, where reported):** 10.98 to 12.98 and 15.5.99 to 8.99	**Aims:** To determine the referral practice of GPs to a Fast Access Breast Clinic before and after the implementation of the 2WWR, and to demonstrate the impact on the detection rate of breast cancer and access to the Breast Clinic. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The main outcome measures were detected breast cancer, clinical accuracy of the GPs and the waiting time for a Fast Access breast clinic. The pre-2WWR audit was conducted according to BASO guidelines, and the post-2WWR reaudit used DoH guidelines. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 200 **Patient population:** 1. 100 consecutive referrals with suspected breast cancer (pre-2WWR) 2. 100 consecutive 2WWR referrals with suspected breast cancer Patients were stratified into 3 age groups: < 40 y; 41-65 y; > 65 y **Population source:** Not stated	**Data source:** Referral letters **How collected:** Audit proformas **How validated:** Not stated **Process of applying audit criteria:** 1. A consultant surgeon grouped all referral letters as presence of lump, suspicion of malignant change, or other symptoms. Appointments were sent out as urgent (=< 1 w), soon (=< 2 w) and routine (=< 4 w), depending on the clinical details in the letter, and the consultant's judgment. 2. All referrals were marked as urgent (=< 2 w), but were grouped as in the first audit. **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Unclear **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Seen =< 2w 61 (61%) vs 100 (100%) **Results relating to conformity of GP referral with guidelines:** Clinical accuracy: 53% vs 51% **Other results** Not reported	**Comments:** This appears to have been a well-conducted before-and-after audit of referral mechanisms. Appraisal is hampered by the absence of details on, e.g.: population source; data source checking; data form validation; data collection; criteria application. **Dissemination:** Journal publication

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 22) **Year:** 2003 **Institution type:** PCT **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.2.02 to 28.2.02	**Aims:** **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To audit compliance with the South Bank Breast Service Referral Form and adherence to guidelines/criteria. $ To audit whether referrals of patients to the Breast Service are indicated as either routine or urgent. $ To audit whether the national requirement to have all urgent referrals received within 24 h of GP decision to refer is being met. $ To highlight issues around completion and interpretation of the form that may indicate need for review. Criteria/standards: $ All referrals to be made on the referral form. $ All urgent referrals to be received within 24 hours of the decision to refer. $ 95% urgent cases to be seen within 14 days of the date of decision to refer. $ 90% routine cases to be seen within 6 weeks of the data of decision to refer. $ 8 other criteria related to filling in the referral form correctly. **Extra outcomes (audit criterion not relating to the 2 week wait policy** $ 90% of clinic letters to be returned to GPs within 7 days of the patient attending for outpatient appointment. $ All confirmed malignancies should be faxed back to the GP within 24 hours of patients being informed of diagnosis. **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 220 **Patient population:** 220 consecutive patients referred to the breast service r in Feb 2002, 82 of which were urgent referrals. **Population source:** HICOM database	**Data source:** Referral letters, case notes **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics; bar graphs	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Seen =< 2 w: 92% of urgent referrals (5% refused appointments) 97% urgent referrals were offered appointments =< 2 w 77% routine referrals were seen within 6 weeks	**Comments:** Appraisal is hampered by the absence of details on, e.g.: data source checking; data form validation; data collection; criteria application. **Dissemination:**

Results relating to conformity of GP referral with guidelines: 7/202 patients did not meet criteria **Other results** $ Referrals on correct form: 53% (letter = 40%, generic = 7%) $ Urgent referrals (n = 82) received =< 24 h: 70/78 (range 0, 12 d). 4 excluded because dates unclear. Malignant diagnosis: 2WWR = 16%, non-2WWR = 0.7% 20 (32%) routine referrals were upgraded to urgent by the consultant	Feedback session

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 23) **Year:** 2001 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** Breast **Audit type:** 2WWR **Design:** Prospective before and after **Recruitment time frame (follow-up, where reported):** A two-month period in 1999 and a two-month period in 2001.	**Aims:** The aims of the audit appear to be to assess the breast cancer referrals received by the breast service. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The objectives appear to be to compare the service before and after the introduction of the 2ww system. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** Mode of referral.	**Sample type** Consecutive series **Sample size:** 235 **Patient population:** All patients referred to the hospital with a suspicion of breast cancer during a two month period in 1999 (n = 115) and again during a similar period in 2001 (n = 120). **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics and graphical representations were used.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Unclear **Analysis:** Unclear **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Most urgent patients were seen within 14 days (94% - 97%). (See commentary.) The proportion of patients which were to be seen within two weeks was as follows: 1999 - 36% 2001 - 78%. (Data have been taken from a graph.) **Results relating to conformity of GP referral with guidelines:** Compared with NHS guidance, the following number of referrals were appropriate:	**Comments:** The methods used in this study were poorly reported. It is not clear how patients were identified or how or whence data were extracted. The primary aims of the study were not reported. As the methods are poorly reported, it is not clear if they were robust, or if they were in line with the initial intention of the audit. The number of clinics in the two month periods was not reported. While the total number of patients changed only by 5 in the two periods studied, the number of patients per clinic almost doubled. The difference between these findings was not explained. The authors relied heavily on the number of new patients per clinic in their interpretation of their data.

1999 - 91 of 115 (79%) 2001 - 77 of 120 (64%) **Other results** The number of cancers referred during each period was 11. (Data have been taken from a graph.)	The report suggests that any signs or symptoms suggestive of breast cancer could lead to a referral under the two week system. This is not in line with the DoH criteria where only high risk signs and symptoms lead to an urgent referral. This was not mentioned by the authors. It appears that the National Breast Screening criteria were issued for use by GPs in 1999 to guide referral. It is not clear what criteria were recommended in 2001 for the post-introduction group. The exact dates audited were not provided. The 2ww system was introduced in 1999 and depending on the dates, the staff may have been more or less influenced by the system which was about to be instituted. The number of patients seen within 14 days was reported as 94 to 97%. It is not clear if these figures apply to the two time periods or not. While the appropriateness of guidance was measured, according to the authors, against NHS guidance. It is not reported if this was the guidance current at the time of the referral or the two week wait referral criteria. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 24) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 1.10.99 to 30.11.99	**Aims:** To identify whether GPs have been referring 'appropriately' in terms of their 'urgent' priority rating and to identify reasons for 'inappropriate' referrals. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 239 **Patient population:** All patients referred with suspected breast cancers. 85 of 239 referrals were marked urgent, 60 "soon", 22 "routine" and 72 did not have a degree of urgency marked. **Population source:** Not stated	**Data source:** Data were recorded on a proforma, which was designed in line with national recommendations. **How collected:** The proforma was completed prospectively by consultants or members of their team during the clinic. Pathological data were collected retrospectively retrospectively from departmental systems. **How validated:** Not stated. **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Stratified descriptive statistics were reported. Stratification was by the urgency mentioned on the referral.	**Involvement:** Unclear **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** No **Collection validity:** Not stated **TF justified:** No **Process conduct:** Yes **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** Of 85 urgent referrals, 27 (31.8%) were deemed inappropriate. None of these inappropriate referrals was subsequently diagnosed with breast cancer. 16 women were aged less than 50 years and had no suspicious features. 6 women had no palpable lump. 3 women did not meet the criteria but the referral was "understandable" by the hospital staff.	**Comments:** It is not clear from the report if clinical staff were involved in planning the audit or analysing its results. It is unclear how information on the patients' pathological findings and further surgery was obtained. The definition of "suspected cancers" used in the document is unclear. The reasons for inappropriate referrals were not reported for all patients whose referral was deemed inappropriate.

Hospital staff felt that a non-urgent referral would have been appropriate in each case. **Other results** 15 of 239 new GP referrals were found to have breast cancer. 11 of these had been referred as urgent from a total of 85 urgent referrals and 4 were referred as non-urgent from a total of 154 non-urgent referrals. 36 of 85 urgent referrals were received on the agreed referral proforma and sent by fax. The remainder were sent by post whether on the proforma or by letter.	**Dissemination:** Not stated.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 25) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.10.00 to 30.11.00	**Aims:** **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The audit looked at the following indicators (DoH guidelines): $ Referrals to be faxed where possible. $ Referrals of suspected malignancy to be received by the Trust within 24 hours of decision to refer. $ Breast Referral forms to be used where available, fully completed. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** The audit also looked at the type of appointment that was assigned, after the receipt of the GP referral information; and final histological diagnosis, which was compared to indication on the GP referral. In order to monitor and feedback to GPs according to the DoH guidelines data on the following indicators were reported: $ Number of patients referred urgently for breast cancer. $ The proportion of urgent referrals found to have cancer. $ The number for non-urgent referrals subsequently found to have cancer.	**Sample type** Consecutive series **Sample size:** 243 **Patient population:** New patients with a 1st clinical appointment at the Breast Clinics between 01.10.00 and 30.11.00 (n=243). On receipt, referrals were coded into one of three appointment types: GP suspects malignancy (GPM) or suspected fast track (SFT) for those where the GP suspects patients of having cancer (n=35); new fast track breast (NFB) for other urgent referrals that need to be seen in 2 weeks (n=116); and new routine breast (NRB) for those that can be booked into the next available slot (n=92). **Population source:** Not stated	**Data source:** Patient administration system (PAS), patient's case notes, Management Services Information, and the PATH Histology System. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Referrals received within 24 hours: 123/243 (SFB 27/35; NFB 58/116; NRB 38/92) The data were not available for 47 patients (SFB 3; NFB 22; NRB 22) Time to receipt ranged from 0 to 9 days. **Results relating to conformity of GP referral with guidelines:** **Other results** Type of referral:	**Comments:** This was a re-audit following an audit for 1999/2000, commissioned by the Health Authority. Not much data were provided on the methodology of the audit. It was not stated how (and by who) patients were categorised to appointment type by the Trust, although the decision to upgrade 10 GP referrals was reported to have been done by the consultant. Data sources were listed, but it was not stated whether all were used for each patient, and which ones were used for measuring the audit indications. The audit did not look at the number of patients that were seen within 14 days of decision to refer.

Breast form 174 Breast form and letter 7 Letter to consultant 62 2 NFB patients were incorrectly coded and should have been coded as SFB/GPM (GP classification was 'suspected malignancy'). Both were seen within 14 days of referral. 4 SFB/GPM patients had a GP classification of 'GP unsure', and 6 had 'GP not indicated'. For these 10 patients, the consultant decided that they should have a GPM appointment, based on previous history and contents of referral. Diagnosed with cancer (GP classification): SFB 7 (6 GP suspects malignancy) NFB 5 (0 GP suspects malignancy) NRB 2 (0 GP suspects malignancy)	**Dissemination:** The results were disseminated to Audit leads, referring primary care trusts, the general manager of the Surgical Service Unit, breast care nurses, the Surgical Clinical Audit and Effectiveness Committee, and the cancer services co-ordinator.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 26) **Year:** 2003 **Institution type:** PCT **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.1.01 to 31.12.01	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To audit compliance with the local Referral Form and adherence to guidelines/criteria. $ To audit whether referrals of patients to the Breast Service are indicated as either routine or urgent. $ To audit whether the national requirement to have all urgent referrals received within 24 h of GP decision to refer is being met. $ To highlight issues around completion and interpretation of the form that may indicate need for review. **Extra outcomes (audit criterion not relating to the 2 week wait policy** $ All referrals to be on South Bank referral form $ All referrals to be faxed $ All urgent referrals to be received =< 24 h of GP decision to refer 12 other criteria on filling in referral form correctly **Extra outcomes (non-criterion based):**	**Sample type** Random sample **Sample size:** 249 **Patient population:** 705 breast cancer referral patients were stratified as Urgent, Routine, Not specified. Cases were then randomly selected from the referral list in the proportion 2:1:1 until the target sample size was reached. **Population source:** Referral list	**Data source:** Referral letters **How collected:** Data from referral letters were entered into Excel on-site. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics; bar graphs	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** $ Referrals on correct form: 151/249 (practice form = 80, generic = 18) $ Faxed referrals: 120/122 $ Received =< 24 h: 108/116 (5 = 2 d, 2 = 3 d, 1 = 4 d)	**Comments:** Appraisal is hampered by the absence of details on, e.g., data source checking, data form validation, data collection, criteria application. **Dissemination:** Feedback session at Quality Improvement Programme for Primary Care National Service Framework Event, 11 Sep 2002.

Malignant diagnosis: Urgent = 15/122 Routine = 0/60 Unspecified = 3/67 Upgraded = 0/8 Unspecified urgent = 1/27	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 27) **Year:** 2000 **Institution type:** Health authority **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 1.2000 to 3.2000	**Aims:** To establish the correlation between urgent GP referrals and cancer diagnosis. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 324 **Patient population:** 324 urgent referrals from 1459 suspected breast cancer referrals to the Acute Trusts **Population source:** Cancer database	**Data source:** Cancer database; clinic lists; pathology records **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Yes **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Yes **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Unclear **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** 2WWR Dx cancer 58/324 (18%) Dx cancer labeled as 2WWR referrals = 58/109 (53%)	**Comments:** Few details of the audit conduct were given, making appraisal difficult. **Dissemination:** Sent to regional Cancer Group

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 28) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.09.01 to 31.03.02	**Aims:** To show aspects of the 2 week rule that are not otherwise monitored. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 380 **Patient population:** Patients referred by GPs under the 2 week rule for breast cancer during a 7 month period. The results incorporate only those patients monitored for the QMCW report (quarterly monitoring of cancer waits data). 380 patients were seen in the time period. **Population source:** Not stated	**Data source:** PAS system and the BASO Breast Database. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: 380/380 (100%) patients were seen within 14 days of referral. 366/380 (96%) referrals were received within 24 hours of the GPs decision to refer (usually due to the referrals being sent in the post, rather than using the Open Access or Fax system). **Results relating to conformity of GP referral with guidelines:** 22/380 referrals were for patients aged under 35 at referral, the referral guidelines state that no referral will be accepted for women under 35. 316/380 referrals were for a palpable lump, 37 for skin changes, 16 for palpable nodes and 46 for 'other'. **Other results**	**Comments:** Very little methodological information is provided, such as how and by whom the data were collected and whether a validated data collection tool was used, therefore, it is not possible to verify the validity of the results. The authors do not draw any conclusions from their audit, therefore, it is not possible to state whether their interpretation of the results was fair. **Dissemination:** An email accompanying the audit stated that the audit was presented to GPs and stated the GPs' feedback and recommendations.

244/380 referrals were referred using the Open Access route. 281/380 referrals were on the Breast 2 week rule proforma/Open Access proforma. 45 were on faxed letter, 24 on faxed breast form, 10 on 'other form' faxed, 8 on 'other form' telephone, 8 on posted breast form and 4 on posted letter. 50/380 (13%) referrals were classed as routine by the consultant (8% were not classified).	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 29) **Year:** 1999 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 01.04.99 to 30.06.99	**Aims:** $ To determine the priority for criteria for breast referrals. $ To determine a 'snap shot' audit of referral patterns against the new guidelines. $ Present findings to GPs for information and discussion. $ Disseminate new guidelines to GPs: electronic and hard copy. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 408 **Patient population:** Patients with a new clinical appointment during a three month period (April to June) in 1999 (n=408). Referrals were coded into one of three appointment types: suspected fast track (SFT, GP suspects patients of having cancer; n=47), new fast track breast (NFB, other urgent referrals that need to be seen in 2 weeks; n=62), and new routine breast (NRB, n=299). **Population source:** Not explicitly stated, but looks as if the appointment booking system was used.	**Data source:** Audit forms, allocated when patients referral was received (to be retrieved at the time of the initial or follow-up appointment). The forms were missing for 69 patients. Missing information was retrieved from the patient administration system (PAS) or patient's case notes. Data were also obtained from the PATH Histology System. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Unclear **Appropriateness:** Unclear **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Yes **Collection validity:** Not stated **TF justified:** Unclear **Process conduct:** Unclear **Reporting:** yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Referrals were received within 24 hours: 99/408 (SFB 18/47; NFB 20/62; NRB 61/299) The data was not available for 120 patients (SFB 6; NFB 20; NRB 94) Time to receipt ranged from 0 to 15 days. **Results relating to conformity of GP referral with guidelines:** **Other results** Type of referral:	**Comments:** This audit is the first of a two-part audit, commissioned by a Health Authority. The second part of that audit is also included in this review.(WTA 244) The authors reported in their objectives that they were going to audit the referral patterns against the DoH urgent referral guidelines, but the specific criteria/standards (from the guidelines) that they intended to use were not pre-specified. 22/408 patients did not attend their first appointment. Some patients were referred in March 1999, which was prior to the implementation of the guidelines.

Breast form 222 Letter 91 Faxed sheet only 1 Not known 94 8 NFB and 8 NRB patients should have been coded as SFB (classified as 'GP suspected malignancy'). 15 SFB patients had a GP classification of 'GP not suspected malignancy' (n=5), 'GP unsure' (n=5), and 'GP not indicated' (n=5). Diagnosed with cancer: SFB 15 (12 GP suspects malignancy) NFB 5 (1 GP suspects malignancy) NRB 15 (1 GP suspects malignancy)	Patient/appointment classification system was not well described. Patients classified as SFB had priority, but the difference between the SFB and NFB classification was unclear. The authors reported discrepancies between patients classified as having had an SFB appointment on the audit forms and the classification (type of appointment booked) recorded on PAS. It was not stated which was used for the results reported. Each referral was given a GP classification. No information was provided on how (or by whom) this was done. The data were collected prospectively using data collection forms, and where these were missing, case notes and the PAS system were searched retrospectively. It was not explicitly stated who collected the data (e.g. those who process the referral or clinicians that saw the patient at outpatients), but the report implies that audit forms could have been completed by numerous staff. It was not stated if the data were checked for accuracy, or consistency in completing the forms. Although the forms were reported to have been piloted in advanced. The audit did not look at the number of patients that were seen within 14 days of decision to refer. **Dissemination:** The results were disseminated to the local health authority, the general manager of the Surgical Service Unit, the breast care nurse, the Surgical Clinical Audit and Effectiveness Committee, and GPs via the GP UPDATE.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 30) **Year:** **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 01.07.00 to 31.10.00	**Aims:** To establish whether the completion of a specific breast referral form would assist in the processing of referrals to the Breast Care Team. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The audit criteria/standards being evaluated were: $ All suspected breast cancer patients should see a hospital consultant within two weeks. $ All patients should be referred on the Breast Clinic Referral Form. $ All referrals should specify the priority determined by the GP. $ Priority after initial assessment should be the same by GP and Consultant. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 432 **Patient population:** All GP cancer suspected referrals between July and October 2000. **Population source:** Referral form/letter	**Data source:** Some of the data were extracted from the referral forms/letters **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** The Breast Care Team assessed the urgency of the referral form, after the initial examination but prior to any further investigations. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Unclear **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Unclear **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Referrals seen within 2 weeks: 86% Average time between receipt of referral and 1st appointment was 9 days **Results relating to conformity of GP referral with guidelines:** **Other results** 32/432 were diagnosed with breast cancer.	**Comments:** The audit report was only available as a power point presentation, and therefore only limited information on methodology was provided, e.g. it was not stated how the audit criteria, other than appropriateness of the referral, were assessed. The Breast Care Service did not specify whether they were in agreement with the GP priority status for all referrals; it was not stated how many. The results were only given as percentages. The number of referrals that were marked as urgent, soon or routine by the GP, (or did not have the priority specified) were reported on a graph, but the actual

57% of referrals were received on the Breast Clinic Referral Form. 64% of referrals had the priority specified (urgent, soon or routine), of which 83% were referred on a Clinic Referral Form. For referrals where priority was not specified, 16% were referred on a Clinic Referral Form. There was an agreement on appointment priority between the Breast Care Service and GP for 71% of referrals, of which 70% were referred on a Clinic Referral Form.	numbers for each category could not be calculated. It appears as if the 2WW criterion relates to time between the Trust's receipt of referral and first appointments and not GP decision to refer and 1st appointment, although this was not explicitly stated, but inferred by what was reported when presenting the average time. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 31) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 4.2000 to 3.2001	**Aims:** To compare practice against core standards to identify delays in the treatment process of patients diagnosed with breast cancer at hospital **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** =< 2 w from referral to 1st appointment (80% target) **Extra outcomes (audit criterion not relating to the 2 week wait policy** 1st visit triple assessment (90% target) **Extra outcomes (non-criterion based):** Diagnosis =< 5 working d =< 21 d between dx and surgery =< 21 d between surgery and radiotherapy	**Sample type** Consecutive series **Sample size:** 496 **Patient population:** The sample consisted to two groups. The first was all patients referred under the 2wwr (n = 374). The second consisted of 122 patients with confirmed cancer who had not been urgently referred. **Population source:** Breast Unit database	**Data source:** Breast Unit database **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Unclear **Tool design:** Unclear **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 100% seen =< 14 d 38% seen =< 7 d **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** Dx cancer = 78/374 (21%)	**Comments:** Few details of the audit conduct were given, making appraisal difficult. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 32) **Year:** 2001 **Institution type:** Network **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** Not stated	**Aims:** To assess how well the referral procedures used across the cancer Network were in line with the stated NHS guidance. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To identify different procedures used by each trust to refer patients to their local breast unit. $ To ensure the referral procedure used is in line with the stated NHS guidelines. $ To identify reasons why some patients with breast cancer are not referred urgently under the two week rule. Standards $ 100% of urgently referred patients are subsequently found to have cancer. $ 100% of patients referred urgently meet the referral guidelines. $ 0% of patients referred routinely are subsequently found to have cancer. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** The methods used to refer patients.	**Sample type** Consecutive series **Sample size:** 594 **Patient population:** The sample included 100 consecutive patients from each trust referred either under the 2ww rule or routinely. Six trusts were included. One trust audited only 94 patients. **Population source:** Not stated	**Data source:** A proforma was completed for all patients. It is not clear at what stage, or by whom, this was completed. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Data were presented using descriptive statistics only.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported. **Results relating to conformity of GP referral with guidelines:** 292 patients were referred in accordance with the guidelines. Of these 242 were deemed appropriate by the hospital clinician and 50 were deemed inappropriate. 59 patients were not referred in accordance with the guidelines. Of these 35 were deemed appropriate by the hospital clinician and 23 were deemed inappropriate. One patient did not attend.	**Comments:** This audit appears to have been well conducted but some information on the methods used was not presented. **Dissemination:** Not stated

Other results 48 of 351 patients (13.7%) referred urgently had cancer. Pickup rates ranged from 8.3 (5 of 60) to 50% (6 of 12) for individual trusts. 11 of 243 (4.5%) patients referred routinely had cancer. Rates ranged from none of 20 and 21 patients to 16.7% (4 of 24) for individual trusts.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 33) **Year:** 2000 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Retrospective before and after **Recruitment time frame (follow-up, where reported):** 01.04.99 to 30.06.99 and 01.04.98 to 30.06.98.	**Aims:** To audit the probability of a diagnosis of cancer from the GP referral letter. The effect of the directive on waiting times for urgent and non-urgent breast referrals was reviewed and the factors that determined the wait for an appointment were assessed. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The '2 week wait' directive (Health Service Circular (HSC) 1998/242) guaranteeing that 'everyone with suspected breast cancer will be able to see a specialist within two weeks of their general practitioner (GP) deciding they need to be seen urgently' is a unique audited approach to access for the British National Health Service, the effects of which have been assessed in a non-academic symptomatic breast clinic. New GP referrals were reviewed prospectively to determine the probability of a breast cancer diagnosis from the referral letter and the effects of the directive on waiting times for appointments and utilisation of clinics. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 607 **Patient population:** New patients referred by the GP during the 2 timescales were included; all others such as screen-detected, old, re-referral and hospital patients were excluded. 299 patients were referred between 01.04.98 to 30.06.98 and 308 patients were referred between 01.04.99 to 30.06.99. **Population source:** A prospective breast clinic database.	**Data source:** A prospective breast clinic database. **How collected:** It is not stated who collected the data or how. Items of data collected are listed below. For each GP referral letter the risk stratification ('urgent', 'soon' or 'routine'), if specified, was recorded, as was the category allocated to the patients by either of the two specialist breast surgeons concerned. To an extent both assessments were arbitrary but a broad categorisation was defined in the report. The risk stratifications were compared with the final diagnosis of 'cancer' and 'not cancer'. Dates recorded and analysed were date of referral by GP by letter/fax/telephone (a); date of receipt of referral by specialist in breast office (b); date of appointment offered to patient (c); and date of consultation (d). The waiting times (in days) were defined as: total delay (a-d); referral delay (a-b), the delay in the referral process from GP to specialist; appointment delay (b-c), the delay from receiving a request to the patient being offered an appointment; and attendance delay (c-d), any delay taking the offered appointment. The mode of referral from the GP was recorded (mail, fax or telephone), and also any cancellations or non-attenders and the number of visits per patient to diagnosis or discharge. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Comparisons were made using the Mann-	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Yes **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** No

			Whitney U test for non-parametric data and the Chi squared test for contingencies. Significance was accepted at the 5% level and, unless otherwise stated, the data are presented as median (inter-quartile range).	

Results	Comments
Results relating to meeting the 2WW criterion: 10/65 urgent referrals in 1998 were not seen within 14 days, 29/89 urgent referrals in 1999 were not seen within 14 days. These included 4 patients with breast cancer (median delay 16 (range 15 - 20) days). There was an increase in the median total delay (date of referral by GP to date of consultation) for all new patients between 1998 and 1999 (13 versus 16 days; P<0.01). The major part of this was the appointment delay (7 versus 9 days; P<0.001), which is the delay between receipt of the referral in the breast office and the allocated appointment. Median (interquartile range) number of days between date of referral by GP to date of consultation for urgent referrals was 9 (3-14) in 1998 and 10 (5 - 16) in 1999 (not statistically significant). Median (interquartile range) number of days between date of referral by GP to date of consultation for routine referrals was 14 (12-16) in 1998 and 21 (15 - 29) in 1999, difference is statistically significant (P<0.001). **Results relating to conformity of GP referral with guidelines:** **Other results** The assessment of urgency by GPs was incomplete; 58% of all new referrals were 'not specified' in 1998, decreasing to 49% in 1999. GP referrals 1998: 65/299 referred as urgent, 14/24 cancer patients referred as urgent 1999: 89/308 referred as urgent, 16/29 cancer patients referred as urgent The risk assessment by the breast specialists was 99% complete. Specialist category 1998: 80/299 categorised as urgent, 21/24 cancer patients categorised as urgent 1999: 104/308 categorised as urgent, 27/29 cancer patients categorised as urgent Median (interquartile range) number of days between date of referral by GP to date of consultation by mode of referral are: Mail: 14 (12-19) for 242 referrals in 1998 and 19 (14-26) for 234 referrals in 1999 Fax: 5 (1-8) for 43 referrals in 1998 and 8 (6-12) for 58 referrals in 1999 Telephone: 1 (0-6) for 7 referrals in 1998 and 2 (1-5) for 15 referrals in 1999. For patients with cancer, irrespective of type of referral, the median total delay was 6 days in 1998 and 7 days in 1999. The number of appointments offered rose significantly, 951 in 1999 versus 767 in 1998 (P<0.05). The number of overbookings on clinics	**Comments:** This audit provides a vast amount of relevant information for comparing waiting times between 1998 (prior to the 2WW guideline) and 1999 (after the 2WW guideline) as well as comparing the assessment of urgency between GPs and specialists. However, data were collected between April and June 1999 for the post-guideline period, when the guideline had only just been introduced, therefore, it may not have been working efficiently at such an early stage after its implementation. The sample appears to be large and representative and the database used to identify the population was 98% complete. Some methodological details were omitted from the report, such as details of the data collection tool and data collection methodology. However, overall this appears to be a well designed and conducted audit and the conclusions appear to be valid. **Dissemination:** Not stated

rose significantly, 109 in 1999 versus 34 in 1998 ($P<0.001$). The number of clinic non-attendances rose significantly, 74 in 1999 versus 40 in 1998 ($P<0.05$).	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 34) **Year:** **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** Not stated	**Aims:** To audit the mechanism for two week urgent breast referrals **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To audit: $ Compliance with the 2W referral targets $ Time to clinical appointment in all referral type groups $ Concordance of GP and Specialist prioritisation $ Numbers of positive histological diagnoses **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 720 **Patient population:** Patients seen over a 6 month period. All were female aged between 20 and 79 years. 94 patients were excluded due to failure to identify priority of the referral. 305 patients were referred as urgent, 126 as soon, and 195 as routine. Concordance was assessed in a sub-group of 260 patients, of which 127 were referred as urgent, 52 as soon and 76 as routine. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** No **Analysis:** No **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 'urgent' referrals seen within 14 days (n=305): 97% Mean wait (days) to 1st appointment (n=626): 'urgent' referrals = 9.65 (n=305) 'soon' referrals = 17.89 (n=126) routine referrals = 34.54 (n=195) **Results relating to conformity of GP referral with guidelines:**	**Comments:** Only printouts of a slide presentation of the audit were available, with very little information on the methodology. The aims of the audit were not clearly reported, and have been ascertained from the little information provided. **Dissemination:** Not stated

Concordance between GP and specialist (n=260): 46% for 'urgent' referrals 67% for 'soon' referrals 92% for routine referrals **Other results** No. of patients diagnosed with cancer (n=626): 34/305 'urgent' referrals 5/126 'soon' referrals 4/195 routine referrals	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 35) **Year:** 2003 **Institution type:** Network **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 2 week period in April 2001 (actual dates not given)	**Aims:** $ To determine the proportion of referrals made using a standardised proforma and fax machine. $ To assess the use of referral criteria by GPs $ To assess the percentage of referrals classified as urgent, and how many cancers were in the non-urgent stream. $ To describe the outcome of the first assessment. $ To measure the time interval between GP referral and first hospital visit for all new patients with breast problems before the Cancer Services Collaborative Phase 2 commences. $ To evaluate trust's policy on guideline referrals. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The audit examined the following two aspects of the 2WW referral criteria: $ Achievement of waiting times. $ Appropriateness of referral, which considered the means of referral and the use of agreed referral criteria. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 966 **Patient population:** New patients presenting within any breast clinic in all acute hospitals in the Region during a two week period in April 2001. Patients identified through breast cancer screening were excluded. 18 Trusts participated in the audit. Type of referral (urgency) was 'not stated' by the GP for 231/966 referrals, and this information was not given on the data collection proforma for 19/966 referrals. 415 referrals were marked urgent (2WW) and 301 were non-urgent. The most frequent referral criteria was breast lump (524/966) and most patients sought advice from their GP within 4 weeks of presenting symptoms (378/670, data not available for all patients). **Population source:** All acute hospitals in the Region were asked to complete a proforma for any new patient presenting in all their breast clinics during the pre-specified time period.	**Data source:** Proformas completed by clinicians providing breast cancer service and referral guideline questionnaires sent to the Lead Clinicians for Breast in each Trust. **How collected:** Completed profomas were returned to the Regional Cancer Intelligence Service where the data were entered onto a database for analysis. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Urgent (2WW) referrals seen within 14 days (n=415): 89.9% seen within 28 days: 97.2% seen within 90 days: 100% Non-urgent referrals seen within 14 days (n=301): 11.9% seen within 28 days: 32% seen within 90 days: 97%	**Comments:** The results for waiting times were only reported as cumulative percentages (other than the overall median time for urgent and non-urgent referrals). **Dissemination:** Not stated

seen within 120 days: 98.8%
seen within 180 days: 100%

Median waiting time between GP referral and 1st appointment:
urgent 2WW referrals: 9 days
non-urgent referrals: 36 days

GP referral received by Trust within 24 hours for urgent (n=415):
91%
receipt within 2 days: 93.6%
receipt within 14 days: 99.4%

GP referral received by Trust within 24 hours for non-urgent referrals (n=301):
37.2%
receipt within 2 days: 50.9%
receipt within 14 days: 97.2%

Median waiting time between GP's decision to refer and Trust receipt of referral:
urgent 2WW referrals: 0 days
non-urgent referrals: 2 days

Results relating to conformity of GP referral with guidelines:
Where the consultant disagreed with the GP, the disagreement was due to inappropriate use of GP referral guidelines for 35/63 2WW referrals.

Other results
Format of referral (n=966; 513 referrals were faxed):
No information given 20 (11 by fax)
Proforma 394 (342 by fax)
Letter 499 (111 by fax)
Proforma and letter 47 (45 by fax)
Other 6 (4 by fax)

Mode of transition for 2WW referrals (n=415):
Fax 374
Post 37
Electronic 2
other 2

Diagnosis at first assessment (n=966):
Malignant disease 80
No malignant disease 781
No information 99
Diagnosis unknown 6

Referral pathway for patients diagnosed with cancer (n=80): Urgent: 62 (52 were via fax) Non-urgent: 8 No information: 1 Not stated (no degree of urgency reported on GP referral): 9 Referral pathway for patients with a non-malignant diagnosed (n=781): Urgent: 320 Non-urgent: 249 No information: 12 Not stated (no degree of urgency reported on GP referral): 200 78/532 non-urgent or not stated referrals were upgraded by the consultant (3 non-urgent and 4 'not stated' upgraded referrals were later diagnosed with cancer). The consultant agreed with GP for 232/415 2WW referrals. Correlation between GP referral criteria and clinical assessment at 1st appointment (data available for 885 patients): 256/524 referred with breast lump 75/148 persistent mastalgia 30/72 asymptomatic nodularities 165/855 were found to have no abnormality at 1st assessment	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 36) **Year:** 2000 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 01.05.99 to 31.10.99	**Aims:** To audit the impact of the two week rule on the referral pattern to the breast clinic for patients with symptoms, over a six month period. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 1215 **Patient population:** Referrals to the breast clinic between May and October 1999 (231 urgent referrals, 969 routine referrals, 15 letters graded "two week rule must apply"). **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Consultants routinely re-grade the referral letters on receipt using the British Association of Surgical Oncologists guidelines. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** **Other results** Referral letters: 26/231 urgent referrals resulted in a diagnosis of cancer. 42/969 routine referrals resulted in a diagnosis of cancer. 6/15 urgent referrals marked "two week rule must apply" resulted in a diagnosis of cancer.	**Comments:** This audit was presented in the form of a published letter, with very few methodological data presented, therefore, it is not possible to assess the validity of the results. The authors state that the overall pick up rate for cancer averaged 8% over the six month period of the audit, however, it is not clear where this statistic comes from since 11.3% of urgent referrals and 5.6% of all referrals to the breast clinic resulted in a diagnosis of cancer. **Dissemination:** The audit was published in the form of a letter in a medical journal.

Categorised by consultant: 51/174 referrals categorised as urgent (see within 5 working days) by the consultant resulted in a diagnosis of cancer. 11/312 referrals categorised as soon (see within 10 working days) by the consultant resulted in a diagnosis of cancer. 6/729 referrals categorised as routine (see within 15 working days) by the consultant resulted in a diagnosis of cancer.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 37) **Year:** 1999 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 1.4.99 to 30.9.99	**Aims:** To evaluate the impact of the 2ww rule from GP referral to establishment of diagnosis, adherence to the agreed referral guidelines, cancer detection rates, waiting times and outcomes. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To audit the use of the referral proforma. $ To audit the time from referral to appointment. $ To audit the number of patients referred urgently. $ To audit the proportion of urgent and non-urgent referrals found to have cancer. **Extra outcomes (audit criterion not relating to the 2 week wait policy** None stated **Extra outcomes (non-criterion based):** None stated	**Sample type** Consecutive series **Sample size:** 1250 **Patient population:** All women referred by their GP with symptomatic breast disease were included and patients with screening detected lesions, those referred for second opinions, referrals for further management or requests for special screening in high risk cases were excluded. 288 of 1250 (23%) were graded by their GP as urgent. **Population source:** GP referral proformas and letters.	**Data source:** Data were taken from the referral letter or proforma, the medical records and the Hospital Information System. **How collected:** The authors reported that data were collected prospectively but not the format or by whom data collection was undertaken. **How validated:** Not stated **Process of applying audit criteria:** The authors reported that a consultant member of staff in the breast unit re-categorised referrals as urgent or routine in line with pre-specified criteria before the patient's clinical examination. The report does not give information on how they made these decisions. **Statistical method (before and after studies only):** Descriptive statistics were used. The proportion of patients referred urgently being seen within two weeks and the concordance of GPs and consultants assessment of urgency were calculated.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Unclear **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** Unclear **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: 282 of 288 urgent referrals were seen with two weeks. The remaining six patients included the following: Two cases were referred within 24 hours but were not sent an appropriate appointment and not seen within two weeks. Neither were subsequently found to have cancer. Four were referred by letter and as such their referral was not received within 24 hours. The referral in each case included an indication of urgency. None had a malignancy. **Results relating to conformity of GP referral with guidelines:**	**Comments:** This audit assessed the implementation of locally agreed referral criteria which were based on national guidelines. These were agreed with the local health authorities and GPs but were not identical to those issued by the Department of Health. The process by which it was conducted was not well presented. There are some inconsistencies in the reporting of the results. For example, the authors report that 8 women with cancer were graded as routine by both the GPs and consultants. However they also report that only four women with cancer were graded as routine. The criteria used in the audit were not listed except in relation to the two-week wait.

Not stated **Other results** 111 of 1250 (11%) of women were diagnosed with cancer. 60 of 288 (21%) GP urgent referrals were diagnosed with cancer. 58 of these had been categorised as urgent by the consultant staff. 51 of 962 (5%) GP non-urgent referrals were found to have cancer. 43 of these had been designated as urgent by the consultant staff. Of 111 cancers detected, 60 (54%) were rated as urgent by GPs but 107 (96%) were rated as urgent by consultants. From 1250 referrals, 288 referrals (23%) were coded as urgent by GPs compared with 622 (49%) coded as urgent by the breast unit consultants. Concordance between GP and consultant was 94% (272 of 288 referrals) for those referrals which were rated as urgent but only 64% (612 of 962 referrals) for those which GPs rated as routine. 8 women subsequently found to have cancer were graded as non-urgent by both GPs and consultants. All eight fitted the urgent referral criteria when assessed in the breast unit but the clinical details to support this assessment were not communicated in their referral. 265 of 1250 referrals were made using the agreed proforma.	The involvement of the wider team was not detailed. It is not clear if the trust's clinical audit department were involved in the audit process. While the authors reported that they intended to report on the time from referral to appointment, this was not done. Data for this study were chiefly extracted as from an unpublished paper. A PowerPoint presentation detailing the study was also submitted for this review. **Dissemination:** Not reported

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 38) **Year:** 1999 **Institution type:** Network **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 04.10.99 to 29.10.99	**Aims:** To provide a snapshot of the performance of the breast MDTs against the Government's targets, identified in the White Paper, during a 4-week period in October 1999. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** All 'urgent' referrals with a suspected diagnosis of breast cancer should be seen within 5 working days of receipt by the hospital of the referral. **Extra outcomes (audit criterion not relating to the 2 week wait policy** All diagnostic tests that are needed should be carried out in one visit. Results should be given to the patient within 5 working days of the last diagnostic test. Confirmation of the diagnosis of breast cancer should reach the GP within 24 hours of the patient being informed. An appointment for treatment should be made within 14 working days of the patient being given their definitive diagnosis. **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 1433 **Patient population:** All patients who were offered appointments to attend the breast clinic over a 4-week period. All 15 breast MDTs in Wales participated in the survey, returning a total of 1433 forms. 16 forms were deemed unusable and were subsequently excluded, therefore, 1417 forms were used to determine waiting times. 671 referrals were classified by the surgeon as urgent, 731 were classified as non-urgent and 15 were classified as family history. **Population source:** MDTs were asked to complete a form for all patients who were offered appointments to attend the breast clinic.	**Data source:** MDTs. **How collected:** Information was requested directly from the MDTs, who were asked to complete two proforma documents, produced by the CSCG office, for all patients who were offered appointments to attend the breast clinic. Additional forms requesting data regarding waiting times to treatment were sent out to MDTs for completion for those patients subsequently diagnosed with cancer. **How validated:** When necessary further information and/or clarification was sought from individual MDTs. On completion a summary of the analysis was returned to individual breast cancer MDT Lead Clinicians for verification and comment. **Process of applying audit criteria:** The decision on whether the referral was classified as 'urgent' or 'non-urgent' was made by the surgeon based upon the information provided by the referring GP. Some asymptomatic patients may be referred to the breast MDT because of a family history of breast cancer. The method used to calculate the number of working days between patient episodes was described. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Yes **Tool design:** Yes **Collection validity:** Yes **TF justified:** No **Process conduct:** Yes **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion:	**Comments:**

The average waiting time for all referrals to be seen for assessment was 16.8 working days (range 3.4 to 30.5). The average waiting time for an 'urgent' referral to be seen for assessment was 7.4 working days (range 2.1 to 20.6). The average waiting time for a 'non-urgent' referral to be seen for assessment was 25.1 working days (range 4.3 to 46.0). 7/15 hospitals saw 100% 'urgent' patients within 10 working days. 1/15 hospitals saw 100% 'urgent' patients within 5 working days. Percentage of 'urgent' referrals offered an appointment for assessment within x working days of receipt of referral or less: 5 working days = 29.7% (199/671) (range 0 - 100%) 6 working days = 43.8% (range 0 - 100%) 7 working days = 55.1% (range 2.9 - 100%) 8 working days = 66.5% (range 2.9 - 100%) 9 working days = 78.7% (range 8.8 - 100%) 10 working days = 88.1% (range 8.8 - 100%) 15 working days = 94.8% (range 14.7 - 100%) Percentage of 'non-urgent' referrals offered an appointment for assessment within x working days or less: 5 working days = 11.6% (range 0 - 76%) 10 working days = 36.8% (range 0 - 100%) 15 working days = 52.1% (range 0 - 100%) 20 working days = 62.0% (range 0 - 100%) 25 working days = 67.0% (range 11.1 - 100%) 30 working days = 72.6% (range 23.5 - 100%) 35 working days = 77.4% (range 38.2 - 100%) Waiting times for the 120 patients subsequently diagnosed with cancer: 5 days or less = 47 urgent cases, 2 non-urgent cases 6-10 days = 54 urgent cases, 2 non-urgent cases 11-15 days = 11 urgent cases, 1 non-urgent case 16-25 days = 2 urgent cases, 1 non-urgent case **Results relating to conformity of GP referral with guidelines:** Percentage of total referred cases classified as urgent by the surgeon: 671/1417 (47.3%) (range 13/112 (11.6%) to 137/165 (83.0%)). **Other results** Mode of referral (440 referrals which specified referral mechanism): Letter only = 74.2% Fax only = 13.0% Letter and fax = 11.7% Self referral and telephone = 1.1% Mode of referral (284 urgent referrals which specified referral mechanism): Letter only = 70.2%, 17.2% of which were offered an appointment within 5 days	This huge audit appears to have been well designed and conducted, although the validity of the data collected is reliant on the accuracy and completeness of data provided by the individual MDTs, which may have been inconsistent. The data collection tools were designed by the CSCG office with the advice of the regional Breast Cancer Steering Group, but it is not stated whether the tool was piloted or tested before use, although they did run a preliminary survey in January 1999. The authors acknowledge that there appears to be a high level of inconsistency in surgeon categorisation of 'urgency'. The authors measure the time interval between receipt of referral and appointment, rather than the date the GP decided to refer. Unlike in the Department of Health guidelines, it is the hospital that decides the urgency of the referral, rather than the GP. Whilst no specific action plan was made, the authors did produce recommendations based on their findings. Whilst no re-audit was planned, the survey was redone in 2001. **Dissemination:** Not stated

Fax only = 19.0%, 32.7% of which were offered an appointment within 5 days Letter and fax = 9.0%, 42.3% of which were offered an appointment within 5 days Self referral and telephone = 1.7% 71/1417 (5.0%) patients failed to keep their appointment. Of the 1346 (range per hospital 22 - 330) patients who attended at the breast clinics 120 were diagnosed as having breast cancer, 114 were 'urgent' cases (range per trust 0/22 - 27/330), 6 were 'non-urgent' cases (range per trust 0/22-330 - 2/93).	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 39) **Year:** 2001 **Institution type:** Network **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 05.02.01 to 02.03.01	**Aims:** To provide a snapshot of the performance of the breast cancer MDTs against the CSCG Minimum Standards for Breast Cancer Services, during a 4-week period in February 2001. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The All Wales Minimum Standards specify that urgent referrals with a suspected diagnosis of breast cancer must be seen within 10 working days of receipt by the hospital of the referral. **Extra outcomes (audit criterion not relating to the 2 week wait policy** All diagnostic tests that are needed should be carried out in one visit. Results should be given to the patient within 5 working days. Confirmation of the diagnosis of breast cancer should reach the GP within 24 hours of the patient being informed. An appointment for treatment should be given within 15 working days of the patient being given their definitive diagnosis. **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 1440 **Patient population:** All GP referrals to specialist breast cancer teams who had their first appointment booked over the 4-week study period. Referrals to non-MDT consultants, referrals sent directly to diagnostic services, referrals categorised as Private Patient status and referrals via the BTW screening programme were excluded. All 15 breast MDTs across Wales participated in the survey, returning a total of 1440 forms. 6MDTs received over 100 during the audit period. The number received by each MDT per week ranged from 6 - 60. 30 forms were excluded as they attended the breast clinic outside of the duration of the study, therefore, 1410 forms were used to determine waiting times. 758 referrals were classified by the surgeon as urgent, 634 were classified as non-urgent and 18 were classified as family history. **Population source:** MDTs were asked to complete a form for all eligible patients.	**Data source:** MDTs. **How collected:** Information was requested directly from the MDTs, who were asked to complete a form for all patients who were offered appointments in the 4 week period and who met the criteria for inclusion. Additional forms requesting data regarding waiting times to treatment were sent out to MDTs for completion for those patients subsequently diagnosed with breast cancer. Data were collected and analysed centrally at the CSCG office. Guidance notes were used on how to complete the forms. Data collection forms were based upon those previously used during a previous audit and were revised and updated. **How validated:** When necessary further information and/or clarification was sought from individual MDTs or from Trust cancer information staff. On completion a summary of the analysis was returned to individual breast cancer MDT Lead Clinicians for verification and comment. **Process of applying audit criteria:** The decision on whether the referral is classified as 'urgent' or 'non-urgent' was made by the surgeon based upon the information provided by the referring GP. Some asymptomatic patients may be referred to the breast MDT because of a family history of breast cancer. The method used to calculate the number of working days between patient episodes was described. The wait to see the 'hospital breast team' was taken as the time from receipt of the GP referral at the hospital to the time of first	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Yes **Tool design:** Yes **Collection validity:** Yes **TF justified:** No **Process conduct:** Yes **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

			consultation for assessment and not to a prior out-patient appointment for mammography where applicable. **Statistical method (before and after studies only):** Descriptive statistics. Spearman's Rank Correlation Coefficient was used to assess if there was any correlation between the number of cases classified as urgent and the number seen within 10 working days. Statistical analyses were conducted to investigate whether there were any differences between the percentage of patients referred by letter or by fax, and seen within 10 working days or more than 10 working days.	

Results	**Comments**
Results relating to meeting the 2WW criterion: The average number of working days between date on GP referral letter and date of receipt by the hospital (urgent letter referrals only, n=426) was 3.2 (median = 3, range 0 to 13). 12% took longer than 5 working days to arrive. The average number of working days between date on GP referral letter and date of receipt by the hospital (all letter referrals, n=940) was 3.8 (median 3, range 0 to 46). 18% took longer than 5 working days to arrive. Faxed referrals were excluded from this analysis as the vast majority were received in the hospital on the same date they were written by the GP. The average waiting time for an 'urgent' referral to be seen for assessment was 10.3 working days (median 7, range 0 to 71). The average waiting time for a 'non-urgent' referral to be seen for assessment was 19.6 working days (median 14, range 0 to 146). The average waiting time for all referrals to be seen for assessment was 14.8 working days (median 9, range 0 to 198). 4/15 hospitals saw 100% 'urgent' patients within 10 working days. There was no relationship between the number of cases classified as urgent and the number seen within 10 days (Spearman's Rank Correlation Coefficient = 0.02). Percentage of 'urgent' referrals offered an appointment for assessment within x working days or less: 5 working days = 32.4% (range 5 - 81.3%) 10 working days = 73.7% (range 7.4 - 100%) 15 working days = 91.3% (range 13 - 100%) 20 working days = 93.5% (range 18.5 - 100%) 25 working days = 93.7% (range 20.4 - 100%) 30 working days = 94.2% (range 22.2 - 100%)	**Comments:** This huge audit appears to have been well designed and conducted, although the validity of the data collected is reliant on the accuracy and completeness of data provided by the individual MDTs, which may have been inconsistent. The authors acknowledge that there appears to be a high level of inconsistency in surgeon categorisation of 'urgency'. The data collection tools were designed by the CSCG office with the advice of the All Wales Breast Cancer Steering Group, and used in the survey conducted in 1999. The authors measure the time interval between receipt of referral and appointment, rather than the date the GP decided to refer. Unlike in the Department of Health guidelines, it is the hospital that decides the urgency of the referral, rather than the GP. This survey had been previously conducted in 1999. **Dissemination:** Each MDT received a comprehensive summary of their own data within 8 weeks of completion of the survey. In addition an interim report was prepared for the All Wales Breast Cancer Steering Group and a summary of compliance to the 10 working day standard sent to the NAW.

35 working days = 94.6% (range 25.9 - 100%)

Percentage of 'non-urgent' referrals offered an appointment for assessment within x working days or less:
5 working days = 13.1% (range 0 - 46.6%)
10 working days = 37.7% (range 0 - 100%)
15 working days = 52.5% (range 0 - 100%)
20 working days = 62.6% (range 0 - 100%)
25 working days = 69.7% (range 0 - 100%)
30 working days = 79.6% (range 0 - 100%)
35 working days = 88.6% (range 0 - 100%)

Percentage of all referrals offered an appointment for assessment within x working days or less:
5 working days = 23.6%
10 working days = 57.2% (806/1410)
15 working days = 73.3%
20 working days = 79.0%
25 working days = 82.6%
30 working days = 87.4%
35 working days = 91.6%

Waiting time by referral mechanism
Letter (n=940, 426 of which were urgent referrals) average waiting time 12.0 working days, 69.0% offered an appointment within 10 working days of receipt of GP referral.
Fax (n=452, 322 of which were urgent referrals) average waiting time 8.2 working days, 79.2% offered an appointment within 10 working days of receipt of GP referral. The difference was statistically significant ($p<0.005$)

Waiting times for the 85 patients subsequently diagnosed with cancer:
5 days or less = 38 urgent cases, 5 non-urgent cases
6-10 days = 22 urgent cases, 4 non-urgent cases
11-15 days = 9 urgent cases, 2 non-urgent cases
16-25 days = 0 urgent cases, 0 non-urgent cases
25 days or more = 3 urgent cases, 2 non-urgent cases

Results relating to conformity of GP referral with guidelines:
Percentage of total referred cases classified as urgent by the surgeon:
758/1410 (53.7%) (range 0/118 (0%) to 41/49 (83.7%)).

Percentage of total referred cases classified as non-urgent by the surgeon:
634/1410 (45%) (range 32/182 (17.6%) to 116/118 (98.3%)).

Other results
Mode of referral (all referrals):
Letter = 66.7%
Fax = 32.1%
Telephone = 0.6%

Not specified = 0.7% Mode of referral (urgent referrals): Letter = 56.2% Fax = 42.5% Telephone = 0.8% Not specified = 0.5% 64/1410 (4.5%) patients failed to keep their appointment. Of the 1346 patients who attended at the breast clinics 85 (range per MDT = 1 to 17) were diagnosed as having breast cancer, 72 were 'urgent' cases, 13 were 'non-urgent' cases. The percentage of the diagnoses ranged from 3.8% (3/80) to 21% (5.23); and for urgent referrals ranged from 0% (0/0) to 45.4% (5/11).	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 40) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.07.00 to 31.03.01 (see comments section)	**Aims:** To determine if patterns of referrals under the 2-week rule were appropriate and to produce recommendations for the future. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To determine: if the 2-week rule is being applied appropriately; if the trusts are meeting their targets with regard to these referrals; the magnitude of concern around patients not been seen within 2 weeks; and a 'spot' nationwide audit of the performance of 17 trusts is included for interested. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 1585 **Patient population:** 1585 patients who were referred to the breast service; 276 referrals (17.4%) under the 2-week rule and 1309 (82.6%) outside of the 2-week rule, either urgently or as a routine referral. **Population source:** Not stated	**Data source:** The Trusts' own Information Department data and the British Association of Surgical Oncologists' (BASO) database. **How collected:** Patients are classified as category 1 - 4, depending upon severity of disease found on histological analysis (1 = normal breast, 2 = benign findings, 3 = suspicious findings, 4 = malignant findings). The data for patients classified as 1 and 2 was isolated for detailed analysis, as it could be argued that many of these patients should not have been referred under the 2-week rule. Total referrals and incidence of malignancy were analysed. It is not reported who collected the data or what type of data collection tool was used. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Unclear

Results	Comments
Results relating to meeting the 2WW criterion: $ 273/276 (99%) 2WW referrals were seen within 14 days. $ All 3 patients seen outside the 2w period had been offered an appointment within the timescale, but this had been changed at the patient's request. **Results relating to conformity of GP referral with guidelines:** Data were reported on 274 patients' symptoms, however, the authors do not report how many of these patients' symptoms warranted referral under the 2w rule. The authors reported that 49 patients referred under the 2w rule had doubtful compatibility with referral guidance based on history or findings - no other information is given.	**Comments:** This audit collects relevant information for assessing the 2WW guideline, however, the source of the data may not have been validated, the source used for identifying patients was not reported and other process issues are not reported, such as who and how the data were collected. Therefore, the validity of the audit's findings cannot be verified. The results of the audit were also not fully reported in relation to the appropriateness of referrals and there is no data to back up their statement that there is a large variation between GPs in the number of patients they refer under the 2w rule.

Other results $ 47/276 2WW referrals had suspicious or malignant findings, 214 had benign findings, 15 had normal breast. $ 13/1309 non-2WW referrals were subsequently found to have a malignancy. $ There is a large variation between GPs in the number of patients they refer under the 2w rule.	In relation to the timeframe of the audit and subsequent follow-up, the authors state that there is, as yet, little information on outcome of the patients as the period analysed started only one year ago. An audit proforma was attached as an appendix, however, it is not mentioned in the methodology or elsewhere in the audit report. The audit was also summarised as a single page abstract. The authors recommend undertaking various annual audits related to the 2WW. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 41) **Year:** 2003 **Institution type:** Teaching hospital **Study type:** audit (non c-b) **Cancer site:** Breast **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.02 to 31.03.03	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 2113 **Patient population:** All referrals to the breast unit between 01.04.02 and 31.03.03. Type of referrals were: 1983 GP symptomatic, 27 GP asymptomatic, 31 GP family history, 7 GP cosmetic, 60 tertiary, and 5 not recorded. Of the 2053 GP (and non recorded) referrals, 1142 were urgent, 870 were non urgent and 41 were not stated. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not applicable **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** No **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** 97% of GP referrals were appropriate (definition of appropriate not given) **Other results** Diagnosed with cancer: 138 referred by GP as urgent 12 referred by GP as non urgent 4 priority not given	**Comments:** This was a very poorly reported audit with only a brief description of the patient population and results presented. The aim of the audit was not reported. The percentage of referrals deemed appropriate was given, but it was not stated what was considered appropriate and how this was assessed. Other results presented were: $ Triple assessment performed. $ Type of treatment.

6 with no proforma	$ Participants treated within 1 month of diagnosis. $ Patients treated by designated surgeon. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 42) **Year:** **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast **Audit type:** 2WWR **Design:** Partially prospective before and after **Recruitment time frame (follow-up, where reported):** 01.08.97 to 30.11.97, 01.08.98 to 30.11.98 and 01.08.99 to 31.12.99	**Aims:** The 'two-week' target aims to ensure rapid assessment of patients suspected of having breast cancer (SBC) by specialist teams. This study assesses the impact on referrals in relation to outcome. Guidelines were developed to assist GPs to make appropriate referrals, considering the presentation and the age distribution of breast diseases. A referral ratio of nineteen benign cases to one of breast cancer in these suspected breast cancer (SBC) referrals was anticipated. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** This study looks at the impact of GP guidelines on referral numbers and assesses the accuracy of referral letters in relation to the final diagnosis. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 2625 **Patient population:** New patient referrals from 01.08.97 to 30.11.97 (n=608), 01.08.98 to 30.11.98 (n=853) and 01.08.99 to 31.12.99 (n=1164). For 1999, referrals were categorised as suspected breast cancer (SBC) if the GP used a specially designed fax form for SBC (issued in October 1999) or gave suspicious clinical findings in an ordinary letter or fax. There were 254 SBC referrals in this period. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Unclear **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: 126/197 SBC referrals were received within 24 hours of the decision to refer. 194/197 SBC referrals were seen within 14 days. Wait in weeks for clinic appointments following referral for non-urgent symptoms: 02/99: soon (discrete non suspicious lump) = 9, routine (breast pain, discharge, etc) = 9 12/99: soon = 5.5, routine = 11.5 01/00: soon = 3.5, routine = 12 **Results relating to conformity of GP referral with guidelines:**	**Comments:** Many important details were omitted from the audit report, such as details of the population source, the data source and data collection methods. Therefore, the validity of the audit's findings cannot be verified. The authors do not state in their objectives that the number of patients meeting the two week target will be assessed, however, this is reported in their results. The authors state that "126/197 SBC referrals were received within 24 hours… 194/197 SBC referrals received within 24 hours were seen within 14 days". Either this is a typing error and the second sentence should not include the words "received within 24 hours" or the calculation is incorrect and should report the number of patients seen within 14 days of the 126 referrals received within 24 hours.

Other results 254 SBC referrals were made between 01.08.99 to 31.12.99, of these, 62 were carcinoma. Between 01.08.99 and 31.12.99 100/1164 total referrals were diagnosed with new breast cancers (referrals predate this period for some of those referred less urgently). 69 of these 100 patients were referred as SBC. Correlation of clinical findings for patients referred as SBC and seen in November and December 1999: GP findings = not stated (n=8), Clinic findings = normal (n=2), benign (n=5), equivocal (n=0), suspicious (n=1) GP findings = benign (n=23), Clinic findings = normal (n=8), benign (n=9), equivocal (n=2), suspicious (n=4) GP findings = equivocal (n=21), Clinic findings = normal (n=9), benign (n=3), equivocal (n=3), suspicious (n=6) GP findings = suspicious (n=41), Clinic findings = normal (n=10), benign (n=10), equivocal (n=1), suspicious (n=20). Correlation of SBC referrals and outcome seen in November and December 1999: GP findings = not stated (n=8), Outcome = normal (n=4), benign (n=3), not known (n=0), malignant (n=1) GP findings = benign (n=23), Outcome = normal (n=9), benign (n=9), not known (n=1), malignant (n=4) GP findings = equivocal (n=21), Outcome = normal (n=11), benign (n=4), not known (n=0), malignant (n=6) GP findings = suspicious (n=41), Outcome = normal (n=11), benign (n=11), not known (n=1), malignant (n=18)	The results relating to the number of SBC referrals resulting in a diagnosis of carcinoma are misleading, the authors report that of the 254 SBC referrals during the period, 62 were carcinoma, then go on to report that 69 of the 100 patients diagnosed with new breast cancers during the period were referred as SBC. Presumably 7 patients were diagnosed with cancer during the study period (01.08.99 to 31.12.99), but referred prior to 01.08.99, however, this discrepancy in the figures is not explained. From the table showing the correlation of clinical findings for patients referred as SBC and seen in November and December 1999, the GP findings are reported as 'not stated' for 8 patients and 'benign description' for 23 patients, therefore, it seems inappropriate that these patients were referred as suspicious for breast cancer. The authors do not highlight this. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 43) **Year:** 2003 **Institution type:** Cancer Registry **Study type:** clinical audit **Cancer site:** Breast **Audit type:** Dx cancer **Design:** Retrospective before and after **Recruitment time frame (follow-up, where reported):** 7.97 to 12.00	**Aims:** To assess changes in the distributions of waiting times and the proportions of cases meeting proposed targets before and after 2WWR **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** =< 2 w from referral to 1st appt **Extra outcomes (audit criterion not relating to the 2 week wait policy** =< 5 w from 1st appt to treatment **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 5750 **Patient population:** 5750 women attending 19 hospitals during the audit period who were subsequently found to have breast cancer **Population source:** Cancer Registry	**Data source:** Cancer Registry **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics; Kaplan-Meier survival curves; log-rank test	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Yes **Tool design:** Not stated **Collection validity:** Unclear **TF justified:** Yes **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: % seen =< 14 d (median wait) Period 1: 66.0% (11 d) Period 2: 75.2% (10 d) ($p < 0.001$) **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** % treated =< 5 w (median wait)	**Comments:** This appears to have been a well-conducted before-and-after 2WWR audit. Appraisal is hampered by the absence of details on, e.g., data form design and validation; data collection; criteria application. **Dissemination:** Journal publication

Period 1: 83.8% (16 d) Period 2: 80.3% (20 d) ($p < 0.001$)	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 44) **Year:** 2002 **Institution type:** Professional Body **Study type:** audit (non c-b) **Cancer site:** Breast **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** A minimum period of 3 months was included for all centres.	**Aims:** To investigate the impact on referrals to breast units of the introduction of the 2ww rule. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 12538 **Patient population:** The patient populations for individual centres were not reported and may have been different. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** descriptive statistics are reported.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Unclear **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported. **Results relating to conformity of GP referral with guidelines:** 7 of 15 units assessed if referrals were in accordance with the guidelines. 576 of 2,511 (23%) did not comply with the guidelines. **Other results** 1,121 of 12,358 patients were diagnosed with cancer.	**Comments:** This study appears to be an audit of audits. It includes data which was returned to a professional organisation as raw figures and as completed audits and it includes some published data. There is no assessment of the heterogeneity of the included pieces of work in terms of populations or audit methods. The methods used in the audits are not reported. While the size of the current audit tends to lend weight to its findings, a matter of concern is that the results are given very briefly and some of the conclusions do not appear to be rigorously based on the evidence reported.

Of these, 715 patients with cancer (64% of the total with cancer) were referred urgently and 406 patients with cancer (36% of the total with cancer) were referred routinely. 2737 patients who did not have cancer were referred urgently and 8500 patients who did not have cancer (36% of the total with cancer) were referred routinely. The 715 patients referred under the 2ww rule who were subsequently diagnosed with cancer represented 21% of the total number of patients referred under the rule. The 2737 patients referred under the 2ww rule who were subsequently found not to have cancer represented 79% of the total number of patients referred under the rule.	What do you think. As this audit includes data from a number of hospitals around England, it allows some comparisons to be made. These include a comparison of the proportion of referrals which were made under the 2ww rule. These ranged from 13% to 64%. Both extremes to this range were in comparable sized hospitals. The proportion of cancers which were diagnosed in the populations in persons not referred under the rule ranged from 6% to 60%. Again, there did not appear to be a relationship between the number of patients and the proportion of non-2ww patients diagnosed with cancer. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 45) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Children's **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 11.01 to 01.03	**Aims:** $ To ascertain the number and source of referrals $ Have the patients been seen within the 2 week rule? $ What were the symptoms? $ Suspected malignancy $ Demographics $ What were the outcomes? $ Were the patients followed up? $ What were the diagnoses? **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Not stated **Sample size:** 15 **Patient population:** 15 patients who were identified as meeting the criteria, looking at referred cases November 2001 - January 2003 (n=15, 7 casenotes obtained). **Population source:** Not stated	**Data source:** Case notes. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Unclear **Attrition:** No **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: All referrals met the 2 week rule. **Results relating to conformity of GP referral with guidelines:** Most referrals were appropriate. **Other results**	**Comments:** The validity of the audit's findings cannot be verified as many important details are omitted such as details of the population studied, validity of the data source and data collection methods. Only 7/15 eligible patients' case notes were available for the audit, therefore, this small sample may not be representative. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 46) **Year:** 2002 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** GI Lower **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.10.01 to 31.8.02	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Not stated **Sample size:** **Patient population:** 409 patients were referred with suspected colorectal cancer during a 10 month time period, October 2001 and August 2002. 173 patients were diagnosed with colorectal cancer during the same time period. There were 121 2WW referrals during October 2001 (n=46), March 2002 (n=32) and August 2002 (n=43); 108 attended outpatients department and 13 went directly to endoscopy. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics (including graphs).	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** No **Attrition:** Unclear **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** **Other results** Percentage of 2WW referrals (in October 2001, March 2002, and August 2002) diagnosed with colorectal cancer (n=121): 15% had colorectal cancer 3% has another type of cancer No. of colorectal cancers diagnosed during the three month period:	**Comments:** The audit report was only available as a power point presentation, and important information relating to methodology were missing. No aims and objectives were given. The eligibility criteria for the study population was not stated. It was also not stated how the study population was identified. Because the information was only presented in abbreviated form, the data was sometimes difficult to interpret, especially in terms of no. of patients being referred to by summary statements. Although the first couple of slides relate to 2WW referrals during a 10 month period, only results relating to referrals received within three separate months (during this time period) are presented. It was not stated why only 3 months were selected. Raw figures were not given for the rate of cancer and type of referrals for

October 2001 -15 March 2002 - 17 August 2002 - 17 Type of referral for colorectal cancers diagnosed during October 2001 March 2002, and August 2002: 2WW referral 37% Other route 63%	colorectal cancer. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 47) **Year:** 2000 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.7.00 to 31.10.00	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The DoH referral criteria were used. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 22 **Patient population:** All patients referred under the 2ww rule for a 4 month period. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics only were given.	**Involvement:** No **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Unclear **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** 16 of 22 (73%) referrals meet the criteria. 10 of 22 (45%) referrals meet the criteria when assessed by the hospital. 6 GP referrals (27%) were as a result of the GP being unaware of, or misunderstanding, the criteria. 12 referrals (55%) were inappropriate but received urgent appointments.	**Comments:** The audit was reported as a presentation only; as such appraisal of the methods used, which were poorly reported, was difficult. The reasons for conducting the audit and its aims were not reported. Additionally, it is not clear how patients were identified or how or whence data were extracted. The primary aims of the study were not reported. As the methods are poorly reported, it is not clear if they were robust, or if they were in line with the initial intention of the audit. As such it is not possible to comment on whether the methods used were appropriate to meet the aims. It is not clear if the audit department was involved in conducting this audit. It is not possible to be certain that the auditors reported their results in a manner appropriate to their

Other results From 22 cases, one patient cancelled the appointment, one patient died, 8 diagnoses are awaited and 12 patients have been diagnosed: $ 9 non-malignant conditions have been diagnosed. $ 2 rectal cancers have been diagnosed. $ 1 gastric cancer has been diagnosed.	aims as they did not report the motivation for conducting the audit. Since no interpretation of results was made, the 'interpretation' field has been completed as 'unclear'. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 48) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** (2 mon)02	**Aims:** $ To ascertain compliance with 2WWR for suspected bowel cancers $ To determine the appropriateness of 2WWR referrals $ To establish outcomes **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ All 2WWR patients will be (a) appropriate, (b) seen =< 2 w $ All referrals on appropriate form **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 34 **Patient population:** New 2WWR patients referred to the surgical admissions department during a randomly selected 2-month period in 2002. **Population source:** List of urgent bowel referrals from Surgical admissions.	**Data source:** List of urgent bowel referrals. Case notes. **How collected:** Not stated **How validated:** According to Bedford Hospital guideline, reliability 95% **Process of applying audit criteria:** Case notes were examined by the Audit clerk for compliance with criteria. Any areas of disagreement were clarified between the project leaders and the Clinical Audit department. **Statistical method (before and after studies only):** Descriptive statistics; bar charts	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Yes **Collection validity:** Yes **TF justified:** No **Process conduct:** Yes **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 2WWR seen =< 2 w: 30/34 (94%) (2 patients chose to postpone). **Results relating to conformity of GP referral with guidelines:** Met criteria: 20/32 (62.5%) **Other results** Referred using appropriate form: 24/32	**Comments:** The audit appears to have been well-designed, conducted and reported. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 49) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.1.01 to 28.2.01	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 39 **Patient population:** 39 (16 m) urgent referrals for suspected lower GI cancer in the audit timeframe. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 38/39 (97%) seen =< 14 d 1 seen 17-11 d (delayed fax) 36/39 referrals received =< 24 h 1 received > 1 <= 2 d (delayed fax) 2 received > 2 <= 3 d (delayed fax) **Results relating to conformity of GP referral with guidelines:** 37/39 referrals were appropriate and met guidelines	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

Other results 38 fax, 1 post Dx cancer = 5 No evidence cancer = 11 Awaiting further investigation/review = 22 Dx unknown, patient died = 1	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 50) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.10.00 to 31.12.00	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 43 **Patient population:** 42 (12 m) urgent referrals for suspected lower GI cancer in the audit timeframe. 1 patient excluded: refused OPA, referred back to GP. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 41/42 (98%) seen =< 14 d 1 seen 17-21 d (next available OPA) 38/42 referrals received =< 24 h 2 received > 1 <= 2 d (post) 1 received > 2 <= 3 d (post) 1 received > 3 <= 4 d (post) **Results relating to conformity of GP referral with guidelines:**	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

40/42 referrals were appropriate and met guidelines **Other results** 35 fax, 7 post Dx cancer = 3 No evidence cancer = 17 Awaiting further investigation/review = 20 Awaiting medical notes = 2	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 51) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.07.00 to 30.11.00	**Aims:** To assess the effectiveness of having a 'Fast Track' referral service for patients who were strongly suspected of having colorectal cancer and to assess the use of this service by the referring GPs. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The audit indicators included the list of patient symptoms for identifying urgent referrals (DoH guidelines). **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 51 **Patient population:** Patients referred via the Fast Track referral service between 01.07.00 and 30.11.00 (n=51). 27 were men. Mean age was 70 (range 36 to 89) years. **Population source:** Not stated	**Data source:** faxed referral forms and case notes. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** No **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 51 patients were seen within 14 days (range 2 to 14), mean 8 days, median 8 days. **Results relating to conformity of GP referral with guidelines:** Discrepancies between GP's assessment and presentation at the hospital consultation (n=51) - number of patients not found to have symptom at hospital/number reported to have symptom by GP Palpable right sided mass - 5/8 Rectal tumour palpable on rectal digitation - 10/15 Iron deficiency anaemia with out obvious cause - 0/10 Rectal bleeding with change in bowel habit persistent for 6 weeks - 2/18	**Comments:** Although it was not listed as one of their audit indicators, the authors reported time from referral to 1st appointment, number of referrals received per month, and number of patients who received a per rectal examination by their GP (31/33 patients asked at outpatients). Not much data were provided on the methodology of the audit. Recommendations were made, but no specific action plan was reported. **Dissemination:** The report was disseminated to three named people (as well as the audit lead), but their roles/job titles

For patients over 60 years (n=41): Persistent rectal bleeding without anal symptoms - 1/13 Change in bowel habit persistent for 6 weeks, not intermittent - 4/20 **Other results** 7/51 patients were diagnosed with cancer.	were not stated.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 52) **Year:** 2003 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 31.10.01 to 31.03.02	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 53 **Patient population:** All 2WW referrals to the colorectal services during the six month period, October 2001 to March 2002. 50/53 referrals were made using the Cancer Network referral forms. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Unclear **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** No **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Seen within 2 weeks: 52/53 (2//53 DNA - rebooked within 2 weeks) Mean time (range) between referral and 1st appointment: 8 (2 to 17 days) **Results relating to conformity of GP referral with guidelines:** Appropriateness of referral compared to criteria: 44/53	**Comments:** The audit was reported in abstract form, with very little information provided on the methodology. 56 colorectal cancer patients were diagnosed at the hospital during the same time period (4 were 2WW referrals; majority were other routes: e.g. routine/soon referral, A&E, medical clinics, GI unit). **Dissemination:** Not stated

Different symptoms on form to history (inappropriate for 2WW referral): 17/53 (none diagnosed with cancer) **Other results** Diagnosed with cancer: 4/53 (all referrals were appropriate to guidelines) 6/53 referrals using referral proforma had a ticked box for 'per rectal mass felt', 1 of which was diagnosed with cancer.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 53) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 9.00	**Aims:** $ To ensure appropriateness of 2WWR for suspected bowel cancers $ To determine the proportion of referrals from other routes dx with cancer $ To determine whether treatment for patients with bowel cancer began appropriately soon. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ All 2WWR patients will be (a) appropriate, (b) seen =< 2 w $ No patient will be referred under 2WWR if unwilling $ All patients will begin treatment =< 1 mon from dx **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 65 **Patient population:** New patients referred to the colorectal clinic during Sept 2000, including 3 2WWR patients. **Population source:** List of urgent breast referrals.	**Data source:** List of urgent colorectal referrals. Clinical notes. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Case notes were examined by the Audit clerk for compliance with criteria. Those not meeting criteria were peer reviewed by a consultant colorectal surgeon and the GP representative. **Statistical method (before and after studies only):** Descriptive statistics; bar charts	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Yes **Collection validity:** Not stated **TF justified:** No **Process conduct:** Yes **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 2WWR seen =< 2 w: 3/3 (100%) **Results relating to conformity of GP referral with guidelines:** Met criteria: 3/3 (100%) **Other results** Dx cancer: 2/65 Treatment began < 1 mon: 2/2	**Comments:** The audit appears to have been well-designed, piloted, conducted and reported. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 54) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.05.03 to 30.06.03	**Aims:** To review the appropriateness of recent referrals in terms of the symptoms on referral and the guidelines for referral. Also to compare the actual symptoms when the patient is seen, together with the outcome from the appointment. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 67 **Patient population:** 2-week wait referrals between May and June 2003. **Population source:** 2-week wait office.	**Data source:** Case notes and referral fax forms/GP letters (n=60). Where these were unavailable the Patient Administration System (PAS) computer was used (n=7). **How collected:** Not stated **How validated:** **Process of applying audit criteria:** For patients where the case notes were available, GP referrals were assessed against the guidelines and patient symptoms in clinic were assessed against the guidelines. For patients where case notes were not available, details of the GP fax or letter were checked with appointment, admission and test results. The authors do not state who applied the criteria or whether this was checked for accuracy. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** GP referrals for 12/60 patients whose case notes were reviewed did not match the guidelines. The reason was that their symptoms had not persisted for 6 weeks. Symptoms in clinic for 8/60 patients whose case notes were reviewed did not match the guidelines. The reasons were that the patients reported different duration of symptoms or patients reported different symptoms. **Other results**	**Comments:** Very little methodological information is provided, such as by whom the data were collected and whether a validated data collection tool was used. However, the results provided sufficient information to allow the reader to interpret the findings in relation to the appropriateness of the 2ww referrals, despite the authors not drawing any conclusions from their results or presenting an action plan. **Dissemination:** The report was disseminated to the Medical Director.

8/67 patients had cancer diagnosed (one of which was discharged and re-referred with worsening symptoms, cancer was diagnosed). For the remaining patients 19 were discharged, 19 were awaiting investigations, 20 were under follow up and 1 patient died. 29 referrals were received in May, 38 in June and 54 in July.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment

Audit ID no.:
(WTA 55)
 	
Year:
2002
 	
Institution type:
General hospital
 	
Study type:
clinical audit
 	
Cancer site:
GI Lower
 	
Audit type:
2WWR
 	
Design:
Prospective
 	
Recruitment time frame (follow-up, where reported):
15.11.01 to 26.3.02
	Aims:
	To comply with the National cancer services Standards which require trusts to audit the 'appropriateness' of GP referrals against agreed referral guidelines.
	
	Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):
	To determine:
	$ how many of the urgent suspected lower GI cancer referrals from GPs fitted the referral guidelines.
	$ whether the guidelines are sufficiently comprehensive to encompass all the major signs of suspected lower GI cancer
	$ how many of the referrals included in the audit were subsequently diagnosed with cancer.
	
	Extra outcomes (audit criterion not relating to the 2 week wait policy
	
	Extra outcomes (non-criterion based):
		Sample type
		Consecutive series
		
		Sample size:
		68
		
		Patient population:
		All patients referred with suspected lower GI cancers whose referral was received by the Cancer Priority Referral Office during the audit period. The majority (43 of 53) were aged 55 years or more. Data were obtained on 53 of 68 patients.
		
		Population source:
		Referrals received by the Cancer Priority Referral Office.
			Data source:
			Data were recorded on a proforma, which was designed in line with national recommendations. Data on final diagnoses of cancer were obtained from a histological database, at least 2 months after the patients' first appointment date in order to identify patients diagnosed with colorectal cancer.
			
			How collected:
			The proforma was completed by consultants before the first appointment for each patient.
			
			How validated:
			Not stated
			
			Process of applying audit criteria:
			Not stated
			
			Statistical method (before and after studies only):
			Descriptive statistics were reported. Data were stratified by the time to appointment and by age of patient.
				Involvement:
				No
				Motive:
				Yes
				Project plan:
				Yes
				Source integrity:
				Not stated
				Appropriateness:
				Yes
				Inclusion criteria:
				Yes
				Source check:
				Not stated
				Tool design:
				Not stated
				Collection validity:
				Not stated
				TF justified:
				No
				Process conduct:
				Yes
				Reporting:
				Yes
				Analysis:
				Yes
				Attrition:
				No
				Re-audit:
				Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 47 of 53 patients (88.7%) were given an appointment within 14 days. (This included 22 patients (41.5%) given an appointment within 7 days and 25 patients (47.2%) given appointment between 8 and 14 days.) **Results relating to conformity of GP referral with guidelines:** 7 of 10 (70%) patients less than 55 years of age were deemed not have been referred appropriately. 2 patients had rectal bleeding without a change in their bowel habit, 3 patients had a change in their bowel habit without rectal bleeding, one patient had a change in bowel habit, abdominal pain and a feeling of obstruction but no palpable mass and one patient had isolated short-term instances of heavy bleeding with mucous and persistent constipation with a normal rectal examination.	**Comments:** It is not clear from the report if clinical staff were involved in planning the audit or analysing its results. 68 patients were referred during the audit period but only 53 were included in the audit. The reason for their omission was not given. It is unclear by which criteria they were not included. The proforma was completed by the consultants before the first appointment. As such it appears that the waiting time information relates to the date of an appointment rather than the data the patient was seen.

5 of 43 (12%) patients 55 years of age or older were deemed not have been referred appropriately. One patient was referred for each of the following reasons, all of which fell outside the guidelines: $ Rectal bleeding (this was not persistent for six weeks as required by the guidelines). $ Two-month history of left upper quadrant pain with a tender area level with the iliac crest on the left. $ One-year history of passing mucous with normal rectal examination. $ Intermittent change in bowel habit to looser stool (not persistent for six weeks). $ Altered bowel habit, melaena, abdominal discomfort and anaemia. **Other results** Of the 10 patients aged less than 55 years, 1 was diagnosed with cancer. This patient was one of 3 referred appropriately; the patient had a persistent change to looser stools and a palpable rectal mass. Of the 43 patients aged 55 years of more, 9 were diagnosed with cancer. All had been referred appropriately with rectal bleeding and without anal symptoms.	It is unclear how information on the patients' pathological findings was obtained. As the process used to apply the criteria were not reported, it is not possible to be certain if their application was done in an appropriate way. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 56) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.03.02 to 31.03.02.	**Aims:** A case note audit was undertaken to elicit the following: $ Number of appropriate referrals $ Number of inappropriate referrals $ Reasons for inappropriateness of referrals $ Number of actual cancers detected **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 69 **Patient population:** All fast track referrals during the study period (n=69). **Population source:** Not stated	**Data source:** Case notes. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** 57/67 referrals were appropriate (i.e. they fell within the national referral guidelines criteria). 10/67 referrals were inappropriate (i.e. they did not meet the national referral guidelines criteria). The two where fast track forms were not found were not included in the audit. Reasons for inappropriateness of referrals: Gastric problems x 1 Too frail to investigate/advanced old age x 4 Anaemic for 2 years x 1	**Comments:** This audit reports relevant data relating to the appropriateness of referrals under the 2WW guideline and the appropriateness of the guideline (i.e. proportion of patients subsequently diagnosed with cancer). However, many important details are omitted such as details of the population source, validity of the data source and data collection methods. Therefore, the validity of the audit's findings cannot be verified. There was no interpretation of the results, nor any conclusions drawn. **Dissemination:** Not stated

Ovarian cancer x 1 Known haemorrhoids x 1 Consitpation (in a patient who had been taking co-codamol for 12 weeks) x 1 Malabsorption x 1 Not stated x 1 Completion of appropriateness - A/B boxes: No AB boxes ticked x 39 Marked appropriate x 18 Marked inappropriate x 10 No fast track form found x 2 **Other results** Total number of fast tracks diagnosed as cancer = 4.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 57) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.1.02 to 31.3.02	**Aims:** To evaluate and improve the compliance of the Trust to the following standard, as described in the Manual of Cancer Standards: "The MDT should have agreed to provide information to referring GPs and other PCGs/PCTs on the appropriateness and timeliness of urgent suspected cancer GP referrals in line with HSC 2000/013". **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To improve appropriateness and quality of two week rule referrals from GPs. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 78 **Patient population:** All patients seen at the Trust, who were referred by their GP under the 2 week rule for suspected colorectal cancer, during the three month period (n=64) were eligible. 54 patients were included in the analysis, this was due to case notes being unobtainable, i.e. at other hospitals or palliative care centres, or misfiled. Patients who were diagnosed with cancer and first seen during the same time period but not referred under the 2 week rule were also included (n=14). This does not include patients who presented at Accident and Emergency or those internally referred by consultants. **Population source:** 2ww patients - the Trust PAS system. Non 2ww patients - ACP Colorectal cancer database.	**Data source:** Case notes. **How collected:** Data were collected on the database form and entered into the Access database. It is not stated who collected the data. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Unclear **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: 61/64 (95.3%) patients were seen within 2 weeks. Waiting times for 8 non-2WW patients diagnosed with cancer referred routinely were 11 to 189 days, average approximately 86 days (estimated from graph). Waiting times for 6 non-2WW patients diagnosed with cancer referred with a priority of 'urgent' were 0 to 20 days, average approximately 12 days (estimated from graph). **Results relating to conformity of GP referral with guidelines:**	**Comments:** Whilst a database and database form were designed by the Clinical Audit and Effectiveness Officer to collect the data, it is not stated whether the form was piloted or tested before use. The interpretation of results appeared to be appropriate in most cases, with the exception of the figures in relation to the appropriateness of referrals, where the figures were inconsistent between the results and summary. This audit had an appropriate study population and appears to have been adequately conducted. However, further methodological details would allow a better evaluation of the validity of the results,

23/54 patients' symptoms indicated on the referral did not meet the criteria for referral. **Other results** 44/54 patients were referred by 'open access' proforma, 5 by faxed letter, 1 by posted letter and 4 by general hospital proforma. Outcome of 2WW referrals (n=54): New malignancy = 6 Recurrence/metastases/other form of cancer = 2 Non-malignant = 44 Outcome not known = 2 Out of 14 patients referred by their GP, not under the 2 week rule, who were found to have cancer, 8 were referred routinely, 6 were referred with a priority of 'urgent'. Reasons for referral for non-2WW referred patients were pain, change in bowel habit, blood per rectum, weight loss and anaemia. The authors do not state whether these symptoms met the referral criteria.	such as details of whether data collection and the population source were checked for accuracy, and details of how compliance with the audit criteria was assessed. **Dissemination:** The authors state that a copy of the report will be placed on the Cancer Directorate Intranet site. An email accompanying the audit stated that the audit was presented to GPs and stated the GPs' feedback and recommendations.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 58) **Year:** 2002 **Institution type:** Teaching hospital **Study type:** research study **Cancer site:** GI Lower **Audit type:** Dx cancer **Design:** Retrospective before and after **Recruitment time frame (follow-up, where reported):** Not stated	**Aims:** To evaluate the introduction of the two week wait criteria on the waiting times for treatment in patients with colorectal cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To compare the waiting times of two groups, one before and one after the introduction of the 2ww system. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** $ The time from outpatient appointment to investigations. $ The time from investigations to treatment. $ The time from outpatient appointment to treatment.	**Sample type** Consecutive series **Sample size:** 90 **Patient population:** Consecutive patients with colorectal cancer before and after the introduction of the 2ww criteria. Patients referred by non-GPs or who presented emergently were excluded. **Population source:** Not stated	**Data source:** Patients' case notes were retrieved. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** N/a **Statistical method (before and after studies only):** Descriptive statistics were provided. In addition, the differences between paired data were assessed using the Mann-Whitney U-Test to assess statistical significance. Data were stratified into those with signs and symptoms meeting the criteria and those patients without these signs and symptoms.	**Involvement:** Yes **Motive:** No **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Median wait to clinic for patients meeting the criteria (n = 69): Before introduction (n = 34) - 10.5 days After introduction (n = 35) - 8 days Median wait to clinic for patients not meeting the criteria (n = 21): Before introduction (n = 11) - 26 days After introduction (n = 10) - 27.5 days Differences were not statistically significant at the 5% level.	**Comments:** This study provides few details about its methods. It is not clear the timeframe covered. It is not clear how patients were identified or how, or by whom, data were obtained. As such, it is not possible to comment on the appropriateness of the methods in fulfilling the study aim. The results were presented only in terms of the median time to appointments. The proportion of the patients failing to be seen within the allowed period was not reported. **Dissemination:** Not stated

Results relating to conformity of GP referral with guidelines: Not reported **Other results**	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 59) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.03.02 to 31.05.02	**Aims:** To assess the impact of the introduction of a new cancer referral form following the initial audit in September 2001. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To review "Target Referrals" for Suspected Colorectal Cancer and assess their appropriateness. To compare appropriate referral numbers with previous audit. To compare the cancer pick-up rate with the previous audit. To identify ways in which the Colorectal Cancer Service could be improved. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Not stated **Sample size:** 100 **Patient population:** Lower GI target referrals for suspected cancer made during a 3 month period. Patients' ages ranged from 20 to 80+, with the majority of patients (77) aged between 50 and 79. 45 patients were male. All referrals were marked 'urgent' by the GP. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** At least one National Guideline Criteria symptom was reported in 91/100 referrals. However, only 30/100 referrals were considered to be suspected colorectal cancer - this number has decreased by 11% since the previous audit. The GP and consultant priorities were compared. Whilst the GP coded all 100 referrals as urgent, the consultant coded 48 as urgent, 38 as soon and 14 as routine. **Other results**	**Comments:** This audit presents relevant data for assessing whether GPs refer appropriately, according to the referral criteria in the guidelines. Whilst the results were adequately presented, there were few methodological details, so it is not possible to verify the validity of the results. Other outcomes presented were outcome of first visit and how many referrals included the mandatory per rectum examination. This is a re-audit of a previous audit.(WTA 60) In the initial audit the patient population was a random sample, therefore, it is likely to be the same in this audit, although the authors do not specify the

2/22 patients referred with criteria 1 of the National Guideline Criteria (rectal bleeding and change in bowel habit for at least 6 weeks), were diagnosed with cancer and 3/37 patients referred with criteria 2 of the National Guideline Criteria (rectal bleeding persistently without obvious peri-anal cause such as fissure or haemorrhoids) were diagnosed with cancer. Initial diagnosis: Normal = 37 Benign = 56 Cancer = 5 Not made = 2 Final diagnosis: Normal = 35 Benign = 60 Cancer = 5	sample type or any inclusion criteria. **Dissemination:** One of the recommendations was to present the findings to the GPs.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 60) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.01.01 to 31.03.01	**Aims:** **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To review "Target Referrals" for Suspected Colorectal Cancer and assess their appropriateness. To identify trends in referral method and media used. To identify ways in which the Colorectal Cancer Service could be improved. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Random sample **Sample size:** 100 **Patient population:** Random selection of 70% of target referrals for suspected cancer from the three month sample period. 95 referrals were coded as urgent by the GP, 4 as soon and 1 was not recorded. Ages ranged from 40 to 80+ with the majority (77) being aged between 50 and 79. 39 patients were male. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Unclear **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** At least one National Guideline Criteria symptom was reported in 96/100 referrals. However, only 41/100 referrals were considered to be suspected colorectal cancer. The GP and consultant priorities were compared, the GP coded 95 referrals as urgent, 4 as soon and 1 was not reported. The consultant coded 20 as urgent, 4 as soon, 18 as routine and 51 were not reported. **Other results**	**Comments:** This audit presents relevant data for assessing whether GPs refer appropriately, according to the referral criteria in the guidelines. Whilst the results were adequately presented, there were few methodological details, so it is not possible to verify the validity of the results. Other outcomes presented were outcome of first visit and how many referrals included the mandatory per rectum examination. The authors use the term 'target referrals' which appears to relate to 2ww referrals. However, they state that 4 referrals were coded as 'soon' and the level of urgency was not recorded for 1 referral.

The referral transmission method used in 93/100 cases was the fax, in 4 cases post and 3 were not recorded. The referral media used in 86/100 cases was the designated suspected colorectal cancer form, 11 used letter and 3 were not reported. 0/51 of the patients referred with criteria 1 and 2 of the National Guideline Criteria were diagnosed with colorectal cancer. 36 patients were referred with rectal bleeding persistently without obvious peri-anal cause (criteria 2) and 31 patients with change of bowel habit of recent onset to looser stools and/or increased frequency or defecation persistent for more than 6 weeks (criteria 1). The three patients diagnosed with cancer presented with the same symptoms; criteria 1 of the National Guideline Criteria, 15 patients in total were referred with this symptom. Initial diagnosis: Normal = 20 Benign = 60 Cancer = 4 Not made = 16 Final diagnosis: Normal = 13 Benign = 63 Cancer = 3 Not made = 21	A re-audit of this audit has been undertaken.(WTA 59) **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment

Audit ID no.:
(WTA 61)
 	
Year:
2001
 	
Institution type:
General hospital
 	
Study type:
clinical audit
 	
Cancer site:
GI Lower
 	
Audit type:
2WWR
 	
Design:
Not stated
 	
Recruitment time frame (follow-up, where reported):
1st 100 patients from 01.04.00
	Aims:
	The audit was carried out to establish the number of appropriate/inappropriate lower GI fast track referrals by the individual GP, the number of patients referred to a member of the colorectal team, the number of fast track referral forms used for this purpose and the number of lower GI fast track patients diagnosed with cancer.
	
	Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):
	To establish:
	$ the number of appropriate/inappropriate lower GI fast track referrals by the individual GP
	$ the number of patients referred to a member of the colorectal team
	$ the number of fast track referral forms used for this purpose
	$ the number of lower GI fast track patients diagnosed with cancer.
	
	Extra outcomes (audit criterion not relating to the 2 week wait policy
	
	Extra outcomes (non-criterion based):
		Sample type
		Consecutive series
		
		Sample size:
		100
		
		Patient population:
		The first 100 fast track referrals for lower GI patients where the correspondence received was dated on or after 01.04.00. The 2WW guidelines were in place at West Dorset General Hospitals NHS Trust from 01.04.00.
		
		Population source:
		Patient Administration System (PAS).
			Data source:
			Fast track referral forms.
			
			How collected:
			Each fast track referral form was scrutinised by the Lead Consultant Surgeon together with the Colorectal Specialist Nurse and Clinical Evaluation Facilitator and the findings were recorded and analysed on a Microsoft Excel Spreadsheet.
			
			How validated:
			
			Process of applying audit criteria:
			The terms appropriate and inappropriate have been assessed by using the "Guidelines for Urgent Referrals of Patients with Suspected Cancer" issued by the NHS Executive dated 31.03.00.
			
			Statistical method (before and after studies only):
			Descriptive statistics.
				Involvement:
				Yes
				Motive:
				Yes
				Project plan:
				Yes
				Source integrity:
				Not stated
				Appropriateness:
				Yes
				Inclusion criteria:
				Yes
				Source check:
				Not stated
				Tool design:
				Not stated
				Collection validity:
				Not stated
				TF justified:
				Yes
				Process conduct:
				Yes
				Reporting:
				Yes
				Analysis:
				Yes
				Attrition:
				Yes
				Re-audit:
				Not stated

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** 69/100 referrals were deemed to be appropriate. **Other results** $ 94/100 referrals were on the appropriate fast track form. $ 53/81 referrals after 01.07.00 were referred to a member of the colorectal team, 28 were referred to any consultant. 17/100 referrals were diagnosed with cancer.	**Comments:** This audit appears to have been well designed and conducted by the Lead Consultant Surgeon, Colorectal Nurse Specialist and Clinical Evaluation Facilitator, using the NHS Executive Guidelines for defining appropriateness of referrals. There is no mention of a data extraction tool, therefore, data may have been inputted directly into the Microsoft Excel spreadsheet. The results are both well presented and relevant in auditing the 2WW guideline, however, the authors do not draw any conclusions from their results, make any recommendations for practice, or mention any plans to re-audit. Since the authors do not draw conclusions from their results, the 'interpretation' field has been filled in as 'unclear'.

	Dissemination: Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 62) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** Not stated	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The DoH referral criteria for suspected lower GI cancers were used. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 111 **Patient population:** The population appears to be referrals made under the 2ww rule to the colorectal surgery department. Patients were excluded from the analysis if their notes (n = 7) or referral letters (n = 4) were missing or if their referral was not for a suspected colorectal cancer. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics were given.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Not reported. **Results relating to conformity of GP referral with guidelines:** 46 referrals appeared to be compliant with the criteria set out in the guidelines. Of these, 39 referrals were compliant when assessed by the hospital and 7 were not. 46 referrals appeared not to be compliant with the criteria. Of these, 6 referrals were found compliant when assessed by the hospital and 40 were non-compliant.	**Comments:** The audit was not fully reported - data have been obtained for this review from presentation overheads. A great deal of information on the methods used was not presented or was reported only very briefly. As the reason for conducting the audit and the aims it planned to fulfill are not reported, it is not possible to comment if the methods used are appropriate to fulfill the motive or aims. The brief report of the methods used do not allow the reader to know by whom or how information was collected and anlaysed or if the source of eligible patients or patient information was appropriate or systematically checked for errors. It is not clear which patients were included.

Other results 12 patients were found to have cancer from the 39 patients whose referral appeared to be compliant with the criteria and who were compliant on assessment. 1 patient was found to have cancer from the 40 patients whose referral appeared not to be compliant with the criteria and who were non-compliant on assessment. No cancers were diagnosed in the 7 patients whose referral appeared to be compliant but were non-compliant on assessment or the 6 patients whose referral appeared not to be compliant but were compliant on assessment. 3 cancers were found in 16 patients with rectal bleeding with a change in bowel habits. 2 cancers were found in 3 patients with a right-sided abdominal mass. 8 cancers were found in 9 patients with a palpable rectal mass. 1 cancer was found in 5 patients with rectal bleeding. 4 cancers were found in 14 patients with a change in bowel habit without rectal bleeding. No cancers were found in 7 patients with iron deficiency anaemia.	The presentation included a number of possible improvement measures but it is not clear if these were suggestions or definitive plans. The report does not identify if anyone was nominated to be responsible to ensure appropriate changes to the service were made. The presentation suggested further prospective monitoring but did not give further details. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 63) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.1.01 to 31.3.01 and 1.6.01 to 31.8.01	**Aims:** To improve compliance with guidelines for suspected colorectal referral and thereby to ensure the most effective use of the process. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ Identify all possible referral routes and timescales. $ Identify factors leading to non-compliance with referral guidelines. $ Assess the use of imaging services for investigation and diagnosis. $ Provide information about referral practices to the PCT. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** The referral patterns, the number of investigation performed pre- and post-diagnosis; time to rigid sigmoidoscopy; time to flexible sigmoidoscopy; time to colonoscopy; time to barium enema; time to CT; time to ultrasound; number of days from referral to diagnosis.	**Sample type** Consecutive series **Sample size:** 114 **Patient population:** The sample consisted of all patients referred under the 2ww system and all patients diagnosed as having colorectal cancer by any route. There were 47 men and 65 women. Data were unavailable for 2 patients. 54 patients were referred as urgent, 28 via the 2ww rule and 18 had no referral urgency stated. 12 patients were emergency admissions. **Population source:** Patients were identified from data which were routinely collected for management purposes.	**Data source:** Data were obtained from case notes. **How collected:** Data were entered onto a data collection form. They were then loaded onto an Excel spreadsheet. **How validated:** Not stated **Process of applying audit criteria:** Data were scored using a pre-designed scoring system; scores of 5 or more were eligible for referral under the 2ww system. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** No **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Not reported. **Results relating to conformity of GP referral with guidelines:** Not reported. **Other results** The authors report that GPs tended to underestimate the signs and symptoms of the patient in comparison with hospital assessments, except where the score was high.	**Comments:** The audit's authors report that a specially designed data collection tool was used. They do not, however, report if it was piloted before use. The timeframe for the audit excluded two months. Why this was so was not explained. Some key methodological details are omitted. As such it is not possible to comment on the appropriateness of the methods used for the aims listed. **Dissemination:** A presentation on a referral proforma would be given to a local GP forum and at a regular MDT meeting at thegeneral hospital.

There were 91 patients whose score was 5 or more; 23 had been referred via 2WW, 45 as urgent, 7 were emergency admissions and 16 had no urgency stated. 48/91 were diagnosed with cancer. There were 21 patients whose score was less than 5. 9/21 were diagnosed with cancer. No diagnosis was made in 5.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 64) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.6.01 to 31.12.01	**Aims:** To ascertain whether patients were referred appropriately via the 2WW suspected cancer route, the type and number of investigations requested, and the diagnostic outcome. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The audit examined: $ The identification of the consultant $ Whether the patient's symptoms met the referral criteria $ Whether a 2ww appointment was required $ What investigations the patient received $ Diagnostic outcome. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Not stated **Sample size:** 122 **Patient population:** 2WW referrals. **Population source:** 2WW referral database.	**Data source:** Case notes. Waiting list information and diagnostic coding were obtained from the Patient Administration System. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** No **Analysis:** Unclear **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** No. of patients with symptoms that met the criteria for referral: 79/122 The referral criteria were met in 13/15 patients diagnosed with cancer. Patient judged by hospital clinician to require a 2WW appointment: 81 yes, 38 no, 3 not known. **Other results** Diagnostic investigations (referral priority):	**Comments:** This was a poorly reported audit. It was only available as a slide presentation and a brief preliminary report (in abstract form). Methodological details were therefore limited. The authors reported that 122 hospital case notes were audited, but did not give the total number that were identified as eligible. The authors did not report any referrals that were excluded owing to missing notes, although the availability of case notes was listed as one of the limitations of the audit. As the information was only presented in abbreviated form, the data was sometimes difficult to interpret, especially in terms of the patient population. The source of the patient population (2WW referral service database) as well as the fact that the audit examined the appropriateness of the referral

Blood test: 43 (routine 25, soon 1, urgent 3, not known 14) Colonoscopy: 103 (routine 1, soon 23, urgent 60, not known 19) FOS/OGD: 28 (routine 0, soon 3, urgent 16, not known 9) Other: 33 (routine 0, soon 0, urgent 9, not known 24) Clinical outcome (n=122): Cancer 15 Diverticular disease 39 Haemorroids 11 Other 29 Diagnosis not known, patients awaiting further tests 28	for 2WW appointments (results reported for all 122 patients) implies that the included referrals were in fact 2WW referrals. However, the results relating to the type of investigations used (a total of 207 investigations reported in the summary table) were reported according to the referral priority (routine, soon, urgent or not known). This means that it was unclear who the patient population were. It was also not stated why only 207/122 were included in the summary table of diagnostic investigations, and whether some patients received more than one investigation. For the evaluation of the patient's symptoms meeting the referral criteria, it was not stated if this was an assessment of the symptoms listed by the GP or those reported at the 1st outpatient appointment. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 65) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.09.01 to 30.11.01.	**Aims:** To identify the malignancy rate in the 45 to 60 year age group patients referred through the colorectal two week referral system. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 124 **Patient population:** Patients referred to the hospital through the two week system (n = 116) or patients referred by GP letter but deemed to be suspicious by the consultant (n = 8). **Population source:** The Cancer Database. All patients referred through the two week system or through other routes but deemed to be suspicious by the consultant are registered on the Cancer Database.	**Data source:** Not stated **How collected:** The name and age of each patient was obtained and checked against histological malignancy data. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** No **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** **Other results** 12/124 referrals were confirmed as malignant, of which 11 were received through the 2WW route and 1 as a GP letter. Number of 2WW referrals aged over 60 years = 89, number of patients referred below the age of 60 years = 32. All confirmed malignant diagnoses were in patients over the age of 70.	**Comments:** The aim of the study was to identify the malignancy rate in the 45 to 60 year age group patients referred through the colorectal two week referral system, however, patients referred by GP letter but deemed to be urgent by the consultant were also included, as were patients below the age of 45 (age range of patients referred was 37 - 95 years). The study included 124 patients referred via these two routes, the charts recording the number of patients in each age group and the number of confirmed malignant diagnoses appear to include 124 patients. However, the authors report that there were 89 two week referrals of patients over the age of 60 years and 32 patients referred below the age of 60 years, they do not account for the other 3 patients.

	Only 32 patients were below the age of 60 and only 12 of the 124 total referrals were diagnosed with cancer. Therefore, the sample size was too small to draw any firm conclusions regarding the malignancy rate in the 45 to 60 year age group. The author recommends considering continuing the audit for a long period. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 66) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 5.6.02 to not stated	**Aims:** To review compliance with the referral documentation guidelines, and the efficiency of the service informing GPs of malignancy. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Criteria/standards used: $ 95% urgent cases seen =< 14 d $ 90% clinic letters returned to GP =< 7 d of 1st appointment $ 100% malignancies faxed back to GP =< 24 h of dx **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 160 **Patient population:** 160 colorectal referrals to 2WW Clinic **Population source:** 2WWR appointments office at the hospital	**Data source:** GP referral forms/letters to the 2WW clinic. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Unclear **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Seen =< 2 w: 97% (153/160) **Results relating to conformity of GP referral with guidelines:** Met => 1 criteria: 65% **Other results** Confirmed colorectal malignancy: 10/160 Confirmed non-colorectal malignancy: 2/160 Not confirmed at last visit to colorectal team: 141/160	**Comments:** Few details of the audit conduct were given, making appraisal difficult. **Dissemination:** Not stated

Unknown: 7/160 Letters returned to GP =< 7 d of 1st appointment: 152/156 who attended Malignancies faxed back to GP =< 24 h of dx: 0/10	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 67) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** Mixed **Design:** Unclear **Recruitment time frame (follow-up, where reported):** Dates not stated but the period lasted six months	**Aims:** No aims were stated but it appears that the aims of the study were to assess the impact of the implementation of the 2ww standard on the colorectal service offered by one hospital. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** None stated **Extra outcomes (audit criterion not relating to the 2 week wait policy** None stated **Extra outcomes (non-criterion based):** None stated	**Sample type** Consecutive series **Sample size:** 167 **Patient population:** The audit examined two related samples. The first contained all patients referred under the 2ww rule to the colorectal service in the period of interest (n = 94). The second provided data about the patients who were diagnosed with cancer (n = 81). **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive data were reported.	**Involvement:** No **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** Unclear **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: 77 of 94 (82%) 2ww referrals were seen within 14 days. **Results relating to conformity of GP referral with guidelines:** 40 referrals (43%) were deemed appropriate in comparison with the guidelines. **Other results** 8 of 94 patients referred under the 2wwr were found to have colorectal cancer (5 colon cancers and 3 rectal cancers). The diagnostic yield of appropriate referrals was 8 of 40 (20%). No colorectal tumours were seen in any patient whose referral was deemed to be inappropriate. In addition there were 2 ovarian cancers, and one each of renal carcinoma, non-Hodgkins lymphoma and bile duct tumour. The report	**Comments:** Many aspects of the process of this audit were not reported. This may be owing to the nature of the report - it is an abstract of an oral presentation submitted to a conference. As such, the process used in conducting the audit is unclear and it is difficult to know what the authors aimed to do or if they meet their own requirements. For example, it is unclear how the authors chose which data to report as they did not specify which elements of the 2ww system they wish to investigate and only certain elements were reported. It is unclear how the authors decided that some patients were referred inappropriately or if the authors were aware of the final diagnosis at the time this decision was made. The conclusion of the authors that the 2ww system would adversely affect the time to diagnosis for most patients with colorectal cancer seems inappropriate for two main reasons. It does not follow from the results

does not state if these patients' referrals were deemed appropriate or not. 8 of the 81 cancers diagnosed were identified via the 2wwr. The remaining 73 cases of colorectal cancer identified by the service presented via non-2ww referral routes. 44 were colon cancers and 29 were rectal cancers.	presented and the time to diagnosis for any patient was not presented in the abstract. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 68) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 1.3.00 to 30.6.00	**Aims:** To identify whether GPs were aware of symptoms and signs that were high risk for colorectal cancer, whether it was appreciated that these symptoms were high risk and that patients should be referred urgently and whether the current clinic structure is appropriate if all patients with high risk symptoms were identified and seen urgently within two weeks. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To identify GP risk stratification for colorectal cancer at referral to the colorectal clinic. $ To identify the variation in risk stratification for colorectal cancer by specific assessment of GP letter $ To identify risk stratification for colorectal cancer after assessment in the specialist clinic $ To determine the impact of stratification for high risk of colorectal cancer on OPD throughput of patients at low risk $ To determine how many patients with high risk symptoms, or low risk symptoms, had colorectal cancer $ To determine whether modification of risk stratification might be appropriate. The audit assessed compliance with the DoH referral Guidelines for Suspected Cancers. **Extra outcomes (audit criterion not relating to the 2 week wait policy** None given **Extra outcomes (non-criterion based):** Agreement between GP's and consultant's assessments of degree of urgency. Time from investigation to diagnosis.	**Sample type** Consecutive series **Sample size:** 183 **Patient population:** All patients referred with suspected colorectal cancer to one DGH. 22 patients had been excluded as they had inappropriate referrals (n=4), were seen in other clinics (n=2), their condition cleared (n=6) or they failed to attend their appointment (n=10). 41% of patients were male and 59% female; the age range was 4 to 99 years. **Population source:** Patients were identified from GP's letters.	**Data source:** A proforma was completed by the consultant at clinic. Final outcome data were added to the proforma following a case note review. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics, including graphical comparisons, were used.	**Involvement:** No **Motive:** No **Project plan:** Yes **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 23 "urgent" patients (52%) failed to be seen within 2 weeks.	**Comments:** The study aimed to conduct a criterion-based audit but the report failed to include key information about the methods used to conduct the audit, including the methods by which the criteria were applied.

Patients referred as "urgent" cases (n = 42) - Median time from referral to consultation = 2 weeks, range, <1 to 11 weeks. Patients upgraded to "urgent" cases by the hospital consultant (n = 44) - Median time from referral to consultation = 3 weeks, range, 1 to 8 weeks. Patients upgraded to "urgent" cases by the hospital consultant following initial investigations (n = 3) - Median time from referral to consultation = 12 weeks, range, 3 to 24 weeks. Patients referred as "non-urgent" cases by their GPs (n = 42) - Median time from referral to consultation = 24 weeks, range, 4 to 31 weeks. **Results relating to conformity of GP referral with guidelines:** 44 of 141 (31%) "routine" referrals were upgraded to "urgent" by the hospital consultant. 20 of 42 (48%) "urgent" referrals were deemed "routine" by the consultant. **Other results** 4 of 183 patients (2%) were subsequently diagnosed with cancer. Only one of these had been referred by the 2ww system. 63% of letters did not state any priority or clinical details to indicate any suspicion of cancer. Of these 2 patients were later found to have cancer.	The authors suggested that they would assess a range of factors but these were not all addressed in the results presented. However, the report is in the form of a meeting presentation and as such, the scope for full reporting is reduced. **Dissemination:** The report suggested that guidelines be circulated to GPs but no plan for disseminating the audit findings was reported.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 69) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.07.00 to 31.12.00	**Aims:** To assess the impact of fast track referral and highlight areas of failure in process. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Department of Health introduced a 'Two week Wait' Fast-track referral system in July 2000. Therefore everyone with suspected cancer will be able to see a specialist within two weeks of their GP deciding that they need to be seen urgently and requesting an appointment. The following referral guidelines were chosen and circulated to all local GPs: $ Rectal bleeding and a persistent change in bowel habit for at least 6 weeks $ Rectal bleeding persistently without any anal symptoms $ A persistent change in bowel habit for at least 6 weeks (age >60) $ A definite palpable rectal or abdominal mass $ Iron deficiency anaemia, without an obvious cause, <10g/dl post-menopausal woman and <11g/dl in men The referral letters were faxed to the Colorectal unit for review by the specialist and if considered to be appropriate and within the guidelines an appointment was allocated. To assess the impact of fast track referral and highlight areas of failure in process. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 197 **Patient population:** Fast track colorectal cancer referrals from July to December 2000 (n=141) and patients who had been diagnosed with colorectal cancer within the same six month period from other modes of referral (n=56). **Population source:** Not stated	**Data source:** Information was compiled using data from the hospital's colorectal cancer audit, the patients' clinical notes and from the fast-track referral database. **How collected:** Not stated. The information collected included the date of referral, date of initial appointment, diagnosis, dates of investigations, time of surgery (if appropriate) and any other relevant information. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 34/141 (24%) fast-track referral patients were not seen within the 2 weeks. The reasons for this were as follows: consultant on annual leave (n=12), no earlier appointment available (n=12), patient on holiday (n=2), patient underwent investigation prior to appointment (n=3), non-appropriate referral (n=5). For those that were not seen within the 2 weeks the median time to appointment was 4 days (mean 6.7, range 1 -	**Comments:** The audit was written up as a report and a meeting abstract. There are some discrepancies between the two relating to the figures presented. The majority of the data presented above was abstracted from the report, however, the aims of the project, which were not stated in the report, are taken from the

38). The median time to appointment for the 20 routine outpatient referrals (not fast-track referrals) was 25 days (mean=33, range =1-111). Naturally, the emergency and physician referrals were seen the same or the next day. **Results relating to conformity of GP referral with guidelines:** **Other results** 19 fast-track referral patients were diagnosed with colorectal cancer. 56 new patients were diagnosed with colorectal cancer within the same 6 month period outside of the fast-track referral system. 20 were routine outpatient referrals, 23 presented as emergencies either from GPs or from Accident and Emergency and 13 were referred to the surgeons by the physicians.	abstract. Many important methodology details were omitted from the report and abstract such as details of the source of the study population, validity of the data sources and data collection methods. Without these details it is not possible to verify the validity of the study. The results were not presented very clearly and were rather complicated to decipher. One statement in the results does not appear to make sense "For those (fast-track referral patients) that were not seen within the 2 weeks the median time to appointment was 4 days (mean 6.7, range 1-38)" - do the authors mean that the time to appointment over and above 14 days was median 4 days, i.e. 18 days? **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 70) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.8.00 to 31.07.01	**Aims:** To measure the compliance to the guidelines and evaluate the effectiveness of referrals under the 2WW rule. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 237 **Patient population:** The sample consisted of all patients referred to the rapid access colorectal clinic during the audit period. The audit excluded two patients, one of whom had been referred with a known, radiologically-proven cancer and one who died of an unrelated cause shortly after their referral. **Population source:** Patients were identified by the central appointments team.	**Data source:** Data were obtained from case notes and computer databases maintained by the radiology and pathology departments. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Data were represented both by using descriptive and inferential statistics and by graphical means.	**Involvement:** Unclear **Motive:** No **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 228 of 237 (96.2%) were seen within two weeks. **Results relating to conformity of GP referral with guidelines:** Of 237 patients, 147 referrals were in accordance with the published guidelines for referral. 90 referrals were not. **Other results** 21 cancers were located in the patients sampled. The pickup rate was 18 of 147 in those whose referral was in accordance with the guidelines but only 3 of 90 in patients referred outside the guidance. The cancer pickup rate (i.e. 18 of 21 compared with 3 of 21) significantly favoured patients referred under the guidelines (chi-squared = 5.5, 9 = 0.019).	**Comments:** This audit was generally well conducted and reported, however, there was still some important information omitted. The methods used appeared appropriate to the aims of the study. The criteria met by the patients found to have colorectal cancers were reported but the proportion of patients who did not have cancer who were referred under each criterion was not reported. It is not possible to assess the criteria as to their predictive power. The authors reported some proposed changes but did not go so far as to include an action plan or designate who should have responsibility for achieving the changes. **Dissemination:**

231 of 237 referrals were not fully completed.	Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 71) **Year:** **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** Not stated	**Aims:** To assess appropriateness of referrals **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Criteria $ Only patients with suspicious and persistent symptoms should be referred by fast-track $ Should include 80-90% of all colorectal cancers presenting to outpatients **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 255 **Patient population:** 205 fast-track referrals for suspected colorectal cancer **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** No **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** No **Tool design:** No **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** Cancers from fast track system = 12, of which 9 met fast track criteria, 3 were urgent only **Other results** Not reported Consultant estimates: Fast track = 40% (n = 103)	**Comments:** No methods section; unclear whether based on monitoring data only. Unclear whether authors use of 'appropriateness' refers to whether symptoms suggested cancer, or whether the referral fell within DoH guidelines. **Dissemination:** Presentation

Urgent = 28% (n = 72) Soon = 20% (n = 52) Routine = 3% (n = 7) Others = 9% (n = 21)	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 72) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 4.2001 to 10.2002	**Aims:** To identify: n 2WWR patients n 2WWR patients with cancer waiting time for clinic appt **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 266 **Patient population:** 266 2WWR patients with suspected CR cancer **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 248/266 (93%) seen =< 14 d (15-21 d = 8, 22-28 d = 4, > 28 d = 4) **Results relating to conformity of GP referral with guidelines:** 250/266 (93%) designated appropriate **Other results** 32 (12%) dx Ca	**Comments:** Slide presentation with few details of the audit conduct, making appraisal difficult. **Dissemination:** Audit meeting

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 73) **Year:** 2002 **Institution type:** Teaching hospital **Study type:** research study **Cancer site:** GI Lower **Audit type:** Dx cancer **Design:** Retrospective before and after **Recruitment time frame (follow-up, where reported):** 1.3.98 to 31.12.99; 1.3.00 to 31.12.01	**Aims:** To assess if the introduction of the two week referral pathway has achieved a reduction in the waiting time between referral. First out patient appointment (OPA), diagnosis and first treatment. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** The delay between the patients attendance at the out-patient department and their diagnosis and between their diagnosis and treatment.	**Sample type** Consecutive series **Sample size:** 273 **Patient population:** All patients who were diagnosed with colorectal cancer. The study had two sample. The first consisted of patients referred after the introduction of the 2ww system. The second sample served as a control and consisted of patients diagnosed with cancer who had been referred before the introduction of the system. **Population source:** Not stated	**Data source:** Data were collected from referral letters. It is unclear from where data on the clinical outcome of patients referred. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics were presented.	**Involvement:** Not stated **Motive:** Unclear **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Unclear **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 2ww referrals waited an average 10.9 days to be seen, patients referred via letters waited an average 26.2 days and historic controls waited an average 10.2 days. **Results relating to conformity of GP referral with guidelines:** Not reported. **Other results** Of 137 patients diagnosed with cancer after the introduction of the 2ww system, 51 (37%) had been referred under the 2ww and 86 (62%) had been referred via GP letters.	**Comments:** This study gave information before and after the introduction of the 2ww system. The publication was, however, a conference submission and fuller details may have been available elsewhere. As a conference abstract, few details of the methods used were provided. As such it is difficult to comment on the adequacy of the methods used. The results presented appear to be the mean waiting times but this is not stated explicitly. The proportion of patients who were seen within two weeks was not presented for any category. This audit was conducted in the same department in which a similar audit was conducted. Details of the other audit are also included in this review.(WTA 82) A number of patients will have contributed

	to both studies. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 74) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** Mixed **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 3.00 to 3.01	**Aims:** $ To determine the proportion of 2WWR patients meeting guidelines and found to have malignancy $ To detect changes in uptake of guidelines **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 299 **Patient population:** 1. Urgent colorectal referrals (n = 180). 2. All new colorectal cancer cases in the district (n = 145). **Population source:** Patients were identified from the GPs referral documentation.	**Data source:** Referral letters; Case notes **How collected:** Referral letters reviewed by consultant surgeon. Data on delays and diagnosis collected prospectively. **How validated:** Not stated **Process of applying audit criteria:** After appointments were assigned, but before clinical assessment, a consultant surgeon divided referral letters into those that met => 1 published referral guideline, and those that did not appear to satisfy any of the criteria. **Statistical method (before and after studies only):** Descriptive statistics; bar chart	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** Yes **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 173 attended of whom 151 (87%) were seen =< 2 w (median 10 d, range 1-47 d). This rose to 93% in second 6 mon. Of 95 not referred urgently, median time to 1st clinic appt was 32 d (range 2-107 d). **Results relating to conformity of GP referral with guidelines:** $ 95/180 referral letters fitted guidelines $ 85/180 referral letters did not fit guidelines **Other results**	**Comments:** The audit was clearly reported, but many details of conduct were missing making appraisal difficult. **Dissemination:** Journal publication

26/145 (18%) new colorectal cases diagnosed locally were identified by 2WWR. $ 95/180 referral letters fitting guidelines were diagnosed with: colorectal cancer x 24, other malignancy x 9, other benign disease x 41, no physical cause/DNA x 21 $ 85/180 referral letters not fitting guidelines were diagnosed with: colorectal cancer x 2, other malignancy x 2, other benign disease x 51, no physical cause/DNA x 30	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 75) **Year:** 2000 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** Not stated	**Aims:** To assess a nurse led clinic established to meet the requirements of the DoH 2ww system. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** None stated **Extra outcomes (non-criterion based):** Not stated	**Sample type** Consecutive series **Sample size:** 316 **Patient population:** The population appears to be all those patients referred to a rapid access colorectal cancer clinic during a six month period. Consultants assessed eligibility for this clinic by reviewing referral letters. 56 of 316 patients were referred under the two week wait system. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive details were provided.	**Involvement:** No **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Unclear **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: All 56 2ww referrals were seen within two weeks. The mean waiting time for all patients, including both 2ww referrals and non-2ww referrals, was 23 days (range 4 to 68). **Results relating to conformity of GP referral with guidelines:** Not stated **Other results** 22 cancers were identified. This represented a pick-up rate of 7%.	**Comments:** Few details were presented about this audit which was presented as a conference abstract. Fuller details may have been included in the oral presentation. Demographic data about included patients were not included in the abstract. Fuller details of the processes used to conduct the audit and the results it obtained would be beneficial. A number of non-pre-specified outcomes were reported. The number of cancers detected and the number of patients referred for further investigations and treatments were reported. **Dissemination:** Not stated

Polyps were found in 72 patients. 33 were diagnosed as adenomas and 39 were hyperplasic.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 76) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 7.2000 to 6.2001	**Aims:** To review 2WWR system and identify: $ No. patients subsequently found to have cancer $ How frequently GPs adhere to guidelines $ If hospital targets are being met **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 319 **Patient population:** 319 2WWR referrals to colorectal dept **Population source:** 2WWR referral lists	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics; charts (pie, bar)	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Unclear **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 98.5% seen <= 14 d **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** 29 (9%) dx CR cancer 10 (3%) dx other cancer	**Comments:** Slide presentation with few details of the audit conduct, making appraisal difficult. **Dissemination:** Presentation

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 77) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** Corresponding 3-month periods during 2000, 2001, and 2003 (actual dates were not given)	**Aims:** To review the reasons for urgent referrals, compliance with national guidelines and determine the cancer pick-up rate. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** 2WW referrals were assessed in terms of presenting symptoms and compliance with the national referral guidelines. The number of patients diagnosed with cancer was also measured. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 342 **Patient population:** All GP faxed 2WW referrals for colorectal cancer within three consecutive 3-month periods between 2000 and 2002 (n=342). There were 29 referrals per month in 2000, 37 in 2001 and 49 in 2002. 7 referrals were unavailable for review (n=335). **Population source:** Faxed referrals	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Unclear **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** No **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** 63/335 referrals did not comply with the guidelines. Frequent reasons: fresh rectal bleeding in young patients, constipation and brief episodes of diarrhoea **Other results** The presenting symptom for 33% of referrals was change in bowel habit, of which 15 patients were diagnosed with cancer. Most common presenting features for patients diagnosed were colorectal cancer were palpable rectal mass and change in bowel habit.	**Comments:** The audit was only available as an abstract, and therefore only included limited information on the methodology. The authors do not state if the data were missing for any patients. The actual dates over which the audit was conducted were not reported. Presenting symptoms are presumed to be those reported on the GP referral (presenting to the GP) and not those identified at the 1st appointment at the hospital, although this is not explicitly stated. **Dissemination:** Not stated

1/63 referrals that did not comply with the guidelines were diagnosed with cancer 62/335 referrals were found to have colorectal cancer. 7/335 patients had other malignancies. Overall cancer pick up rate: 69/335 (21%)	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 78) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 1.4.00 to 31.10.01	**Aims:** To assess the implementation of the 2-week rule on colorectal practice in a district general hospital and consider the potential impact on detection of colorectal cancer cases. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The data audit included the symptom for which the GP referred the patient, the symptoms reported by the patient at the outpatient consultation and the interval between receipt of the referral and the outpatient appointment. Both the symptoms described by the GP and reported by the patient were compared with the DoH referral criteria. **Extra outcomes (audit criterion not relating to the 2 week wait policy** None stated. **Extra outcomes (non-criterion based):** None stated.	**Sample type** Consecutive series **Sample size:** 347 **Patient population:** All patients referred during the audit period. The average age of patients was 63 years (range 16 to 95 years). 96 patients (28%) were referred under the 2-week rule and 251 (72%) were not. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics, including graphical comparisons, were used.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Unclear **TF justified:** Yes **Process conduct:** Unclear **Reporting:** Yes **Analysis:** No **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Time between receipt of referral and consultation: 2-week referrals - 77% were seen within 2 weeks, 12.5% were seen in the third week and 10.5% were seen more than three weeks from referral. Non-2-week wait referrals - Not reported. **Results relating to conformity of GP referral with guidelines:** Of 96 patients referred under the guidelines, 47 (49%) fitted the referral criteria. Of the 251 patients not referred under the guideline, 112 (46%) would have fitted the criteria.	**Comments:** The authors report that they studied a six month cohort but the start and finish dates represent an eighteen month timeframe. As such, it is not clear over what period of time patients' data were collected. The results of the concordance of the symptoms reported by patients with the referral criteria were reported only in graphical form. Few details of the conduct of the study were reported. This makes critical appraisal of the audit difficult.

Other results 25 cancers were identified in patients attending the out-patients department. This compared with 40 cancers diagnosed in other patients. 14 of 25 (56%) were identified in the 2-week wait referral patients giving a pick-up rate of 14 in 96. 11 of 25 (44%) were identified in patients not referred using the 2-week rule giving a pick-up rate of 11 in 251. 14 of 25 (56%) of the cancers in outpatients were identified in persons meeting the referral criteria. The authors do not report how many of these 14 patients had been referred by which method.	**Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 79) **Year:** 2002 **Institution type:** General hospital **Study type:** research study **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Prospective before and after **Recruitment time frame (follow-up, where reported):** 01.04.00 to 30.06.00 and 01.08.00 to 31.10.00	**Aims:** To determine the effect of the 14 day rule on the colorectal service of a district general hospital. One of the main outcome measures was: Mean time between referral and first outpatients appointment. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** Other main outcome measures included: Mean time between first outpatients appointment and diagnosis; Mean time between referral and diagnosis.	**Sample type** Consecutive series **Sample size:** 421 **Patient population:** Patients referred by their GP with suspected colorectal cancer during two pre-specified time periods; one prior to the implementation of the guidelines (n=192) and one after (n=229). Patients whose first consultation was private or emergent were excluded. Only patients referred via a dedicated fax line using a referral form were considered as fast-track referrals. 17 patients referred prior to the guidelines and 20 after, did not attend their first appointment or for subsequent investigations. These patients were therefore excluded from the analyses. Type of referral for patients seen prior to the guideline implementation were (no. of patients fully investigated): 38 (34) urgent, 63 (57) routine, and 91 (81) were not specified; and for those seen after implementation: 105 (73/24) fast track/urgent, 38 (33) routine, and 86 (80) were not specified. **Population source:** GP referrals received by the colorectal service (entered onto a prospective database, see data source).	**Data source:** A database of colorectal and gastroenterological cancer referrals was developed (this included fast-track referrals and letters which referred to alteration of bowel habit, abdominal/rectal mass, rectal bleeding, weight loss or iron deficiency). All patients were followed-up until a firm diagnosis was established. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** One-way ANOVA was used to compare multiple un-paired means, and proportions were compared using the chi squared.	**Involvement:** Yes **Motive:** No **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Fast-track referrals seen within 14 days: 73/73 (100%) Mean time to 1st appointment for post guideline referrals, n=212 (those before implementation, n=172; overall difference $p<0.01$): fast-track - 8.64 days urgent - 37 days (36 days) Routine - 49 days (58 days) Not specified - 45 days (54 days) **Results relating to conformity of GP referral with guidelines:**	**Comments:** Those collecting and evaluating the data will have been aware of whether the patient was referred prior or after the introduction of the guidelines, which could potentially have biased the data collection. The authors also do not report checking the accuracy of the data collection. The analyses involved the comparison of mean waiting times, which unlike median, mean values can be affected by outliers (the range of values were also not reported). The authors also reported results on change in referral pattern (referral type). They did not evaluate the appropriateness of referrals.

Other results Number of patients diagnosed with cancer, by referral type (those prior to guidelines): fast-track - 11/73 urgent - 5/24 (7/34) Routine - 1/33 (5/57) Not specified - 6/80 (3/81)	**Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 80) **Year:** 2000 **Institution type:** All acute trusts in Wales **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 06.11.00 to 01.12.00	**Aims:** To provide a snapshot of the performance of colorectal cancer MDTs against the CSCG Minimum Standards for colorectal cancer, during a 4-week period in November 2000. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The All Wales Minimum Standards for colorectal cancer specifies that urgent referrals with a suspected diagnosis of colorectal cancer must be seen within 10 working days of receipt by the hospital of the referral. There should be a mechanism for example by telephone, secure fax or e-mail to provide GPs rapid access to the appropriate specialist in the MDT. **Extra outcomes (audit criterion not relating to the 2 week wait policy** Confirmation of the diagnosis of colorectal cancer should reach the GP within 24 hours of the patient being informed. The Association of Coloproctology Guidelines recommend that definitive treatment should commence within 4 weeks (20 working days) of the patient being informed of their diagnosis. **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 466 **Patient population:** All patients in whom the referral from primary care was considered urgent by the consultant or deputy and who had their first appointment in the 4-week period, either in outpatients or in an open-access rectal bleeding clinic or endoscopy unit. Patients in whom the referral to outpatients was considered non-urgent by the consultant or deputy and all referrals from sources other than primary care were excluded. All 16 colorectal cancer MDTs across Wales participated in the survey, returning a total of 506 forms. 40 forms were excluded as the patients attended outpatient clinics outside the duration of the survey, therefore, 466 forms were used to determine waiting times. The number of referrals received by each MDT ranged from 0 - 63 (median 26.5). **Population source:** MDTs were asked to complete a form for all eligible patients.	**Data source:** MDTs. **How collected:** Information was requested directly from the MDTs, who were asked to complete a form for all patients who were offered appointments in the 4 week period and who met the criteria for inclusion, including those that did not attend their appointment. Additional forms requesting data regarding waiting times to treatment were sent out to MDTs for completion for those patients subsequently diagnosed with cancer. **How validated:** When necessary further information and/or clarification was sought from individual MDTs or from Trust cancer information staff. On completion a summary of the analysis was returned to individual colorectal cancer MDT Lead Clinicians for verification and comment. **Process of applying audit criteria:** The decision on whether the referral is classified as 'urgent' or 'non-urgent' is made by the hospital clinician based upon the information contained in the GP referral letter. The method used to calculate the number of working days between patient episodes was described. The duration of the wait is taken as the time from receipt of the GP referral at the hospital to the time of first consultation. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Yes **Tool design:** Yes **Collection validity:** Yes **TF justified:** No **Process conduct:** Yes **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion:	**Comments:**

The average number of working days between date on GP referral letter and date of receipt by the hospital (letter referrals only): 3.1 (median = 2, range 0 to 17) The average waiting time for an 'urgent' referral to be seen for assessment was 29.6 working days (median = 14, range 0 to 147). None of the colorectal cancer MDTs in Wales achieved the 10 day standard for every urgent referral. Percentage of referrals offered an appointment for assessment within x working days or less: 5 working days = 8.2% (range 0 - 38.5%) 10 working days = 30.9% (range 9.4 - 87.5%) 15 working days = 55.4% (range 11.1 - 100%) 20 working days = 64.4% (range 22.2 - 100%) 25 working days = 71.0% (range 22.2 - 100%) 30 working days = 74.2% (range 31.3 - 100%) 35 working days = 76.0% (range 31.3 - 100%) Waiting time by referral mechanism Letter (n=414) average waiting time 30.8 working days, 27.3% offered an appointment within 10 working days of receipt of GP referral. Fax (n=38) average waiting time 9.2 working days, 65.8% offered an appointment within 10 working days of receipt of GP referral. Waiting times for the 31 patients subsequently diagnosed with cancer: 5 days or less = 5 6-10 days = 4 11-15 days = 10 16-25 days = 9 25 days or more = 3 **Results relating to conformity of GP referral with guidelines:** **Other results** Mode of referral: Letter only = 88.8% (414/466) Fax = 8.2% (38/466) Other = 3.0% (14/466) 18/466 (3.9%) patients failed to keep their appointment (range per MDT = 0/0 referrals to 13/15 referrals). Of the 448 patients who attended 31 (6.9%) were diagnosed with colorectal cancer.	This huge audit appears to have been well designed and conducted, although the validity of the data collected is reliant on the accuracy and completeness of data provided by the individual MDTs, which may have been inconsistent. The data collection tools were designed by the CSCG office with the advice of the All Wales Colorectal Cancer Steering Group, but it is not stated whether the tool was piloted or tested before use, although a similar survey was conducted on breast cancer prior to this project. For the purpose of the survey 'urgency' was defined as having a 'high risk of colorectal cancer based on information in the referral. 15/16 clinicians used the Association of Coloproctology Guidelines to determine the urgency of referrals. The authors measure the time interval between receipt of referral and appointment, rather than the date the GP decided to refer. Unlike in the Department of Health guidelines, it is the hospital that decides the urgency of the referral, rather than the GP. The authors commented on the fact that the MDTs knew they were being evaluated, therefore may have performed better. **Dissemination:** The results have been returned to each Trust so that local, organisational measures can be taken to increase the number of high-risk cases seen within the prescribed standard.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 81) **Year:** 2003 **Institution type:** Teaching hospital **Study type:** research study **Cancer site:** GI Lower **Audit type:** Mixed **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 18-month period (actual dates not given)	**Aims:** To assess the impact of the 2WW rule on the presentation and treatment of colorectal cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 593 **Patient population:** The sample consisted of all referrals to the colorectal cancer service (dedicated fast-track clinic) within an 18 month period (n=462) and all patients who were subsequently diagnosed with colorectal cancer (n=195). Fast-track referrals lead to 64 cancer diagnoses. Patients diagnosed with colorectal cancer presenting at the department in the same time period via other routes numbered 131; 66 via standard outpatients letter, 26 from other departments, 39 were emergency admissions. Of these, only those referred via standard referral letters appear to have been included in the analyses. **Population source:** Not stated	**Data source:** Not stated **How collected:** Patient outcomes (especially colorectal cancer diagnosis) were documented for all included referrals. **How validated:** N/A **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics. P values were given for comparative data, but the statistical tests used were not reported.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** No **Analysis:** Unclear **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Median time to first appointment: Fast track referrals - 12 days standard referrals - 24 days, $p<0.0001$ **Results relating to conformity of GP referral with guidelines:** After patient interview, 303/462 fast-track referrals appeared to fulfill the referral criteria, and of those diagnosed with cancer 59/64 fulfilled the criteria. 61/66 patients referred via standard letter fulfilled the criteria. **Other results**	**Comments:** This study was only presented as an abstract, with very little details given on the methodology. It was not stated how and by whom the data were collected. As the authors do not report the source of the data, it is unclear whether the data on fast track referrals were collected retrospectively or prospectively. It was not stated if any patients were excluded, e.g. because of missing data. The authors report the number of patients referred via A&E and other departments, but the analyses appear only relate to patients referred by their GP and diagnosed with cancer (fast track system vs. standard referrals), although this is not explicitly stated. It was not stated how the appropriateness of referrals were assessed; all that was reported was that they were assessed according to patient interview. It is unclear therefore, if this means that referrals were assessed according to the symptoms that patients

Analysis of Dukes' staging showed fewer Dukes' B and more metastatic tumours in the fast-track group than standard referrals ($p<0.003$). Tumour location: Fast track referrals - 48 distal to splenic flexure, and 16 proximal Standard referrals - 55 distal to splenic flexure, and 11 proximal, $p=0.07$	present with at their initial assessment at the hospital. The authors report in their discussion that there was an apparent discrepancy between the symptoms and signs recorded by GPs and those elicited in the colorectal clinic in a large minority of fast-track referrals. The authors also report comparative data relating to median time to diagnosis (fast track vs. standard referrals) **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 82) **Year:** 2002 **Institution type:** Teaching hospital **Study type:** research study **Cancer site:** GI Lower **Audit type:** 2WWR **Design:** Prospective before and after **Recruitment time frame (follow-up, where reported):** 1.11.97 to 31.10.99; 1.3.00 to 31.12.01	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 824 **Patient population:** Patients referred under the 2ww system were compared with patients referred before its introduction. The pre-introduction sample consisted of those referred for limited colonoscopy whose referral met pre-specified criteria. **Population source:** Patients were identified from referral letters.	**Data source:** Data were collected from referral letters. It is unclear from where data on the clinical outcome of patients referred. **How collected:** data were entered prospectively onto a computer database. **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Inferential statistics were presented. Data from the two samples were compared using the chi-squared test.	**Involvement:** Not stated **Motive:** Unclear **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** Not reported. **Other results** Of 404 patients in the limited colonoscopy group, 90 (22%) had neoplasia. Of 420 patients referred under the 2ww system, 69 (16.4%) had neoplasia. The difference in yield was not statistically significant.	**Comments:** This study gave information before and after the introduction of the 2ww system but the criteria by which the hospital staff identified patients as requiring fast-track care were not listed in the publication. The publication was, however, a conference submission and fuller details may have been available elsewhere. As a conference abstract, reporting is very sketchy. As such it is difficult to comment on the adequacy of the methods used. The statistics used appear to have been appropriate. In finding on a chi-squared test that the

A statistically significantly higher proportion of neoplasia were early disease, including adenomatous polyps and Dukes' Stage A disease, were seen in the limited colonoscopy group than in the 2ww group; 71 of 90 as compared with 26 of 69 (Chi-squared P = <0.001).	populations had differing distributions of early and late stage disease, the authors demonstrated that patients referred under the 2ww system had later stage disease. Without reporting their original referral criteria, it is not possible to comment on the importance of this observation. This audit was conducted in the same department in which a similar audit was conducted. Details of the other audit are also included in this review.(WTA 73) A number of patients will have contributed to both studies. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 83) **Year:** 2001 **Institution type:** General hospital **Study type:** research study **Cancer site:** GI Lower **Audit type:** Mixed **Design:** Prospective before and after **Recruitment time frame (follow-up, where reported):** Reference period: 01.07.00 and 31.10.00; control period: 01.07.99 and 31.10.99	**Aims:** To assess the local implementation of the 2W referral guidelines and their impact on patients referred within the fast-track referral system and those referred via conventional pathways. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 934 **Patient population:** All patients referred by GPs to the colorectal surgical department between 01.07.00 and 31.10.00. 120/898 were referred via 2WW proformas, 106 of whom attended their appointment (group A). 778 patients had conventional referrals (group B). Patients with proven colorectal cancer were compared with historical controls diagnosed during the same 4 month period one year earlier (n=36, Group C). **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Not stated	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** **Other results** Diagnosed with cancer: 2WW referrals: 19/120 (6 diagnosed by GP prior to referral) Conventional referrals: 10/778, P=<0.0005	**Comments:** This was a prospective observational study (with some historical control data) that was presented as a conference abstract. Very little information was available on the methodology (no information was provided on the patient selection and data collection process). Results on mean time from referral to positive cancer diagnosis were also presented in the abstract. The authors state that 6 patients were diagnosed by the GP prior to referral, with no further explanation of what is meant by this.

	Dissemination: Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 84) **Year:** 2004 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower **Audit type:** Mixed **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 01.07.00 to 30.06.01	**Aims:** To determine the effectiveness and efficacy of the DoH's new GP referral guidelines for colorectal cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To evaluate: $ The proportion of patients referred on the basis of the 2WW standard. $ The percentage of all cancers referred to outpatients fulfilling at least one of the higher risk referral criteria, and the diagnostic yield of cancer in the 2WW standard clinic compared to the routine clinic. $ The time for the GP referral to the outpatients appointment, overall time to treatment and stage of disease at diagnosis. $ How the referral criteria were used by the GP. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** Time from the date of onset of the first symptom to date of GP referral letter.	**Sample type** Consecutive series **Sample size:** 2663 **Patient population:** All patients diagnosed with colorectal cancer between 01.07.00 and 30.06.01, which included those presenting as emergencies, as well as those referred on the basis of the 2WW standard or to a routine colorectal surgical clinic. A fax proforma was used for 2WW referrals by all but one included GP, whose patients were seen urgently in the routine clinic. 249 patients were diagnosed with cancer: 88 admitted as emergencies, 159 seen at outpatient clinics (which included 40 seen at the routine colorectal surgical outpatient (CSOP) clinic and 65 at the 2WW standard clinic (n=105)), 1 diagnosed by GP and referred directly, and 1 was an incidental diagnosis during admittance for other reasons. The audit also evaluated all patients referred on the basis of the 2WW standard (n = 758; (303 male, median age 70 (range 25 to 93) years), and all patients who attended the routine CSOP clinics (n = 1815; 801 males, median age 58 (range 13 to 94) years). **Population source:** Not stated	**Data source:** Data on history and examination for patients attending CSOP clinics and 2WW standard clinics were recorded on data-collection forms before patients received flexible sigmoidoscopy. For patients not attending these clinics, case notes were examined. Data on diagnostic yield were obtained from a section of the GP's referral proforma that is completed by the hospital clinicians. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** The Fisher's Exact Test and Mann-Whitney U Test.	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** **Analysis:** Yes **Attrition:** Unclear **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Median time to 1st outpatient appointment (n=105): 2WW clinic (n=65): 12 days (range 5 to 64) CSOP clinic - with cancer high risk criteria (n=27): 28 days (range 4 to 203) CSOP clinic - with cancer low risk criteria (n=12): 26 days (range 6 to 96) data not available for 1 patient from CSOP	**Comments:** The study has also been published as a conference abstract. '2WW standard clinics' constituted reserved appointments in routine clinics and rapid access flexible sigmoidoscopy clinics for patients referred with DoH urgent referral criteria 1 to 5 (of the guidelines) and medical gastroenterology clinics for those referred with criterion 6.

Results relating to conformity of GP referral with guidelines: 274/695 patients referred under the 2WW standard did not fulfill one of the urgent referral criteria, according to hospital clinicians, and 421/695 did. 478/1815 patients attending the CSOP clinic had symptoms meeting urgent referral criteria (data not given according to source of referral). **Other results** Diagnostic yield was significantly greater in the 2WW standard clinic (65/695 (9.4%)) than the CSOP clinic (40/1815, 2%; p=0.0001). Diagnostic yield for the 2WW standard clinic according to the hospital clinician's assessment of symptoms was 13.8% (58/421). 7/274 patients that did not have symptoms according to the criteria were diagnosed with cancer. The diagnostic yield for patients attending CSOP clinic, who had symptoms according to the urgent referral criteria (as assessed by the hospital clinicians) was 5.6% (27/478). 12/1326 did not have symptoms according to the criteria were diagnosed with cancer. For patients diagnosed with cancer attending outpatient clinic (any), 125/147 had symptoms according to the urgent referral criteria (as assessed by the hospital clinicians); complete records only available for 147/159. 58/125 were referred to the 2WW standard clinics, and 67/125 to other clinics (27 to CSOP, and 40 to either medical gastrointestinal clinics, general surgical clinics or geriatric).	The authors reported that their patient population was patients diagnosed with cancer, however, three patient population sources were actually examined. The median time to 1st outpatient appointment was not reported for all 2WW referrals, only those diagnosed with cancer. All patient referrals to the 2WW standard clinic will have been because of suspected cancer. Not all patient's referral to routine outpatients clinics will be cancer related. It was not stated how many were referred because of suspected cancer (or clinical features of colorectal cancer that do not meet the 2WW referral criteria), but 26% of patients attending routine CSOP clinics had symptoms meeting urgent referral criteria. Results relating to the time from the date of onset of the first symptom to date of GP referral letter were said to be reported elsewhere. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 85) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.10.00 to 31.10.00	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 7 **Patient population:** 6 (4 m) urgent referrals for suspected upper GI cancer in the audit timeframe. 1 patient was excluded: not urgent, referred back to GP. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 5/6 (83%) seen =< 14 d 1 seen 15-16 d (Next available appt) 4/6 referrals received =< 24 h 2 received > 1 <= 2 d (delayed fax, post) **Results relating to conformity of GP referral with guidelines:** 6/6 referrals were appropriate and met guidelines	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

Other results 5 fax, 1 post Dx cancer = 1 No evidence cancer = 3 Awaiting further investigation = 2	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 86) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.11.00 to 31.12.00	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To ascertain whether GP referrals were received =< 24 h $ To ascertain whether time from referral to 1st appointment was =< 14 d **Extra outcomes (audit criterion not relating to the 2 week wait policy** $ To analyse whether clinical information provided by GPs met referral guidelines **Extra outcomes (non-criterion based):** $ To present numbers of urgent referrals subsequently diagnosed with cancer	**Sample type** Consecutive series **Sample size:** 21 **Patient population:** 21 (10 m) urgent referrals for suspected upper GI cancer in the audit timeframe. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 20/21 (95%) seen =< 14 d 1 seen 17-21 d (clinic cancelled, next available appt) 18/21 referrals received =< 24 h 2 received > 1 <= 2 d (post) 1 received > 2 <= 3 d (delayed fax) **Results relating to conformity of GP referral with guidelines:** 21/21 referrals were appropriate and met guidelines	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

Other results 19 fax, 2 post Dx cancer = 1 No evidence cancer = 16 Awaiting results/review = 1 Dx unknown, patient died = 2 Awaiting medical notes = 1	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 87) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.2001 to 10.2002	**Aims:** To identify waiting time for clinic appt **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ GP referrals to be seen =< 14 d. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** No. 2WWR patients dx with cancer	**Sample type** Consecutive series **Sample size:** 23 **Patient population:** 23 2WWR patients with suspected upper GI cancer **Population source:** Case notes	**Data source:** Case notes **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 23/23 (100%) seen =< 14 d **Results relating to conformity of GP referral with guidelines:** Of the 14 patients not diagnosed with cancer: 3 patients were appropriate, with worrying symptoms or requiring further investigation. 11 patients had symptoms appropriate to 2WWR protocols that were inappropriate on investigation. **Other results** 6/20 (30%) dx Ca	**Comments:** Few details of the audit conduct were given, making appraisal difficult. **Dissemination:** Patient letters from consultants to GPs advise when inappropriately referred. GPs reminded about proformas and guidelines (Bulletin, PCG meetings)

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 88) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.1.01 to 28.2.01	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 27 **Patient population:** 27 (14 m) urgent referrals for suspected upper GI cancer in the audit timeframe. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 26/27 (96%) seen =< 14 d 1 seen 15-16 d (clinic cancelled) 23/27 referrals received =< 24 h 1 received > 2 <= 3 d (delayed fax) 1 received > 3 <= 4 d (delayed fax) 1 received > 4 <= 5 d (delayed fax) 1 received > 5 <= 6 d (delayed fax)	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

Results relating to conformity of GP referral with guidelines: 27/27 referrals were appropriate and met guidelines **Other results** 26 fax, 1 post Dx cancer = 7 No evidence cancer = 8 Awaiting further investigation/review = 11 Awaiting medical notes = 1	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 89) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 06.00 to 03.02	**Aims:** $ Does the information given on the referral form follow the guidelines? $ Does the information given on the referral form correspond with the history obtained by the specialist (Upper GI) surgeon? $ How many patients referred by their GPs needed investigating? $ What is the positive predictive value of the referral? (i.e. how many of those referred by this method have malignancy?) $ What was the outcome for those who actually had cancer? (i.e. surgery or palliative care?) **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Not stated **Sample size:** 47 **Patient population:** Not stated **Population source:** Not stated	**Data source:** Case notes. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Unclear **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: 97% of patients were seen within 2 weeks. **Results relating to conformity of GP referral with guidelines:** 78.6% of referrals were appropriate. The authors also report the symptoms with which patients were referred. **Other results** 20.1% confirmed malignancy. 23% of patients underwent operative procedures.	**Comments:** This audit reports relevant data relating to the appropriateness of referrals under the 2WW guideline, the appropriateness of the guideline (i.e. proportion of patients subsequently diagnosed with malignancy) and the proportion of patients seen within 2 weeks. However, many important details are omitted such as details of the population studied, validity of the data source and data collection methods. Therefore, the validity of the audit's findings cannot be verified. Whilst the patient population is not explicitly stated, it appears to be patients referred under the 2WW rule. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 90) **Year:** 2002 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.7.01 to 31.1.02	**Aims:** The aims appear to be to conduct an audit of the referrals under the two-week wait system to the upper gastroenterological and general surgical services. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 61 **Patient population:** All patients referred for suspected upper gastrointestinal cancers under the 2ww system during a seven-month period. 38 patients were referred to the gastroenterological service and 23 patients were referred to the general surgical service. Patients were referred by the following means: Proforma only - 27 (44.3%) Proforma and letter - 7 (11.5%) Proforma and radiological report - 1 (1.6%) Proforma with 2WW header - 1 (1.6%) Letter only - 15 (23.6%) Letter and radiological report - 1 (1.6%) E-mail - 9 (14.8%) **Population source:** The audit identified patients from those whose referrals was sent by e-mail or to a central fax number.	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics were presented.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** No **Appropriateness:** Unclear **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: The median wait from the date of decision to refer to the first appointment was reported for each surgeon. The value for the median wait was 8 days for one general surgeon (range 3 to 21) and 4 days (range 1 to 13) for the other general surgeon. The value for the median wait was 10 days for one gastroenterologist (range 6 to 23) and 11 days (range 9 to 26) for the other gastroenterologist. **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** 7 malignancies were identified from 23 patients referred under the 2ww system to the general surgeons. 6 malignancies were identified	**Comments:** The report on this audit was accompanied by an e-mail which reported that this was a draft copy. The motive, aims or objectives underpinning the audit were not reported. As such it is not possible to assess if the audit aims were met. It is not clear whence data on the clinical outcomes of patients were obtained. As the processes used in the study were not reported, it is not possible to know if the audit was conducted in a robust manner.

from 38 patients referred under the 2ww system to the gastroenterologists.	The median waiting time for all patients was not presented. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 91) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.01.02 to 01.01.03	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 62 **Patient population:** All fast track referrals with a discharge letter. 62 patients (38 women) with a mean age of 69 (range 47 to 87) years were included. 35 GPs made referrals using the urgent form. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** No **Analysis:** No **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Seen within 14 days: 52/62 10 patients not seen within 14 days: 3 on holiday, 1 referred just before Christmas, and 6 seen within 15-16 days. Mean time to 1st appointment: 12.5 (range 1 to 60) days **Results relating to conformity of GP referral with guidelines:** 54/62 patients had suspected upper GI cancer. 8 with non suspected upper GI cancer, referred as urgent by the GP: 4 jaundice, 1 lung	**Comments:** Only printouts of a slide presentation of the audit were available, with limited data on methodology. The aims of the audit were not reported, but it appeared (from the title and introduction slides) that the audit set out to look at compliance of fast track referrals with the DoH guidelines. It also appeared that the audit included patients referred to an open access clinic (evidence base for clinic described in a slide prior to the one describing patient population), but this was not explicitly stated. There were inconsistencies in the figures reported on different slides, and it was therefore unclear whether they referred to the same data. Results relating to symptoms and number of presenting symptoms were also reported. As was the

cancer, 1 recurrence, 1 known ulcer, 1 epigastric mass. **Other results**	outcome of investigations (including %age with: oesophageal cancer, gastric cancer, gastro-oesophageal reflux disease, peptic ulcer, nothing abnormal detected and other), but this was presented in a colour pie chart printed on a black and white printer (we were only given a hard copy) and it was therefore not possible to read the results. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 92) **Year:** **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 9.00 to 3.01	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 62 **Patient population:** 42 casenotes from 62 referrals with suspected Upper GI cancer during the audit timeframe **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** Unclear **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** 26/42 referrals were appropriate **Other results** Dx cancer = 8/42 Other diagnoses = 29 No clear dx = 5	**Comments:** This appears to have been a presentation. No information on the conduct of the audit was given, making appraisal impossible. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment

Audit ID no.:
(WTA 93)
 	
Year:
2001
 	
Institution type:
Teaching hospital
 	
Study type:
clinical audit
 	
Cancer site:
GI Upper
 	
Audit type:
2WWR
 	
Design:
Prospective
 	
Recruitment time frame (follow-up, where reported):
Not stated
	Aims:
	To assess appropriateness of referrals.
	
	Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):
	$ =< 2 w from referral to 1st appointment (DoH)
	$ n with cancer diagnosis
	$ time to diagnosis
	
	Extra outcomes (audit criterion not relating to the 2 week wait policy
	
	Extra outcomes (non-criterion based):
		Sample type
		Consecutive series
		
		Sample size:
		63
		
		Patient population:
		63 patients (26 m) with suspected upper GI cancer
		
		Population source:
		2WWR referrals to Upper GI dept.
			Data source:
			Not stated
			
			How collected:
			Not stated
			
			How validated:
			Not stated
			
			Process of applying audit criteria:
			Not stated
			
			Statistical method (before and after studies only):
			Descriptive statistics
				Involvement:
				Not stated
				Motive:
				Yes
				Project plan:
				No
				Source integrity:
				Not stated
				Appropriateness:
				Yes
				Inclusion criteria:
				Yes
				Source check:
				Not stated
				Tool design:
				Not stated
				Collection validity:
				Not stated
				TF justified:
				Yes
				Process conduct:
				Unclear
				Reporting:
				Unclear
				Analysis:
				Yes
				Attrition:
				Yes
				Re-audit:
				Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 100% (63/63) seen =< 14 d **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** 11% (7/63) with final diagnosis of cancer mean time to diagnosis for the 7 cancer patients = 7 d (2-29 d)	**Comments:** Conference abstract only, therefore difficult to appraise **Dissemination:** Conference proceedings

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 94) **Year:** 2002 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.1.02 to 1.6.02	**Aims:** To evaluate the appropriateness of GP referrals under the 2ww rule using guidelines. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Assess pickup rate if upper GI cancers within the 2 week rule. Criteria: Regional guidelines for referral of Upper GI cancers under the 2 week rule. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 65 **Patient population:** All referrals for suspected Upper GI cancer during a six month period. Only 55 of 65 patients were audited. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics were used.	**Involvement:** Yes **Motive:** No **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Unclear **Attrition:** No **Re-audit:** Unclear

Results	Comments
Results relating to meeting the 2WW criterion: 97% of urgent referrals were seen within 2 weeks. **Results relating to conformity of GP referral with guidelines:** 82% of referrals were appropriate. **Other results** 27% of patients referred had cancer. 22.5% of those who were referred and met the criteria had cancer.	**Comments:** While 65 referrals were made during the referral period, only 55 patients were included in the audit. It is unclear why this was so. Few details of the methods used in this audit were provided. It is unclear from the report why it was conducted. It is also unclear by whom the information was collected and whether this was done prospectively or retrospectively. The report does not state if data were collected into piloted audit forms or if information was obtained from case notes, referral letters or audit proformas. As the methods are so poorly reported, it is not possible to state if they were appropriate to meet the stated aims. While the audit provides information on referrals, no interpretation of the importance or clinical

	relevance of the information presented was given. Plans for further action and re-audit were not reported fully. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 95) **Year:** 2001 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.4.01 to 30.9.01	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 79 **Patient population:** All patients referred urgently during a time period for upper gastrointestinal endoscopy. **Population source:** Patients were identified from referrals.	**Data source:** Information was obtained from referral letters and casenotes. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Data were analysed using descriptive techniques and exploratory data analysis.	**Involvement:** Yes **Motive:** Unclear **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: The mean referral to endoscopy time was 13 days. From a graph, it appears that about 75% of patients were seen within two weeks. All malignancies identified were in patients who had been seen within two weeks. **Results relating to conformity of GP referral with guidelines:** Not reported. **Other results** All but three of 79 referrals used the agreed proforma.	**Comments:** This audit was presented in abstract form and as such the methods used are given only briefly. The audit was conducted by the clinical staff and it is unclear if the audit department of the trust were involved in the audit. The conclusions of the audit include a "theoretical" concern that delays in investigating non-urgent referrals may be introduced but this was not based on the evidence presented. **Dissemination:** Not stated

33% of endoscopies found no abnormality. 3 endoscopies identified cancers.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 96) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.02.03 to 31.03.03.	**Aims:** A case note audit was undertaken to elicit the following: $ Number of appropriate referrals $ Number of inappropriate referrals $ Reasons for inappropriateness $ Outcome **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 81 **Patient population:** All fast track referrals during the study period (n=91), 2 patients died before appointment, 2 cancelled and 2 did not attend. 4 sets of notes were not available. These patients have, therefore, been excluded. 81 case notes reviewed. **Population source:** Not stated	**Data source:** Case notes. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** 48/81 fast track referrals were appropriate. 33/81 fast track referrals were inappropriate. Of the 33 inappropriate referrals, 33 forms incorrectly completed by GP; patients not displaying symptoms as ticked on form. Of the 81 case notes investigated: Consultant ticked box A = 28 Consultant ticked box B = 21	**Comments:** Many important details are omitted such as details of the population source, validity of the data source and data collection methods. Therefore, the validity of the audit's findings cannot be verified. There was no interpretation of the results or conclusions drawn. The result relating to ticking boxes A and B are rendered meaningless, as the authors do not define what this means. **Dissemination:** Not stated

Consultant did not tick a box = 32 **Other results**	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 97) **Year:** 2002 **Institution type:** General hospital **Study type:** research study **Cancer site:** GI Upper **Audit type:** Dx cancer **Design:** Not stated before and after **Recruitment time frame (follow-up, where reported):** 1.11.99 and 30.12.01	**Aims:** To determine the impact of the guidelines on the delays in the diagnosis of upper GI cancers in a specialist oesophago-gastric cancer unit. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Outcome measures relating to the 2WW rule: $ Time between the GP referral and the patient undergoing endoscopy. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** $ Time between the patients initially experiencing symptoms and reporting to their GP. $ Time between the patients presenting to the GP and being referred to a diagnostic service. $ Time between the GP referral and the subsequent reporting of a histological diagnosis.	**Sample type** Unclear **Sample size:** 90 **Patient population:** Patients with oesophago-gastric cancer seen at the oesophago-gastric cancer unit between 1.11.99 and 30.12.01. 46 patients were referred before the introduction of the guidelines at the hospital and 44 after. 65 patients were diagnosed with oesophageal cancer and 25 with gastric cancer. **Population source:** Not stated	**Data source:** Not stated **How collected:** It was not stated how the data were collected, other than all patients underwent standard clinical assessment by the clinical nurse specialist; but the type of data collected were reported. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics. P values were given for comparative data, but the statistical tests used were not reported.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** No **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Seen over 4 weeks, from GP referral to endoscopy: Prior to the introduction of the guidelines at the hospital: 16/46 (35%) After the introduction of the guidelines: 5/44 (11%), p=0.008 Median time between first GP consultation and endoscopy: Prior to the introduction of the guidelines at the hospital: 7.25 weeks After the introduction of the guidelines: 3.0 weeks, p=0.005 **Results relating to conformity of GP referral with guidelines:**	**Comments:** The DoH guidelines for upper GI were introduced in July 2000, but these were not introduced in the hospital location until January 2001. Therefore, although the majority of patients reported here were seen 'before' the introduction of the guidelines at the hospital, it is unclear how many were seen prior to July 2000, but it has been assumed that this would be >50% (one of the review's inclusion criteria was that >50% of patients would need to have been referred after the introduction of the DoH guidelines). The authors do not explicitly report that all patients diagnosed with oesophago-gastric cancer seen at the oesophago-gastric cancer unit during the specified time frame were included, only that a total of 90 were evaluated. The authors also do not report if any patients were excluded, e.g. due to missing data.

Other results Median total delay: Prior to the introduction of the guidelines at the hospital: 25.0 weeks After the introduction of the guidelines: 17.5 weeks, p=0.11	It was not stated how the data were collected and whether this was done retrospectively or not. It was noted that all patients underwent standard clinical assessment, but it was not clear if this was done specifically to collect the study data and whether this was done after histological diagnosis had been confirmed and the patient had received treatment (for which the dates were recorded). The authors report the percentage delays (actual numbers were not given) in diagnosis, in terms of delays between symptoms and presentation, from presentation to referral, and from referral to diagnosis (as well as report an overall median time between onset of symptoms and histological diagnosis of 15.5 weeks), but they do not report what was constituted as a 'delay' for any of these categories. The only target that they report is that the time between referral and endoscopy should not be more than 2 weeks. The authors do not report the number of patients who received an endoscopy within 2 weeks of GP referral, only those seen within 4 weeks. Data on time between onset of symptoms and histological diagnosis, time between patients presenting at GP and referral, and total delay were compared for patients seen before and after the implementation of the guidelines at the Hospital. However, the authors do not report what statistical test they used to analyse the data and only p values are reported. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 98) **Year:** 2003 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 01.05.00 to 31.10.01 (patients outcome data were collected at 6 months after referral)	**Aims:** To audit 2WW referrals **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 100 **Patient population:** 2WW referrals received by the hospital between May 2000 and April 2001. 80 patients were seen in the endoscopy unit and 16 in outpatients. 58 patients were female and 42 were male, the mean age was 67 (range 19 to 90) years. Outcome data were reported to have been missing for 3 patients (1 referral cancelled by GP, 1 patient repeatedly failed to attend, 1 patient refused to attend). (1 patient not accounted for) **Population source:** Not stated	**Data source:** Not stated. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** No **Analysis:** No **Attrition:** No **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** **Other results** 40 patients were given a non-malignant diagnosis 11 patients were diagnosed with upper GI cancer 5 patients had a non-upper GI malignancy (Bronchogenic cancer, Hodgkin's disease, colon cancer, prostate cancer, metastatic spindle-cell cancer).	**Comments:** The audit report was only available as a power point presentation, and important information relating to methodology were missing. No clear aims/objectives were given. Even though patient outcomes were assessed at 6-months after GP referral, it was not stated whether this data were collected retrospectively or prospectively by those undertaking the audit. The diagnosed illness was reported for 56 patients. It was not stated if the remaining 44 patients were found to have no abnormalities or had other diagnosis. The presenting symptoms for upper GI and non-upper GI malignancies were reported, but it was not stated if they were inline with the GP referral symptoms, or the 2WW referral guidelines. The authors report the cancer yield for patients symptoms. It was not

Upper GI cancer yield for specific symptoms: 10/40 (10%) with dysphagia 5/47 (11%) with dyspepsia 6/42 (14%) with weight loss 2/8 (25%) with abdominal mass 4/10 (40%) with jaundice	stated if these data referred to GP referred symptoms or those the patient presented with at their 1st appointment. The total number of patients reported in the summary table presenting the results on upper GI cancer yield for specific symptoms was 189, which means that most patients had more than one symptom. The authors report a provisional audit for 2001-2. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 99) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Upper **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.01.01 to 30.06.02	**Aims:** To assess the effectiveness of the two week referrals for oesophageal and gastric cancer in accordance with new Department of Health (DoH) guidelines. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** To ascertain the waiting time from referral to treatment for oesophageal and gastric cancer. **Extra outcomes (non-criterion based):**	**Sample type** Not stated **Sample size:** 101 **Patient population:** Patients with oesophageal or gastric cancer. Missing casenotes = 5, delay in data collection = 7, number audited = 89. 59 patients had oesophageal cancer and 30 had gastric cancer. 51 patients were male and 38 female. The majority of patients with oesophageal cancer were aged between 60 and 79 years and the majority of patients with gastric cancer were aged between 65 and 84 years. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Unclear **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Waiting times from referral to treatment in days (range) 2 week referrals (n=11) = 12 (3-61) OPD (n=14) = 40 (5-153) Inpatient (n=29) = 1 Open access endoscopy (n=35) = 0 **Results relating to conformity of GP referral with guidelines:** **Other results**	**Comments:** Very few methodological details were given, therefore, the validity of the results of this audit cannot be verified. Other outcomes reported were the symptoms of patients, treatment plan, time from consultation to diagnosis, time from diagnosis to treatment and average survival time for deceased patients. **Dissemination:** Not stated

Referral source: 2 week referral = 11/89 OPD = 14/89 Inpatient = 29/89 Open access endoscopy = 35/89	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 100) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.05.02 to 31.07.02	**Aims:** To show aspects of the 2 week rule that are not otherwise monitored. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 109 **Patient population:** Patients who have been referred by GPs to the hospital trust under the 2 week rule for colorectal cancer (n=109) during a 3 month period. 105 patients were included in the audit, casenotes for the other 4 patients were unavailable. **Population source:** Not stated	**Data source:** The Trust PAS system. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** No **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Unclear **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** 95/105 patients were referred in accordance with the referral criteria (48 x suspected cancer, 47 x dysphagia). For 7 patients there was nothing recorded in the notes. One patient was referred as they were symptomatic and diagnosis was required before treatment and 2 because treatment had been given based on a clinical diagnosis but there was inadequate response after 4 weeks. **Other results** Method of referral (n=105): open access x 97	**Comments:** The authors state that they have analysed patients referred by GPs under the 2 week rule for colorectal cancer. However, the report refers to patients with suspected upper GI cancer and as the same author previously produced a report relating to lower GI cancer, I think that the patient population may have been copied into this report in error (I have stated 'unclear' in the appropriateness column for this reason). For report adequacy, I have stated 'unclear' as the authors' aim was to show aspects of the 2 week rule that are not otherwise monitored, and it is unclear that the outcomes presented in this audit were measured other than as part of the monthly monitoring process.

letter (fax) x 3 letter (posted) x 1 GP admission brought in by ambulance x 1 Nothing in notes x 3 Outcome of referral (n=105): New malignancy = 3 Non-malignant = 101 Outcome not known = 1	Very little methodological information is provided, such as how and by whom the data were collected and whether a validated data collection tool was used, therefore, it is not possible to verify the validity of the results. The authors also fail to pre-specify the audit criteria that they intend to evaluate. **Dissemination:** An email accompanying the audit stated that the audit was presented to GPs and stated the GPs' feedback and recommendations.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 101) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Upper **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.01 to 31.03.02	**Aims:** To ensure that all patients diagnosed with upper GI cancer are treated in accordance with national and locally agreed guidelines. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To identify referral route for upper GI cancer patients $ To determine the timeliness of treatment in relation to diagnosis and referral $ To assess the communication of cancer diagnosis $ To assess the appropriateness of investigations and tests $ To identify whether upper GI cancer patients are treated appropriately and effectively **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 124 **Patient population:** All patients newly diagnosed with oesophagus (n=61), gastric (n=35), or pancreatic (n=28) cancer between 01.04.01 and 31.03.02. 3 patients were excluded as the method of referral was not available in the case notes. **Population source:** Histopathology department, Information Services, and a single hospital (where patients received radiotherapy and chemotherapy treatment).	**Data source:** Case notes **How collected:** Data were collected using the forms designed on the Formic scanning system and additional data collection forms were sent to a single hospital to capture data on radiotherapy and chemotherapy treatment patients received . **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Unclear **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** **Other results** Urgent referral routes (n=101): 47 referred under the 2WW rule (30 oesophagus,14 gastric, 3 pancreatic) 13 via the Jaundice hotline (pancreatic) 12 as urgent (source not given; 7 oesophagus, 4 gastric, 1 pancreatic) 29 were emergency admissions (15 oesophagus, 10 gastric, 4 pancreatic).	**Comments:** The authors also reported results on time from referral to diagnosis, and the number of patients meeting the following criteria/standards: All patients should receive their 1st treatment within 2 months of GP referral All patients should receive a diagnosis within 1 month of 1st treatment Patients should be accompanied when informed of their cancer diagnosis GPs should be informed after a patients is given a diagnosis of cancer by the following day. **Dissemination:** The audit results were to be communicated to the clinical team at the operational meeting for action.

Non-urgent referral routes (n=20): 2 referred as soon (1 oesophagus, 1 pancreatic) 13 as routine (4 oesophagus, 5 gastric, 4 pancreatic) 1 was a private referral (oesophagus) 3 had follow-up appointments for other medical conditions (1 oesophagus, 2 gastric) 1 was transferred from another hospital (pancreatic)	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 102) **Year:** 2002 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 09.01 to 03.02	**Aims:** UGI Standard 2.6/17 states that the MDT should have agreed an Operational Policy to provide information to referring GPs and other PCOs on the appropriateness and timeliness of urgent and suspected cancer GP referrals. In order to achieve this an audit of the appropriateness of these referrals has been undertaken. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To audit the appropriateness of urgent and suspected cancer GP referrals. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 136 **Patient population:** Patients that had a barium swallow via fast track referral between October 2001 and March 2002 (n=36) and patients that had a barium swallow via routine referral between September 2001 and February 2002 (n=100). **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** **Other results** 13/36 fast track referrals had abnormal barium swallow, requiring onward referral for upper gastrointestinal endoscopy. 6 patients were diagnosed with a malignancy, 2 were operable and 4 were inoperable. 10/100 routine referrals had abnormal barium swallow, requiring onward referral for upper gastrointestinal endoscopy. 1 patient had a confirmed malignancy.	**Comments:** The aim of the audit was to assess the appropriateness of urgent and suspected cancer referrals. However, the appropriateness of referrals was not assessed against the guidelines for referring patients, but against the patients' outcome. Therefore, the appropriateness of the guideline was assessed rather than the appropriateness of the referral. Only including patients who had a barium swallow does not provide a sample representative of all urgent and routine GP referrals. Many important details were omitted from the audit report, such as details of the population source, the data source and data collection methods. Therefore, the validity of the audit's findings cannot be verified. There was no interpretation of the results or conclusions drawn.

	Dissemination: Action points were to feed back results of audit to the upper gastrointestinal multidisciplinary team, write operational policy to feed back to GPs and feed back results of the audit to GPs.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 103) **Year:** **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Upper **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.11.2001 to 30.11.2002	**Aims:** To assess how effectively the 2WWR was being implemented. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ Are the appropriate criteria used for referrals? $ What is the detection rate of malignancy? **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** $ Is there much variation between GP referral rates? $ What age group most frequently presents under the 2WWR? $ Do current referral guidelines need to be modified?	**Sample type** Consecutive series **Sample size:** 208 **Patient population:** 157 patients referred by rapid-access proforma and 57 patients diagnosed with cancer. The total number of patients included in the audit was 208. **Population source:** See Data source	**Data source:** Referral documents received in the timeframe; hospital database of all patients presenting with oesophageal, gastric, and pancreatic cancer in the timeframe; telephone interviews with GPs. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics; charts	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Unclear **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 133/157 (85%) seen =< 2 w **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** 6/157 with confirmed malignancy. 10.5% of confirmed upper GI cancers detected via 2WWR No patient with dyspepsia alone was dx with cancer	**Comments:** Few details of the audit conduct were given, making appraisal difficult. No information on the route of referral was given for the 51 of 57 patients diagnosed with cancer who were not referred under the 2wwr. **Dissemination:** Annual Gastroenterology Conference

51 non-2WWR patients dx cancer	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 104) **Year:** N/S* **Institution type:** Teaching hospital **Study type:** research study **Cancer site:** GI Upper **Audit type:** Dx cancer **Design:** Retrospective before and after **Recruitment time frame (follow-up, where reported):** 01.04.99 to 01.07.01	**Aims:** To assess the value of the guidelines (the "2 week wait" referral guidelines for patients with suspected cancer) in reducing the time to diagnosis and starting treatment in oesophago-gastric cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** Times from general practitioner referral to endoscopy, diagnosis (usually date of endoscopy) and treatment; number of patients going on to surgery; survival rate at six months.	**Sample type** Consecutive series **Sample size:** 235 **Patient population:** 109 (46%) patients with oesophago-gastric cancer referred to hospital during the twelve months before the guidelines were introduced (April 1999 - March 2000) and 126 (54%) patients with oesophago-gastric cancer referred to Hospital during the fifteen months after the guidelines were introduced (April 2000 - June 2001). 60/109 pre-guideline referrals were routine (19) or urgent (41), while 52/126 post-guideline referrals were routine (11) or under the 2-week guidelines (41). Other cases (49/109 and 74/126) were diagnosed as a result of emergency admission or inpatient referral. **Population source:** Hospital histopathology database.	**Data source:** Case notes. **How collected:** Data were abstracted onto a custom-designed form, the specific data abstracted were listed. **How validated:** The validity and reliability of data collection does not appear to have been assessed. **Process of applying audit criteria:** Not applicable. **Statistical method (before and after studies only):** Mann-Whitney test, Chi-squared test.	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** Unclear **Reporting:** Yes. **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Number of patients meeting 2-week target is not stated. Median time (days) from date of GP referral to first visit, pre vs post guideline: Urgent: 15 vs 7, $p<0.05$ Routine: 80 vs 44, $p<0.05$ All patients: 26 vs 8, $p<0.001$ Only outpatient referrals were included in the analysis. **Results relating to conformity of GP referral with guidelines:** Not stated	**Comments:** This was a before and after study. The authors do not state whether the custom designed data extraction form was piloted/tested before use. Nor do they state reasons for the urgent referrals not being seen within 2 weeks. The study looked at just those patients who had cancer and did not include data on those patients referred under the 2 week rule who turned out not to have cancer, however they state that 378 patients were referred under the 2 week rule in total during the 15 month 'post guideline' period. **Dissemination:** It is not stated how (or if) the results were communicated to the stakeholders.

Other results Median time (days) from date of GP referral to diagnosis, pre vs post guideline: Urgent: 23 vs 10, p<0.001 Routine: 90 vs 68 not significant All patients: 36 vs 11, p<0.001 Median time (days) from date of GP referral to initial treatment, pre vs post guideline: Urgent: 77 vs 56, p<0.05 Routine: 147 vs 96 not significant All patients: 105 vs 64, p<0.001 Number of patients unsuitable for active treatment with curative intent, pre vs post guideline: Urgent: 23/41 vs 19/41 Routine: 4/19 vs 6/11 All patients: 27/60 (45%) vs 25/52 (48%) 6 month survival, pre vs post guideline: Urgent: 25/41 vs 19/41 Routine: 16/19 vs 9/11 All patients: 41/60 (68%) vs 28/52 (54%) Only outpatient referrals were included in the analysis.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 105) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Upper **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.09.00 to 31.12.01	**Aims:** To audit 2WW referrals for suspected upper gastro intestinal (GI) cancer and to evaluate whether this system identified patients with suspicion of cancer at an early stage of the disease. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 383 **Patient population:** All patients referred through the 2WW referral desk between September 2000 and December 2001 (n=307) and all newly diagnosed patients with upper GI cancer referred through the conventional routes in the same time period (n=76). Conventional routes included referral to a clinic (n=20), A&E department (n=43), or direct admission to the ward (n=13). **Population source:** Not stated	**Data source:** Case notes of all patients with proven upper GI cancer were examined. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Unclear **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Median time to appointment for 2WW referrals (n=307): 12 days. Median time to appointment for non-2WW referrals diagnosed with cancer (n=76): 25 days. **Results relating to conformity of GP referral with guidelines:** **Other results**	**Comments:** The audit was only available as an abstract, and therefore only included limited information on the methodology. The authors do not state if the data were missing for any patients. Staging of the disease was done via various modalities including US, CT scan, laparoscopy, and histopathology (for those that underwent surgery). Data on median time between referral and both diagnosis and treatments were reported for the two referral groups. The total number of conventional (non-2WW) referrals during the same time period was not stated.

29/307 2WW referrals were diagnosed with upper GI cancer. 76 non-2WW referrals were diagnosed with cancer during the same time period. Malignancy stage for 2WW referrals: Early - 7 advanced - 22 Malignancy stage for conventional referrals: Early - 21 advanced - 55	The authors conclude that the 2WW referral system does not result in an improvement in the management of upper GI cancers and does not provide any benefit to diagnose disease at an early stage. The audit design and study size does not back up such broad conclusions. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 106) **Year:** 02* **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.10.00 to 30.9.01 (audited Mar-Apr 2002)	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 547 **Patient population:** Patients referred under the 2WW guidelines during a 1 year period. 271 patients were male and the majority were aged between 50 and 89 years. Referrals were made on a faxed form requiring patient details and a referral code for the Department of Health referral criteria for symptoms (the 6 referral criteria being coded 2A to 2F, with each sub category being numbered separately). **Population source:** Not stated	**Data source:** Faxed referral forms were reviewed and case notes traced to ascertain final diagnosis. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** N/a **Reporting:** Unclear **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** 13/547 patients had no symptom code specified, 375 were referred with one of the listed symptoms, 128 with two symptoms, 29 with three symptoms and 2 with four symptoms. 7 patients referred as dyspepsia age >54 were younger than this age, therefore were inappropriately referred. **Other results** 77/547 patients were diagnosed with cancer, although not all were upper GI cancers. Types of cancer were oesophagus x 30, gastric x 11, pancreas x 6, colorectal x 6, gallbladder x 2, cholangioca x 4, lung x 4, non Hodgkin's lymphoma x 4, hepatocellular x 1, GOJ x 1, renal x	**Comments:** The authors did not report any aims, therefore, it is not possible to state whether adequate data were reported in relation to their aims. Very little methodological information is provided, such as how and by whom the data were collected and whether a validated data collection tool was used, therefore, it is not possible to verify the validity of the results. Data relating to cancer patients who were referred by means other than the 2 week referral system would also have been informative. **Dissemination:**

1, larynx x 1, abdominal x 1 and unknown primary x 5. Patients diagnosed with cancer by symptom group referral (some were referred for more than one symptom): No symptom specified = 1/13 patients had cancer Symptom 2A = 31/224 patients had cancer Symptom 2B = 37/270 patients had cancer Symptom 2C = 20/200 patients had cancer Symptom 2D = 0/6 patients had cancer Symptom 2E = 6/20 patients had cancer Symptom 2F = 13/38 patients had cancer Symptom 2C without 2A, 2B, 2E or 2F = 8/83 patients had cancer The authors report this data for each subcategory of symptom.	Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 107) **Year:** 2003 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** GI Upper **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 1.1.01 to 31.12.01	**Aims:** To evaluate the validity of national referral guidelines and the adherence of GPs to the referral criteria. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** The authors also investigated the resources required by an endoscopy department to provide a 2ww-compliant service and the effect of the system on the stage of the disease at presentation.	**Sample type** Consecutive series **Sample size:** 1330 **Patient population:** All patients referred for endoscopy on special forms via a direct referral system during a one-year period. **Population source:** Referral forms.	**Data source:** Data were obtained from referral letters. **How collected:** Data on the signs and symptoms of patients were entered into a departmental computer system. No information was given on how data on the final diagnosis was obtained. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Data on the appropriateness of referrals was obtained by comparing the reason for referral with the DoH guidelines; a computer algorithm was developed for this purpose. Results were presented using descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Patients referred urgently who were subsequently diagnosed with cancer (n = 26): Mean wait for endoscopy - 7.4 days; range 2 to 12 days. Patients referred non-urgently but whose symptoms fell within the urgent referral criteria (n = 773): Mean wait for endoscopy - 42 days; range 7 to 97 days. **Results relating to conformity of GP referral with guidelines:** Of 344 patients referred urgently by their GPs, 278 were coded as urgent by the hospital system; 66 were coded as non-urgent.	**Comments:** The methods used in conducting the audit were reported only briefly. Therefore, it is not possible to know if the audit was conducted in a robust manner or in a way that was appropriate to the aims of the study. The audit report does not give any information on whether or not there has been any assessment of the validity of the method by which clinicians judged the appropriateness of referrals. **Dissemination:** Not stated

Of 986 patients not referred urgently by their GPs, 733 were coded as urgent by the hospital system; 253 were coded as non-urgent. **Other results** The rates of incidence of cancer were as follows: All patients - 47 of 1,330 (3.5%) Patients coded as urgent by the hospital - 45 of 1011 (4.5%) Patients coded as urgent by their GP - 26 of 344 (7.6%) Patients coded as non-urgent by the hospital - 2 of 319 (0.6%) Patients coded as non-urgent by their GP - 21 of 986 (2.1%)	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 108) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Gynaecological **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.10.00 to 31.12.00	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected gynaecological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 15 **Patient population:** 15 urgent referrals for suspected gynaecological cancer in the audit timeframe. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 15/15 (100%) seen =< 14 d 14/15 referrals received =< 24 h 1 received 4 d (post) **Results relating to conformity of GP referral with guidelines:** 14/15 referrals were appropriate and met guidelines **Other results**	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

13 fax, 2 post Dx cancer = 3 No evidence cancer = 10 Awaiting review/investigation = 2	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 109) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Gynaecological **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.1.01 to 28.2.01	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected gynaecological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 15 **Patient population:** 14 urgent referrals for suspected gynaecological cancer in the audit timeframe. 1 patient excluded: refused OPA, referred back to GP. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 12/14 (86%) seen =< 14 d 2 seen 17-21 d (post to Registration, next available OPA) 12/14 referrals received =< 24 h 1 received > 1 <= 2 d (delayed fax) 1 received > 3 <= 4 d (post) **Results relating to conformity of GP referral with guidelines:** 13/14 referrals were appropriate and met guidelines	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

Other results 13 fax, 1 post Dx cancer = 2 No evidence cancer = 10 Awaiting review/investigation = 2	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 110) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Gynaecological **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** Not stated	**Aims:** To review compliance with the referral documentation guidelines, and the efficiency of the service informing GPs of malignancy. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ 95% urgent cases seen =< 14 d $ 90% clinic letters returned to GP =< 7 d of 1st appointment $ 100% malignancies faxed back to GP =< 24 h of dx **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 35 **Patient population:** 35 gynaecological referrals to 2WW Clinic **Population source:** 2WWR appointments office	**Data source:** 2WWR referrals made by NLPCT practices **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Unclear **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Seen =< 2 w: 34/35 (1 patient did not attend) **Results relating to conformity of GP referral with guidelines:** Met => 1 criteria: 13/31 (42%) (4 cases excluded for further clarification) **Other results** Not reported	**Comments:** Interim report on projected sample of 83. The sample size was 35 (not 92 as stated). Few details of the audit conduct were given, making appraisal difficult. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 111) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Gynaecological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 3.01 to 6.01	**Aims:** $ To ensure appropriateness of 2WWR for suspected gynaecological cancers $ To determine the proportion of referrals from other routes dx with cancer $ To determine whether treatment for patients with gynaecological cancer began appropriately soon. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ All 2WWR patients will be (a) appropriate, (b) seen =< 2 w $ No patient will be referred under 2WWR if unwilling $ All patients will begin treatment =< 1 mon from dx **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 51 **Patient population:** New patients referred to the postmenopausal bleed clinic during Mar to Jun 2001, including 10 2WWR patients. **Population source:** List of urgent gynaecological referrals.	**Data source:** List of urgent gynaecological referrals. Clinical notes. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Case notes were examined by the Audit clerk for compliance with criteria. Those not meeting criteria were peer reviewed by a consultant gynaecologist and the GP representative. **Statistical method (before and after studies only):** Descriptive statistics; bar charts	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Yes **Collection validity:** Not stated **TF justified:** No **Process conduct:** Yes **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 2WWR seen =< 2 w: 8/10 (80%) **Results relating to conformity of GP referral with guidelines:** Met criteria: 9/10 (90%) **Other results** Dx cancer: 2/51 Treatment began < 1 mon: 0/2	**Comments:** The audit appears to have been well-designed, piloted, conducted and reported. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 112) **Year:** 2003 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Gynaecological **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 1.7.2002 to 31.7.2002	**Aims:** To assess compliance with national 2WW standards. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ Urgent referrals should reach hospital within 24 h $ All urgent referrals should be seen within 2 w **Extra outcomes (audit criterion not relating to the 2 week wait policy** None **Extra outcomes (non-criterion based):** None	**Sample type** Consecutive series **Sample size:** 52 **Patient population:** 52 women referred to two hospitals (A and B) with suspected gynaecological cancers (suspected cancer sites shown as bar graphs only). **Population source:** All urgent referrals in the calendar month of July.	**Data source:** Referral letters **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Graphic display (bar charts); summary table	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** No **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Unclear **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** No **Attrition:** No **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Urgent referrals received < 24 h: A = 65.71%, B = 35.29% Urgent referrals seen =< 2 w: A = 68.57%, B = 41.18% Fax referrals seen =< 2 w: A = 75%, B = 50% Letter referrals seen =< 2 w: A = 42.86%, B = 36.36% **Results relating to conformity of GP referral with guidelines:** Not reported **Other results**	**Comments:** Presentation slides only, so lacks detail of conduct. Results were broken down by hospital, without overall figures. **Dissemination:** Recommendations were given in a presentation, and fed back to PCTs.

Not reported	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 113) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Gynaecological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.11.01 to 30.4.02	**Aims:** Not Stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 54 **Patient population:** Patients identified referred under the 2ww rule during a six month period. **Population source:** Patients were identified from a list of 2ww referrals.	**Data source:** Data were obtained from patients' case notes. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics were presented.	**Involvement:** Unclear **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 40 of 43 (93%) patients were seen within two weeks. One patient experienced delays owing to problems with appointments over the Christmas period. One patient was scheduled for an appointment during the two weeks allowed but this did not arrive by post until after the appointment. In the case of the final patient, it was unclear why the patient was not seen in time. **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** 37 of 43 (86%) referrals were received within 24 hours.	**Comments:** This audit was reported as a very brief summary only. 11 of 54 patients' notes were not traced and so not included in the audit. It is not clear why this audit was conducted or what its aims were. The methods used are extremely poorly reported and it is not possible to know who contributed to its conduct. He auditors report that information was obtained from casenotes. However, information on the interval between the GP deciding to refer and the referral reaching the hospital would probably not have been available from this source. The criteria used appear to be the DoH criteria but this can not be certain. No conclusions were drawn from the study and it is not clear if the findings were feed back to interested parties or if there have been plans for improving the service arising from the audit. The audit was reported very briefly, making a full appraisal difficult.

	Dissemination: Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 114) **Year:** 2004 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Gynaecological **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.8.01 to 31.8.02	**Aims:** To evaluate the time from referral to operation, completion of investigations, and adequate follow up in relation to targets laid out in the Cancer Plan, 2000. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To comply with the Cancer Plan requirements. $ To examine the current involvement in a specified trial. $ To identify the results of the endometrial cancer pathway audit in relation to the Cancer Plan. $ To identify implications for clinical practice Standards: All patients were to meet the following standards - Time from referral to hospital appointment - 14 days Time from referral to treatment - 62 days Time from referral to diagnosis - 31 days Time from diagnosis to treatment - 31 days **Extra outcomes (audit criterion not relating to the 2 week wait policy** The time from referral to treatment. The time from referral to histological diagnosis. The time from treatment to follow up. **Extra outcomes (non-criterion based):** The source of referral. The doctor to whom the patient was referred. The proportion of patients who had a biopsy. The setting in which biopsies were performed. Proportion of patients who were approached about a specified trial. The proportion of patients approached who participated in the trial. The proportion of patients who underwent transvaginal ultrasonography. The proportion of patients about whom a pre- or post-therapy discussion at the MDT was recorded. The proportion of patients who had surgery. The location where the surgery was performed.	**Sample type** Consecutive series **Sample size:** 54 **Patient population:** 64 patients diagnosed with endometrial cancer. 10 patients were excluded (reasons not stated). **Population source:** Patients were identified via clinic lists, MDT data, data from a specified trial and pathology lists.	**Data source:** Data were obtained from case notes. **How collected:** Data were collected using a predesigned proforma. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Data were analysed using descriptive statistics.	**Involvement:** Unclear **Motive:** Unclear **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

	The histological diagnoses and grade of patients. The proportion of patients having radiotherapy. The proportion of patients who died. The stage at death of patients who died.			

Results	Comments
Results relating to meeting the 2WW criterion: 12 of 19 (63%) patients referred under the 2ww rule were seen within 14 days. **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** 34% of patients were referred under the 2ww rule. 35% of patients were referred as "urgent" cases. 16% of patients were referred as "routine" cases. 2% of patients were referred as "soon" cases. The urgency of 13% of referrals was not recorded. 19 of 54 (35%) patients were seen within 14 days. 9 of 54 (17%) patients were seen between 15 and 28 days after referral. 10 of 54 (19%) patients were seen between 29 and 42 days after referral. 10 of 54 (19%) patients were seen 43 or more days after referral. The interval between referral and the consultation of 6 patients (11%) was not recorded.	**Comments:** This audit gave few details about its methods and as such it is not possible to comment on their appropriateness. The report submitted for this review was a PowerPoint presentation and it appears that some of the information which is recorded here as having not been reported may have been given in the accompanying oral presentation. However, the submission included some unclear and contradictory information. The audit appears to have been unfocused and it is unclear what the auditors intended to do with the results once they were collated. No interpretation of their findings is presented. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 115) **Year:** 2002 **Institution type:** Not stated **Study type:** clinical audit **Cancer site:** Gynaecological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.02.02 to 31.04.02	**Aims:** To assess compliance with national standards. To assess whether the referrals are appropriate or not. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Standards: 100% of urgent referrals for suspected cancers should be seen within two weeks of referral by GP. Urgent referrals should reach hospital within 24 hours. **Extra outcomes (audit criterion not relating to the 2 week wait policy** Time interval between clinic appointment and treatment should be 4 weeks. **Extra outcomes (non-criterion based):**	**Sample type** Not stated **Sample size:** 77 **Patient population:** Not stated **Population source:** Not stated	**Data source:** Referral letters and case notes. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Unclear **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 100% of urgent referrals reached the hospital within 24 hours. 100% achieved the 2 week target. **Results relating to conformity of GP referral with guidelines:** 71% referrals were appropriate. 29% were not appropriate. **Other results** Outcomes were 25% cancer, 75% non-cancer.	**Comments:** The audit report was presented as a Powerpoint presentation, therefore, minimal information was provided. Many important details were omitted such as details of the population, validity of the data sources and data collection methods. Some abbreviations were used in graphs that were not explained and some charts presented data only as percentages so it was not possible to assess attrition or whether the data were analysed appropriately. The summary contains data that were not presented elsewhere, such as the percentage of referrals meeting the 2 week target. The data presented were inadequate to verify the validity of the findings. **Dissemination:**

	Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 116) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Gynaecological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.7.01 to 31.6.02	**Aims:** The aims appear to be to conduct an audit of the referrals under the two-week wait system to the gynaecological service. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 137 **Patient population:** All patients referred with suspected gynaecological cancers under the 2wwr. 137 referrals were received but only 108 were included in the audit. **Population source:** Not stated	**Data source:** Data were extracted from referral letters and case notes. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics were presented.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: The median time which patients waited from the date of decision to refer to the first appointment was reported individually for each surgeon. This value ranged from a median wait of 7 days to 11.5 days; the minimum wait was 2 days and the maximum wait was 23 days. **Results relating to conformity of GP referral with guidelines:** Of 110 referrals, just under a quarter showed no clinical abnormality (actual figures not stated). The method of referral (letter, proforma or e-mail) did not appear to influence the appropriateness of referrals. **Other results** 14 cancers were diagnosed. Of these, 8 were new and one was recurrent.	**Comments:** It is not clear from the report why only 108 of 137 patients were included in the audit or why for some outcomes, data were presented on 110 patients. It is not clear whence data on the clinical outcomes of patients were obtained. As the processes used in the study were not reported, it is not possible to know if the audit was conducted in a robust manner. The motive, aims or objectives underpinning the audit were not reported. As such it is not possible to assess if the audit aims were met. The median waiting time for all patients was not presented.

	Dissemination: Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 117) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Gynaecological **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 14.5.01 to 9.8.01	**Aims:** To comply with the National cancer services Standards which require trusts to audit the 'appropriateness' of GP referrals against agreed referral guidelines. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To determine what proportion of referrals would have meet the criteria for a suspected gynaecological cancer but were not sent as such. $ To establish the types of referrals which are being sent as "suspected cancers", what proportion of diagnosed cancers are captured by this prioritisation method and whether future changes are needed to the referral proforma. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 146 **Patient population:** The audit contained two related samples (referred during the audit period). Sample A contained all patients who were categorised by their hospital consultant as "urgent", but were not referred as suspicious of cancer by their GP (n = 123). Sample B included 23 patients who were referred with suspected cancer. **Population source:** Not stated	**Data source:** Data were recorded on a proforma, which was designed in line with national recommendations. **How collected:** Proformas were attached to all case notes by the cancer services staff before the clinic. They were completed by consultants before the first appointment. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Stratified descriptive statistics were reported. Stratification was by the time to appointment and by age of patient.	**Involvement:** No **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Yes **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Of the 93 patients whom the consultant agreed should have been referred urgently:- 10 (10.8%) were given an appointment within 14 days. 26 (28%) were given an appointment within 21 days. 38 (40.9%) were given an appointment within 28 days. 8 (8.6%) were given an appointment within 35 days. 7 (7.5%) were given an appointment within 42 days. 2 (2.2%) were given an appointment within 49 days. 1 (1.1%) was given an appointment within 56 days. 1 (1.1%) was given an appointment more than 56 days after referral.	**Comments:** It is not clear from the report if clinical staff were involved in planning the audit or analysing its results. A total of 24 gynaecological cancers were diagnosed during the audit timeframe. These included 22 primary and 2 secondary cancers. Data on the route of referral were unavailable for seven patients, including both the non-gynaecological cancer patients. Three of the remaining 17 had been referred with suspected cancer (included in sample B). All were seen within 2 weeks of referral. 5 patients were referred urgently (included in sample A) and 4 of these were seen within 2 weeks.

Of the 23 patients referred who were suspected of having cancer: 16 (69.6%) were given an appointment within 14 days. 6 (26.1%) were given an appointment within 21 days. 1 (4.3%) was given an appointment within 28 days. None was given an appointment more than 28 days after referral. **Results relating to conformity of GP referral with guidelines:** Not reported. **Other results**	**Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 118) **Year:** 2003 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** Gynaecological **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.1.1 to 31.10.01	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 162 **Patient population:** All histologically confirmed gynaecological cancer patients (n=54) and all gynaecological 2WW referrals (n=121). **Population source:** The list of confirmed cancers were obtained from the pathology's IT manager, and the list of patients referred via the 2WW rule were obtained from the Cancer Co-ordinator.	**Data source:** Data on cancer diagnosis was obtained from the histopathology database and 2WW referral status form the 2WW rule database. **How collected:** The list of gynaecological cancers obtained from the histopathology database and the list of 2WW rule referrals obtained form the 2WW rule database were ordered alphabetically and compared using a spilt window. Each name in the 2WW rule database was cross-checked to see if was also reported in the histopathology database, and each name in the histopathology database was cross-checked against the 2WW rule database. **How validated:** **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics (including graphs).	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** No **Appropriateness:** Unclear **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** **Other results** 13/121 patients on 2WW rule database went on to have a histologically confirmed cancer. 41/54 patients on the histological database were not referred via the 2WW rule.	**Comments:** The audit report was only available as a power point presentation, and therefore only limited information on methodology was provided. Information on who was involved in the audit reported here is based on information given on the covering slide introducing the presenters. The aims and objectives of the audit are not given, and it is therefore not possible to assess the appropriateness of the study population. The authors do not report checking the accuracy of the data provided on the two databases and therefore the accuracy of the results as well as the inclusion of all relevant patients can not be assured.

	Dissemination: Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 119) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Gynaecological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.1.01 to 30.11.02	**Aims:** To assess the appropriateness of referrals made under the DoH 2ww system. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The audit sought to assess the proportion of patients who had the following symptoms derived from the DoH referral document: Post menopausal bleeding on HRT, Post menopausal bleeding under 55 years of age, Single light postmenopausal bleeding, smear abnormality, intra-menstrual bleeding, menorrhagia or fibroids. An arbitrary standard of 95% of referrals being inline with guidelines was established. In addition, the predictive value of the guidelines for a diagnosis of cancer was to be calculated. **Extra outcomes (audit criterion not relating to the 2 week wait policy** None stated **Extra outcomes (non-criterion based):** None stated	**Sample type** Consecutive series **Sample size:** 261 **Patient population:** All patients referred under the 2ww system to a gynaecologist at one hospital during the time period of interest. 261 patients were referred under the two week wait system. **Population source:** Not stated	**Data source:** Referral letters were assessed for appropriateness. Diagnoses were confirmed using an annual list of all patients with a histological confirmation of malignancy. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics were provided. Referrals were categorised into two groups: one group consisted of all referrals which were met the referral criteria and the second group consisted of those which did not meet the criteria. Cases where it was not clear were allocated to the group which did not meet the criteria owing to the ambiguous nature of the referral.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** 155 of 261 referrals were judged to be appropriate. 106 of 261 referrals were judged to be inappropriate. The rate of appropriate and inappropriate referrals was similar in 2001 and 2002. **Other results** 27 cancers were diagnosed in this group of patients. The overall pick-up rate was 10.3%. 23 cancers were diagnosed in the 155 patients whose referrals were deemed appropriate. This compared with 4 cancers in the 106 patients whose referrals were deemed inappropriate.	**Comments:** This criterion based audit examined an element of the 2ww system but used an arbitrary standard of 95%. Although a rationale for this standard was given, further explanation would have been beneficial. The process of the audit was reported poorly. Demographic data are not presented. It is not clear how, or by whom, decisions were made about whether referrals met the agreed criteria. Further information would have been useful, both in relation to the process and findings of the audit. In particular, the referral guidelines allowed for referral based on a number of criteria. It would have

	been useful to see if certain of those criteria gave rise to more inappropriate referrals than others. The report does not outline the role of the extended clinical team in conducting the audit. It is not clear if the audit department of the trust was involved with the audit. Results of the audit were presented separately for 2001 and 2002 but overall results are presented here. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 120) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Gynaecological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.1.1 to 31.12.02	**Aims:** To assess compliance with the referral gynaecological 2WW rule guidelines and to determine the rate of cancer diagnosis in patients referred via the 2WW rule. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The audit evaluates compliance with the referral symptoms listed in the guidelines **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 273 **Patient population:** All 2WW referrals received in 2001 (n=120) and 2002 (n=153). There were 173 referrals with suspected endometrial cancer, 53 ovarian, 35 cervical, 11 vulva and 1 vaginal. **Population source:** Not stated	**Data source:** Referral letters and the departmental cancer registry. **How collected:** Referral letters were analysed to assess compliance with the guidelines and final cancer diagnosis was verified using the departmental cancer registry. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** Unclear **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** No. of referrals meeting referral criteria (symptoms): 74/173 endometrial, 43/53 ovarian, 35/35 cervical, 9/9 vulva, and 1/1 vaginal (2001 - 67/120; 2002 - 95/153) **Other results** No. of 2WW referrals diagnosed with cancer: 2001 -7 endometrial, 5 ovarian, 1 cervical and 2 other	**Comments:** The audit report was only available as a power point presentation, and therefore only limited information on methodology was provided. It was not stated how many were involved in the process of assessing the compliance of referrals with the guidelines, or whether these decisions were checked for accuracy. It was not stated if there were any exclusions, e.g. owing to missing letters, and the total number of eligible patients were also not stated; only the number included in the audit. Although an agreed action plan was not reported, the recommendations were summarised in the final

2002 - 8 endometrial, 6 ovarian, 4 cervical, 2 vulva, 1 vaginal and 1 other Total number of gynaecological cancers during 2001 and 2002 was 128 (43 and 85 respectively): 36 endometrial, 51 ovarian, 12 cervical, 15 vulva, 4 vaginal, and 10 other No. of 2WW referrals that did not meet criteria diagnosed with cancer: 2001 - 2/53 2002 - 1/58	slide. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 121) **Year:** **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Gynaecological **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.10.01 to 1.10.02	**Aims:** Not reported **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Criteria Department of Health criteria/standards were used. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 291 **Patient population:** All patients referred under the 2ww rule to the gynaecological department. **Population source:** Not stated	**Data source:** Not stated **How collected:** Data were collected using a proforma and entered onto a computerised database. **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics were provided.	**Involvement:** Yes **Motive:** No **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Yes **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 221 of 291 (89.5%) patients were given an appointment within 2 weeks. **Results relating to conformity of GP referral with guidelines:** 224 of 291 (80.6%) of patients were referred appropriately. **Other results** 38 of 291 (13.7%) patients were found to have cancer.	**Comments:** The audit included 291 patients but these come from a total population of 367 patients. The auditor did not include an explanation as to why the remaining patients were not included or a listing of the criteria by which inclusion and exclusion decisions were made. The auditor reported the proportion of patients who were given an appointment within 2 weeks but not the number who were seen within two weeks. While the former may serve as a proxy for the latter, the 2ww rule specifies that only patients who attended their appointments may count as having meet the criterion. Some of the key methodological issues were not addressed in the report and the audit did not result in a full action plan. **Dissemination:**

	Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment

Audit ID no.:
(WTA 122)
 	
Year:
2002
 	
Institution type:
General hospital
 	
Study type:
clinical audit
 	
Cancer site:
Gynaecological
 	
Audit type:
2WWR
 	
Design:
Retrospective
 	
Recruitment time frame (follow-up, where reported):
01.08.01 to 31.07.02
	Aims:
	
	Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):
	$ To assess the effectiveness of Rapid Access referrals;
	$ to assess the no. of gynae cancer patients and their journey through the hospital;
	$ to ensure the unit is maintaining the criteria set by the National Guidelines;
	$ to improve the patient's journey through the hospital if indicated;
	$ to find out the incidence to genital tract cancer in patients on HRT who presented with unscheduled/irregular vaginal bleeding.
	
	Extra outcomes (audit criterion not relating to the 2 week wait policy
	
	Extra outcomes (non-criterion based):
		Sample type
		Unclear
		
		Sample size:
		578
		
		Patient population:
		563/578 patients were Rapid Access referrals, of which 251 were referred by their GP and 312 by the consultant, colposcopy or other.
		
		Population source:
		Not stated
			Data source:
			Case notes.
			
			How collected:
			Formic data capture form was used to collect the data and after the data was scanned on to the Formic database it was exported into Access and the results analyses using Excel.
			
			How validated:
			Not applicable
			
			Process of applying audit criteria:
			Not stated
			
			Statistical method (before and after studies only):
			Descriptive statistics.
				Involvement:
				Yes
				Motive:
				No
				Project plan:
				No
				Source integrity:
				Not stated
				Appropriateness:
				Unclear
				Inclusion criteria:
				No
				Source check:
				Not stated
				Tool design:
				Not stated
				Collection validity:
				Not stated
				TF justified:
				No
				Process conduct:
				Not stated
				Reporting:
				No
				Analysis:
				Yes
				Attrition:
				Unclear
				Re-audit:
				Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Appointment within 14 days of referral: 227/251 (1 not recorded) For patients who DNA, another appointment sent within 14 days: 17/20 GP referral received within 24 hours of decision to refer: 224/251 (not known for 2) **Results relating to conformity of GP referral with guidelines:**	**Comments:** This was a poorly reported audit in that very little data on the methodology was given. The patient population of interest was not described other than no. of included patients and time period. It was not stated what was considered as a Rapid Access referral for the audit. Although one of the stated objectives was to ensure the unit met the criteria set by the National Guidelines, the actual criteria that were to be examined in the audit were not pre-specified in the methods section. **Dissemination:**

Other results Patient's results indicative of cancer: 36/251	Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 123) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Gynaecological (ovarian) **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.01 to 31.03.02	**Aims:** To compare the standard of care in the management of ovarian cancer at the hospital with the regional and national agreed standards. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To ascertain the time interval between referral, first consultation and management. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Not stated **Sample size:** 44 **Patient population:** The patient population was not described, but appears to have been patients with ovarian cancer. The authors report that 44 casenotes were identified for the study, 31 were analysed. One patient was aged below 25 years and one was aged over 86 years, but all the others fell within the age range 46 to 85, with the vast majority being aged between 56 and 85. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** No **Attrition:** No **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Was the patient seen within 2 weeks: Yes = 9 No = 2 (non-urgent referrals) Emergency referral = 20 Average time from referral to OPD appointment was 17 days. **Results relating to conformity of GP referral with guidelines:**	**Comments:** Very few methodological details were given, including details of the patient population, although this appears to have been patients with ovarian cancer. Therefore, the validity of the results of this audit cannot be verified. In the aims of the audit, the authors do not pre-specify the guidelines/criteria they audit, other than two RCOG Clinical Standards (2002): investigation at the first appointment should include CA125, U/S scan and/or CT scan with the results available within 10 days; decision to operate to operation time should be less than 14 days. Therefore, the report adequacy is categorised as 'no'.

Other results Symptoms of referral: Abdominal pain = 25 patients Bowel symptoms = 13 patients Ado/pelvic mass = 17 patients Irregular bleeding = 3 patients Bladder symptoms = 2 patients Weight loss = 7 patients FIGO stage: IC = 4 patients IIC = 1 patients IIIC = 7 patients III = 6 patients IIIB = 1 patients IV = 3 patients Not documented = 9 patients Patient status: Alive/no recurrence = 7 patients Alive with disease = 4 patients Dead (complications) = 20 patients	The calculation of the percentage of patients where operation was performed in less than 50 days is inaccurately reported as 89%, rather than 90%, therefore, analysis is categorised as 'no'. It is not possible to state whether the interpretation of results is fair as the conclusions include data that is not presented in the results. The authors do not state how many of the referrals seen within 2 weeks were 2ww referrals, some were referred from other specialties. Other outcomes presented were whether there was a family history of cancer, whether tumour markers were performed, type of primary treatment, number of days from referral to surgery, whether the patient was referred to a medical oncologist, number of weeks before review with medical oncologist, chemotherapy regimes, whether the patient was referred to a nurse specialist. Whilst no specific action plan was reported, recommendations were given. **Dissemination:**

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 124) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Haematological **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.10.00 to 31.5.01	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 8 **Patient population:** 8 (6 m) urgent referrals for suspected haematological cancer in the audit timeframe. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 8/8 (100%) seen =< 14 d 7/8 referrals received =< 24 h 1 received > 4 d (post) **Results relating to conformity of GP referral with guidelines:** 8/8 referrals were appropriate and met guidelines **Other results**	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

7 fax, 1 post Dx cancer = 4 No evidence cancer = 2 Awaiting further investigation = 1 Awaiting receipt of medical notes = 1	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 125) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Haematological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.02 to 21.12.02.	**Aims:** A case note audit was undertaken to elicit the following: $ Number of appropriate referrals (within the criteria) $ Number of inappropriate referrals (without the criteria) $ Reasons for inappropriateness $ Number of actual cancers detected **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 27 **Patient population:** All fast track referrals during the study period (n=27). **Population source:** Not stated	**Data source:** Case notes. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** 20/27 fast track referrals were appropriate. 6/27 fast track referrals were inappropriate. For 1 patient, there was no fast track referral in the case notes. Of the 6 inappropriate fast track referral forms, 2 patients' fast track referral forms were inappropriately completed, but GPs comments indicated that urgent review was necessary as patients were showing high levels of proteins (no tick box on form for this symptom). 4 forms inappropriately completed (no boxes or not enough boxes ticked to meet criteria).	**Comments:** This audit reports relevant data relating to the appropriateness of referrals under the 2WW guideline and the appropriateness of the guideline (i.e. proportion of patients subsequently diagnosed with cancer). However, many important details are omitted such as details of the population source, validity of the data source and data collection methods. Therefore, the validity of the audit's findings cannot be verified. There was no interpretation of the results or conclusions drawn. **Dissemination:** Not stated

The A/B boxes on all forms were not ticked. **Other results** 5/20 appropriate referrals were diagnosed with cancer. 15/20 appropriate referrals were not diagnosed with cancer.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 126) **Year:** 02* **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Haematological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.00 to 30.09.02	**Aims:** To assess compliance with the NHS standard for patients with possible haematological malignancy to be seen within 2 weeks. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To assess waiting times for appointments. $ To assess adherence to the criteria on the fast track referral form. $ To examine the proportion of patients actually diagnosed with a malignancy. $ To consider whether changes should be made to the referral criteria and feed back the information to the GPs via the Cancer Project Office. The audit criteria (standards) evaluated in the audit were: $ The first appointment offered will be < 14 days form receipt of referral in Cancer Project office (100%; patient choice was considered an exception) $ Presenting symptoms and signs will meet the criteria for referral on the fast-track forms (100%) **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 73 **Patient population:** All patients referred through the Cancer Project Office between April 2000 and September 2002. 58 patients were referred to the haematology unit during this time period (20 in 2000, 13 in 2001, and 25 in 2002). 24 patients were referred with lymphadenopathy; 21 with a blood count suggestive of leukaemia; 7 with bone pain with anemia, + high ESR/plasma viscosity; 7 with at least 3 of the listed symptoms; 4 with hepatosplenomegaly; and 3 with bone x-ray suggesting myeloma. **Population source:** Project office database	**Data source:** Case notes **How collected:** Data were collected using an audit proforma and analysed using MS Excel. The type of data that was collected was listed. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics (including graphs).	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: 47 patients were seen within 14 days Length of delay to 1st appointment (n=8): 2000 (n=5) median 26, range 15 to 28 days 2001 (n=2) range 23 to 30 days 2002 (n=1) 16 days **Results relating to conformity of GP referral with guidelines:** 15/58 referrals were inappropriate	**Comments:** The audit was reported in two power point presentations, and therefore only limited information on methodology was provided. Because the information was only presented in abbreviated form, the data was sometimes difficult to interpret, especially in terms of no. of patients being referred to by summary statements and type of diagnosis. It is assumed that some patients were referred according to more than one referral criteria. Only patients referred to the unit were included in the analyses (n=58) and only 55 were included in the analysis of seen within 14 days (reasons for exclusions were not reported). It was not stated how and who assessed the appropriateness of referrals according to the guidelines.

Other results 7/24 patients referred with lymphadenopathy were inappropriate. 2/4 patients referred with hepatosplenomegaly were inappropriate. 0/7 patients referred with bone pain and anemia + high ESR/plasma viscosity were inappropriate. 29/58 referrals had a malignancy: 26 haematological, 3 other. 3/8 patients seen after 14 days had a diagnosis of cancer. 9/24 patients referred with lymphadenopathy had a malignancy (2 patients had another type of cancer). 10/21 patients referred with a blood count suggestive of leukaemia had a malignancy. 2/7 patients were referred with bone pain and anemia + high ESR/plasma viscosity had a malignancy. 0/7 patients referred with at least 3 of the listed symptoms had a malignancy. 2/4 patients were referred with hepatosplenomegaly had a malignancy. ??0/3 patients referred with bone x-ray suggesting myeloma had a malignancy.	**Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 127) **Year:** 2002 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Haematological (excl. CLL) **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.07.01 to 31.12.01	**Aims:** To provide a baseline to inform what type of service suspected cancer patients referred by letter receive, and to monitor the feedback provided to GPs. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To evaluate outcomes in terms of confirmed cancers. $ To calculate how many referrals received within 24 hours. $ To calculate average wait from decision to refer to 1st appointment. $ To assess feedback given to GPs regarding inappropriate use of letters for suspected cancer patients. $ To assess the coding of these referrals as suspected cancer patients. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 21 **Patient population:** New patients referred by the GP via letter, with symptoms suggestive of cancer (as assessed by the consultant haematologist) and who have been given a 1st appointment between 1.7.01 and 31.12.01 inclusive. Patients referred via letter that was marked 'urgent' and 'cancer' or mentioned 'treat under 2WW standard' were excluded, as were patients with Chronic Lymphocytic Leukaemia. **Population source:** GP referrals were photocopied by booking clerks at Medical Records. Database query used to develop list of all new GP referred patients with an appointment between 1.7.01 and 31.12.01, to ensure no items were missed. Case notes used to obtain copies of referral letter of those not photocopied by Medical Records. Case notes were missing for 2 patients, but pathology and histopathology systems did not show patients as being diagnosed or suspected of having cancer.	**Data source:** Not stated **How collected:** The following data were collected on an Access database: date GP decided to refer, date referral received by trust, 1st appointment date and final diagnosis. **How validated:** Not stated **Process of applying audit criteria:** The consultant haematologist reviewed each GP referral to highlight patients with symptoms suggestive of malignancy and therefore should have had a faxed Proforma referral. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Yes **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** No **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: No. seen within 14 days (n=18 (1 failed to attend and 2 (with cancer) were inpatients): 6/18 (including 2 with cancer). Mean time (days) to 1st appointment (n=18): 23.61 (range 7 to 74). **Results relating to conformity of GP referral with guidelines:** Not reported	**Comments:** Another audit from this department is also included in this review.(WTA 128) 294 patients were referred to Haematology by the GP during the audit time frame. The audit only included patients that were not referred under the 2WW rule (but should have been). 2 patients (seen within 14 days) diagnosed with cancer were referred via letter that specified the need for urgent appointment, but although one highlighted suspected malignancy, neither directly specified cancer.

Other results Diagnosed with cancer: 4/21 (including 2 inpatients; 5/21 still under review at time of audit, but not suspected of having cancer). Mean time (days) between decision to refer and referral date (n=21): 5 (range 1 to 14) No. referred within 24 hours: 5 (3 letters faxed) Instances of communication back to GP re using fax proforma: none	It was not stated how the data on outcomes (reported on the Access database) were collected or by whom. It was also not stated if the data were checked for accuracy. Based on their objectives, the audit has been categorised as a criterion-based audit, but the authors do not pre-specify each criterion used to assess their objectives. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 128) **Year:** **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Haematological (excl. leukaemia) **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.07.01 and 30.04.02	**Aims:** To assess whether both the Haematology Directorate and GPs are complying with the guidelines/recommendations and, to ensure that systems are in place to allow cancer patients to be seen and treated as quickly as possible. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To evaluate no. of confirmed cancers from GP urgent referrals. $ To assess Trust adherence to guidelines by: - calculating average wait between decision to refer and 1st appointment; - monitoring whether urgent referrals are seen by specialist; - assessing feedback given to GPs on inappropriate referrals. $ To assess GP adherence to guidelines by: - calculating how many referrals received within 24 hours of decision to refer; - assessing appropriateness of GP urgent suspected cancer referrals. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 29 **Patient population:** New patients referred as urgent by the GP, using a Proforma (or letter clearly stating urgent & cancer or two-week rule), with suspected cancer, and who have been given a 1st appointment between 01.07.01 and 30.04.02 inclusive. **Population source:** Proformas/letters processed at Medical Records and flagged as urgent referrals to haematology ('HAE') were photocopied. Database query used to develop a complete list of all referrals flagged as 'HAE' with an appointment between 01.07.01 and 30.04.02 (to ensure no items were missed). Case notes used to obtain referral Proforma/letter for those not photocopied by Medical Records.	**Data source:** Details of GP referral (for assessment of appropriateness) were obtained from the referral proformas themselves. It was not stated what source was used to collect data on patient diagnosis and appointment times. **How collected:** The following data were collected on an Access database: date GP decided to refer, date referral received by trust, 1st appointment date, appropriateness of referral (in accordance to the guidelines as assessed by the consultant haematologist) and final diagnosis. **How validated:** Not stated **Process of applying audit criteria:** The consultant haematologist assessed whether the patient symptoms specified in GP referral proformas were in accordance with the guidelines. The process used to assess other outcomes was not reported. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Yes **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Unclear **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: No. of patients seen within 14 days: 27/29 Mean time (days) to 1st appointment : 8 (range 1 to 35). Reason for delays: GP delay in referring (n=1; seen within 9 days of receipt) administrative error (n=1) **Results relating to conformity of GP referral with guidelines:**	**Comments:** Another audit from this department is also included in this review.(WTA 127) Based on their objectives, it is assumed that this was a criterion-based audit, but the authors do not pre-specify each criterion used to assess their objectives. **Dissemination:** Not stated

Proforma referrals deemed appropriate: 23/29 (2 failed to specify suspected malignancy, 4 failed to specify 3 or more symptoms and clinical examination detail). None diagnosed with cancer. **Other results** Diagnosed with cancer: 9/29 (8 haematological and 1 squamous cell carcinoma). 7/29 still under review at time of audit, but not suspected of having cancer. All 29 patients were seen by a specialist for 1st appointment. Instances of inappropriate referral communicated to GP: 2/6	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 129) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Head & Neck **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.10.00 to 30.11.00	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 12 **Patient population:** 12 (6 m) urgent referrals for suspected Head & Neck cancer in the audit timeframe. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 12/12 (100%) seen =< 14 d 8/12 referrals received =< 24 h 2 received > 1 <= 2 d (delayed fax) 2 received > 4 <= 5 d (delayed fax) 1 received = 8 d (post to Registration) **Results relating to conformity of GP referral with guidelines:** 12/12 referrals were appropriate and met guidelines	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

Other results 10 fax, 2 post Dx cancer = 1 No evidence cancer = 9 Awaiting surgery/ investigation = 2	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 130) **Year:** **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Head & Neck **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.6.02 to 30.9.02	**Aims:** $ To check compliance with 2WW after receipt of referral letter $ Is the referral system used as intended by GMPs and GDPs? **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** **Sample size:** 28 **Patient population:** 22/28 urgent referrals to an Oral and Maxillofacial Department in the audit timeframe. Reasons for exclusion of 6 patients not stated. **Population source:** Referrals from primary care	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics, pie charts	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** Unclear **Attrition:** No **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 21/21 (100%) patients seen =< 14 d **Results relating to conformity of GP referral with guidelines:** 36% deemed appropriate by consultant **Other results** Dx cancer = 4/22 (18%)	**Comments:** Powerpoint presentation with very little methodological detail. The author also reported the proportion of patients treated within 3-4 w of referral. **Dissemination:** Powerpoint presentation

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 131) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Head & Neck **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.10.00 to 31.12.00	**Aims:** To examine: $ Whether the Trust is seeing all referrals within 2 weeks. $ What the malignant pick up rate is. $ Whether the referrals appropriate. $ Whether the new proforma helped, and to make adjustments to proforma/referral criteria in light of results. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 32 **Patient population:** Fast track referrals made in October, November and December 2000. 32 referrals were received during this time period, but the case notes could only be obtained for 29 patients. **Population source:** Not stated	**Data source:** Case notes. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Seen within 2 weeks: 28/29 (1 patient did not attend - was an inpatient at the hospital, where he was subsequently reviewed) **Results relating to conformity of GP referral with guidelines:** 8/29 referrals were inappropriate Some referrals documented symptoms that did not correlate with patient's history. 7/8 inappropriate referrals were made using the Trust's proforma.	**Comments:** The audit report was only available as a power point presentation, and therefore only limited information on methodology was provided. Both the referrals that were not in line with symptoms listed in the guidelines and those where the patients symptoms did not match the referral symptoms were considered inappropriate; separate results were not provided. It was not stated how and who assessed the appropriateness of referrals according to the guidelines. **Dissemination:**

Other results Malignancy was confirmed in 5/29 (2 head & neck, 1 lung, and 2 unknown type) Referral symptoms: Hoarse 12 (2 malignancies) Neck lump 7 (1 malignancy) Dysphagia 5 Sore throat 4 Nasal discharge 1 Unknown 3 (2 malignancies)	Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 132) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Head & Neck **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.10.00 to 28.2.01	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 44 **Patient population:** 43 (17 m) urgent referrals for suspected Head & Neck cancer in the audit timeframe. 1 patient excluded: DNA OPA x 2, referred back to GP. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 38/43 (88%) seen =< 14 d 1 seen 15-16 d (next available OPA) 4 seen 17-21 d (patient postponed OPA x 3, next available OPA) 38/43 referrals received =< 24 h 3 received > 1 <= 2 d (delayed fax x 2, post) 1 received > 4 <= 5 d (delayed fax) 1 received = 8 d (post to Registration)	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

Results relating to conformity of GP referral with guidelines: 43/43 referrals were appropriate and met guidelines **Other results** 40 fax, 3 post Dx cancer = 5 No evidence cancer = 28 Awaiting review/investigation = 8 Awaiting medical notes = 2	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 133) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Head & Neck **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.10.00 to 30.09.01	**Aims:** **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Part 1: To review the 2 week referral system and identify: $ How many patients referred are subsequently found to have cancer $ How frequently do GPs adhere to the guidelines $ Are we meeting our target Part 2: New head and neck cases: $ How safe is the normal referral system in picking up cancer patients early $ Do the referral guidelines for either stream need changing 2WW related outcome measures: Percentage of fast track referrals seen in 2 weeks or less Percentage appropriate Percentage malignant Percentage in each symptom group Percentage of patients in each diagnosis Percentage of new head and neck cancer patients referred via fast track system Sources of referral **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 72 **Patient population:** Fast track referrals for head and neck cancer (n=52) between October 2000 to September 2001 (median age 58 years, range 12 to 83, 24 male, 28 female). Head and neck cancers seen in the department not referred via fast track (n=20) between October 2000 to September 2001 (median age 71 years, range 43 to 86, 13 male, 7 female). **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: 51/52 (98%) fast track referral patients were seen within 14 days of referral (median 3 days, range 1 - 28). 7/20 new cancers not referred via fast track were seen within 14 days of referral (median 29 days, range 0 - 255 days). **Results relating to conformity of GP referral with guidelines:** 20/26 (77%) of new cancers diagnosed by the head and neck teams were not referred to the fast track service, many of these would have met the two week criteria.	**Comments:** The report was in the format of a Powerpoint presentation with very few methodological data presented, therefore, it is not possible to assess the validity of the results. **Dissemination:** The report was in the format of a Powerpoint presentation and was presented 12 December 2001.

Other results 6/52 fast track referral patients had cancer (3 non Hodgkin's lymphoma, 1 SCC soft palate/tonsil, 1 invasive SCC larynx, 1 metastatic adenocarcinoma, unknown primary). 85% new cancers not referred via fast track (n=20) were referred from the GP, 5% from another consultant, 5% from the ENT clinic and 5% were incidental findings at OPD. The sites of cancer were: Ear x 1 Head x 1 Nose x 2 Mouth x 2 Neck x 5 Throat x 9	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 134) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Head & Neck **Audit type:** Dx cancer **Design:** Retrospective before and after **Recruitment time frame (follow-up, where reported):** 1.9.99 to 31.8.01	**Aims:** Not reported. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To ensure the Head and Neck department is meeting the 2ww standard. $ To determine if the Head and Neck department currently meets the standard of a maximum one month wait from diagnosis to treatment. $ To determine if the Head and Neck department currently meets the standard of a maximum two months wait from urgent referral to treatment. $ To identify any problem areas. **Extra outcomes (audit criterion not relating to the 2 week wait policy** $ All patients should start treatment within one month of their diagnosis of head and neck cancer. $ All patients should start treatment within two months of their urgent referral for suspected head and neck cancer. **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 87 **Patient population:** Patients diagnosed with cancer. It appears that the sample includes one year before and one year after the introduction of the 2ww rule. **Population source:** Cancer database	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics, graphical representation or both were used to describe the results.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: In the year before the introduction of the 2ww rule, 24 of 41 patients diagnosed with cancer (58.5%) were seen within two weeks; the mean wait for all patients was 19 days with a range of 0 to 126 days. In the year following its introduction, 18 of 46 patients diagnosed with cancer (39.1%) were seen within two weeks; the mean wait for all patients was 25 days with a range of 0 to 170 days. **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** 7 patients had been referred on the 2ww proforma, 5 of which were seen within 2 weeks.	**Comments:** This audit was very briefly reported and as such the methods are not very clear. The rationale for the audit were not reported. Additionally, there were patients unaccounted for in both years. The disimprovement in the service doses not appear to be explained by an increase in 10 referrals in a year and no discussion of this was given by the authors. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 135) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Head & Neck **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.02 to 30.10.02 and 01.10.02 to 31.10.02	**Aims:** To ensure all patients with suspected cancer symptoms are appropriately referred. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To identify the no. of appropriate urgent 2WW referrals. $ To identify percentage of patients diagnosed with cancer from 2WW referrals. $ To identify the timeliness of urgent non 2WW referrals to initial appointment. $ To identify the percentage of patients diagnosed with cancer from urgent non 2WW referrals. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 133 **Patient population:** All 2ww referrals received by the ENT department in April (n=22) and October 2002 (n=28) and all urgent vetted referrals received in October 2002 (n=74). Urgent vetted referrals also included A&E and consultant referrals and therefore classified as non 2WW referrals. 1 further 2WW referral (April 2002) and 8 non 2WW referrals were excluded because the case notes were not available, referral letters were not available, or the patients was seen privately. The data for April 2002 was used as a comparison against the October 2002 data. **Population source:** Data provided by Information Services (IS) and the Urgent Referrals Office (URO). Data for April 2002 were obtained from the Trust's re-audit of the 2 week referral process.	**Data source:** Case notes. Data for April 2002 were obtained from the Trust's re-audit of the 2 week referral process. **How collected:** Data were collected on forms designed using the Formic scanning system and the results were analysed using Excel. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** No **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: 2WW referrals seen within 2 weeks: April 21/22 (1 patient cancelled their initial appointment - time taken from cancellation) October 27/28 (2 patients cancelled their initial appointment - time taken from cancellation) Time between referral and 1st appointment for 2WW referrals that were not seen within 14 days: April - 1 patient waited 15 days October - 1 patient waited 34 days 2WW referrals received within 24 hours:	**Comments:** The authors do not explain what is meant by vetted referrals, or the process behind this. It was not stated why the audit included only one month periods, or why October was chosen to compare with data collected in April 2002. The data for 2002 was taken from a previously conducted audit and did not include data on non 2WW referrals. The authors note, within the results section, that the doctor auditing the case note was asked if 2WW referrals not meeting the referral criteria should have still been treated as 2WW referrals. It was not stated in the methodology section who was involved in the audit, and it was therefore unclear whether

April 22/22 (100%) October 24/28 (86%) (3 received within 48 hours, and 1 within 21 days) **Results relating to conformity of GP referral with guidelines:** Patients referred under the 2WW rule with referrals that met the symptoms of the 2WW referral criteria: April 17/22 (2/5 non compliant referrals were considered appropriate to be treated as 2ww referrals by a doctor who examined the case notes) October 18/28 (4/9 non compliant referrals were considered appropriate to be treated as 2ww referrals by a doctor who examined the case notes) Urgent non 2WW referrals with symptoms that should have been referred as 2WW referrals: 26/74 **Other results** 1/2 patients who did not have referral symptoms according to the 2WW criteria and referral deemed appropriate by a doctor that evaluated the patient's notes was diagnosed with cancer (April). 0/4 patients who did not have referral symptoms according to the 2WW criteria and referral deemed appropriate by a doctor that evaluated the patient's notes were diagnosed with cancer (October). Patients diagnosed with cancer from 2WW referrals: April 2/22 October 1/23 Median time (range) between referral and 1st appointment for GP urgent referrals (n=48): 29 (range 0 to 120) days Patients diagnosed with cancer from non 2WW referrals: 1/74	the doctor only scanned the case notes of patients who failed audit criteria or was actually involved in data extraction. The doctor evaluating the appropriateness of the referral according to the patients notes would also have been aware of the patient's diagnosis. The number of cancer diagnoses among 2WW referrals not meeting the referral symptom criteria was not consistently reported. For the evaluation of cancer diagnosis among 2WW referrals, the denominator used for October was 23 as opposed to 28 (total number of 2WW referrals), yet 22 was used for April. The total number of patients referred as urgent (non-2WW) by the GP was not stated. 70/74 patients were included in the evaluation of time from referrals to 1st appointment (4 were excluded because of missing data in case notes), of which 48 were direct from the GP, 11 were A&E referrals, and 11 were by another consultant. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 136) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Head & Neck **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.1.1 to 31.12.2	**Aims:** $ To find the cancer pick up rate from the 2WW referrals. $ To find the number of new head and neck cancer patients referred by standard referrals since the implementation of the 2WW initiative. $ To identify the reasons for the delay in the first clinical appointment for patients referred by standard referrals. $ To find the methods to reduce inappropriate 2WW referrals and improve the cancer pickup rate from the fast track GP referrals. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The audit criteria/standards that were examined: $ All patients with suspected head and neck malignancy should be seen by a specialist within a 2 week period. $ The yield of positive cancer from the fast track referrals should be at least 50%. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** unclear **Sample size:** 530 **Patient population:** The study population of interest was not specified. 530 case notes were reviewed, of which 285 2WW referrals (148 received in 2001 and 137 in 2002) and 52 standard GP referrals diagnosed with cancer were included in the analyses. For 2WW referrals, 7 patients were aged between 11 and 30 years, 66 between 31 to 50 years, 180 between 51 to 80 years, and 32 between 81 and 100 years. **Population source:** Not stated	**Data source:** Faxed 2WW referral proformas, head and neck cancer coding department, histo-pathology database, day case and inpatients theatre book, individual histology report check in computer, and case notes. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics (including graphs).	**Involvement:** Unclear **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Unclear **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** No **Analysis:** Yes **Attrition:** Unclear **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 2WW referrals with a cancer diagnosis seen with 2 weeks: 31/31 Mean time between 2WW referral and 1st appointment (for 31 patients with a cancer diagnosis): 5.67 (range 0 to 12 days) Mean time between GP standard referral and 1st appointment (for patients with a cancer diagnosis, n=52): 22.67 (range 1 to 77) days	**Comments:** The audit report was only available as a power point presentation, and therefore only limited information on methodology was provided. The eligibility criteria for the study population was not stated. It was also not stated how the study population was identified. A list of data collection sources were provided, but it was not stated which ones were used to identify eligible patients. It was also not stated if data were extracted from more than once source for each patient (for data checking purposes). The total number of standard and other referrals to the ENT department were not stated, but it was

Results relating to conformity of GP referral with guidelines: **Other results** No. of ENT 2WW referrals that had cancer: 31/285 Site of tumour: 1 external ear, 1 tongue, 6 oropharynx, 1 parotid, 13 neck, 4 larynx, 4 oesophagus, 1 nose/maxilla. No. of ENT standard GP referrals that had cancer: 52 Site of tumour: 3 external ear, 2 tongue, 5 oropharynx, 2 parotid, 16 neck, 17 larynx, 1 oesophagus, 1 thyroid, 3 nose/maxilla, 2 lip. No. of ENT referrals from other sources that had cancer diagnosed: 67	stated that 530 case notes were examined. The time to 1st appointment was only reported for patients with a diagnosis of cancer, and therefore the results for the first audit criterion were not given. The interval between GP referral and histological diagnosis and between ENT appointment and histological diagnosis were also reported, along with type/location of tumors and type of treatment. **Dissemination:** Audit results to be circulated to local GPs.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 137) **Year:** 2001 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** Lung **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.01 to 30.06.01	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 10 **Patient population:** Patients with lung cancer in the 3 month period (n=10, 7 casenotes obtained). **Population source:** List of patients with lung cancer obtained from the Histopathology Department.	**Data source:** Case notes. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** No **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Time from referral to first appointment for the 4 patients referred by the GP (urgent and faxed) was 6 days for 1 patient and 7 days for 3 patients. The other 2 referrals were seen at 6 days and over 14 days. **Results relating to conformity of GP referral with guidelines:** **Other results** 4 of the 7 patients with lung cancer were referred via GP (urgent and faxed), 1 was under review in ENT clinic, 1 was referred from a Chest Physician and 1 was admitted via A&E.	**Comments:** This audit was reported as a Powerpoint presentation, therefore, very little detail was given. The two week rule was not mentioned, no aims or objectives were stated and very little information on methodology was reported. This was a very small sample and a high proportion of eligible patients' notes were not found. The results unrelated to the 2WW which have been presented in the results section relate to presenting symptoms, first investigation, confirmatory test, time from referral to confirmatory test, oncology referrals, time from oncology referral to oncologist's appointment date, and surgery. **Dissemination:**

	Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment

Audit ID no.:
(WTA 138)
 	
Year:
2002
 	
Institution type:
General hospital
 	
Study type:
clinical audit
 	
Cancer site:
Lung
 	
Audit type:
Dx cancer
 	
Design:
Prospective
 	
Recruitment time frame (follow-up, where reported):
Not stated
	Aims:
	To obtain the views of lung cancer patients about the referral process and communication during their diagnosis and treatment pathways.
	
	Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):
	To record:
	$ waiting times;
	$ communication about diagnosis and treatment;
	$ support offered to patients.
	
	Extra outcomes (audit criterion not relating to the 2 week wait policy
	
	Extra outcomes (non-criterion based):
	Questionnaire included questions relating to why and when patients initially consulted their GP, and information provided about their diagnosis and treatment (surgical, chemotherapy and radiotherapy).
		Sample type
		Not stated
		
		Sample size:
		10
		
		Patient population:
		Questionnaires were offered to 10 patients attending outpatients at the Chest Clinic; 6 were completed. 5 respondents stated they had cancer, one did not give a response.
		
		Population source:
		Not stated
			Data source:
			Patient questionnaires.
			
			How collected:
			Not stated
			
			How validated:
			Not stated
			
			Process of applying audit criteria:
			Not stated
			
			Statistical method (before and after studies only):
			Descriptive statistics. Individual patient responses were also provided.
				Involvement:
				Yes
				Motive:
				Yes
				Project plan:
				No
				Source integrity:
				Not stated
				Appropriateness:
				Unclear
				Inclusion criteria:
				No
				Source check:
				Not stated
				Tool design:
				Not stated
				Collection validity:
				Unclear
				TF justified:
				No
				Process conduct:
				Unclear
				Reporting:
				Yes
				Analysis:
				Yes
				Attrition:
				No
				Re-audit:
				No

Results	Comments
Results relating to meeting the 2WW criterion: Seen within 2 weeks: 5/6 **Results relating to conformity of GP referral with guidelines:** **Other results** When asked 'do you think there were any unnecessary delays during the course of your treatment?' one patient said 'definitely, not delay in treatment, but between Dr and Consultant'.	**Comments:** This was a poorly reported audit. The results presented in the 'project summary' indicate that this was a criterion based audit, however this was not reflected in the objectives and methodology section of the audit (criterion/standards were not pre-specified). The percentage meeting the following criteria were reported: $ All patients will feel generally satisfied or very satisfied with their care. $ Patients should think there were no unnecessary delays. $ Patients will feel that their diagnosis was (a) discussed well and (b) explained clearly.

Referral route: 5 patients were referred by their GP and one patient initially consulted the doctor at the Day Hospital.	A description of the patient population of interest (such as inclusion and exclusion criteria) and the method used to select patients were not stated. It was therefore unclear whether all ten patients were selected on the same day, why they were chosen, and why such a small sample of patients was used. It is assumed that all six included patients had a diagnosis of cancer, as they were attending outpatients and is possibly why they were chosen, but this was not explicitly stated. It was not stated how many of the patients had been referred under the 2ww rule. The authors also do not explain how the questions used in the questionnaire were chosen. The number of patients seen within 2 weeks was based on data provided by the patient. This does not appear to have been checked for accuracy. The length of time between the audit and the patients' first appointment was not stated, which may have influenced the patient's recall. The patient's response may also have been influenced by their diagnosis or the care they have received. **Dissemination:**

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 139) **Year:** 2000 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Lung **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.10.00 to 31.11.00	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 11 **Patient population:** All 11 (8 m) urgent referrals for suspected lung cancer in the audit timeframe **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 10/11 (91%) seen =< 14 d 1 seen 17-21 d (clinic cancelled) 8/11 referrals received =< 24 h 2 received => 4 d (reason for breach: post) 1 unknown (reason for breach: undated post) **Results relating to conformity of GP referral with guidelines:** 11/11 referrals were appropriate and met guidelines	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

Other results 8 fax, 3 post Diagnosis cancer = 5 No evidence of cancer = 1 Awaiting further investigation = 3 Definitive dx unknown = 2	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 140) **Year:** 2003 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Lung **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.1.03 to 31.7.03	**Aims:** **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To assess the referral process of for suspected lung cancer via the HSC 200/013 guideline. The audit examined: whether GPs adhere to the referral criteria for both urgent X-ray and Chest Physician (guidelines suggest that the GP should first refer the patient for an urgent x-ray, and then depending on the results and other factors to the Chest Physician); what the most common reasons for referral are; the time taken between X-ray, referral, and appointment with a consultant; and the outcome of the referrals. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 27 **Patient population:** All patients referred by the GP, to the Trust, with suspected lung cancer over a 6-month period, January 2003 to July 2003. Full data sets were not available for all included patients. The mean age was 61 (range 44 to 83) years, and 12 patients were male. Smoking history was available for 25 patients, 12 were current smokers, 11 had given up (4 within last 10 years), and 2 were non-smokers. The most common reason for referral for urgent X-ray were cough, weight loss, chest pain and haemoptysis. The most common X-ray findings that prompted referral to the Chest Physician were opacities, shadow, mass, collapse and consolidation. **Population source:** Patient list was obtained from the Cancer Waiting Times Co-ordinator.	**Data source:** Hospital information system, Sunrise (all patients were seen at a single hospital). The type of data collected were reported. **How collected:** Data were collected onto, and analysed using the spreadsheet Excel. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Seen within 2 weeks: 27/27 (100%) Mean time between the GP referral to the Chest Physician and 1st appointment: 10 (range 5 to 14) days Mean time between the radiologist report of X-ray and GP referral: 6 (range 0 to 12) days	**Comments:** **Dissemination:** It was planned to make the results available to the Cancer Services Strategy Group and the Commissioner of the Primary Care Trust (PCT)

Mean time between performance of X-ray and it's report issued: 2.5 (range 0 to 6) days Mean time between x-ray and 1st appointment: 19 days **Results relating to conformity of GP referral with guidelines:** All referrals for an emergency X-ray (n=26) were in accordance with the guideline. 26/27 patients were initially referred for an urgent X-ray. 1 patient with recurrent haemoptysis was referred directly to the Chest Physician, which was justified by the referral criteria. The radiologist advised referral to the Chest Physician for 23/26 patients. Of the 3 patients who did not have X-ray report advising referral to the Chest Physician 2 patients had a normal X-rays and were referred to the Chest Physician: 1 had haemoptysis and weight loss (not diagnosed with cancer). 1 was referred due to supraclavicular lymphadenopathy and weight loss (does not require urgent referral under guidelines; diagnosed with cancer). 1 patient had an x-ray showing hyperinflation (was referred for X-ray by GP with dyspnoea). This diagnosis was later changed to COPD - suggesting referral was inappropriate. **Other results** 11/27 patients were diagnosed with Lung cancer (2 diagnosed with secondary lung cancer). 4 patients were diagnosed with pneumonia, 1 COPD, and 11 had cancer ruled out and treated for infection or booked a review appointment.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 141) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Lung **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.11.00 to 28.2.01	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 38 **Patient population:** 37/38 (22 m) urgent referrals for suspected lung cancer in the audit timeframe. 1 patient sought private treatment and was excluded. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 29/37 (78%) seen =< 14 d 1 seen 15-16 d (clinic cancelled) 4 seen 17-21 d (next available OPA x 3; post x 1) 1 seen 22-28 d (patient postponed OPA/clinic cancelled) 2 seen > 28 d (next available OPA over Christmas) 30/37 referrals received =< 24 h 2 received > 1 <= 2 d (delay fax; post) 1 received > 2 <= 3 d (post)	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

3 received > 3 <= 4 d (post) 1 received 5 d (post) **Results relating to conformity of GP referral with guidelines:** 36/37 referrals were appropriate and met guidelines **Other results** 29 fax, 8 post Abnormal CXR suggesting cancer = 33 Abnormal CXR recommending FU = 3 Normal CXR with persistent haemoptysis = 1 Dx cancer = 17 No evidence cancer = 13 Awaiting further investigation = 5 Definitive dx unknown/patient died = 2	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 142) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Lung **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.6.02 to 21.11.02	**Aims:** A re-audit to review compliance with the referral documentation guidelines. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ 95% urgent cases seen =< 14 d $ 90% clinic letters returned to GP =< 7 d of 1st appointment $ 100% malignancies faxed back to GP =< 24 h of dx **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 45 **Patient population:** 45 urgent colorectal referrals to 2WW Clinic **Population source:** 2WWR appointments office; information services	**Data source:** NLPCT referral letters and faxes; casenotes; information services **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Unclear **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 37/41 (90%) The remaining 4/45 patients were downgraded from urgent to routine appointments after reviewing x-rays and medical histories. **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** clinic letters returned to GP =< 7 d of 1st appointment: unknown. 41/41 had letter typed =< 7 d of appt. 10/23 malignancies faxed back to GP =< 24 h of dx	**Comments:** Few details of the audit conduct were given, making appraisal difficult. **Dissemination:** Not stated

23 patients were identified as having a malignancy	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 143) **Year:** 2003 **Institution type:** Teaching hospital **Study type:** audit (non c-b) **Cancer site:** Lung **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** Not stated	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 63 **Patient population:** Patients referred to the service (chest centre). Routes of referral include GP referral (n=38, of which 32 were 2ww referrals), GP admission (n=2), AED referral (n=1), within hospital (n=8), between hospitals (n=1), x-ray referral (n=2), referral unknown (n=8). 41 patients were male, 20 female and gender was unknown for 2 patients. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Unclear **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Proportion of GP 2 week referrals received within 7 days of referral: 32/32 (100%) Time span from referral to receipt of GP non-2 week referrals: 4/6 (67%) 2/6 (33%) unknown Time span from referral to being seen (GP 2 week referrals): 32/32 (100%) within 14 days	**Comments:** Very few methodological details were recorded and no aim was specified, therefore, it is not possible to verify the validity of the results. No conclusions were drawn from the results, therefore, it is not possible to state whether the interpretation of the results was fair. The following outcomes were also reported: diagnostic investigations performed, time span from request to investigation, number of patients discussed at MDT meeting, number of patients seen by the nurse specialist and type of treatment. **Dissemination:**

19/32 (59%) within 7 days 13/32 (41%) between 8 and 14 days Time span from referral to being seen (GP non-2 week referrals): 2/6 (33%) within 7 days 3/6 (50%) between 8 and 14 days 1/6 (17%) unknown **Results relating to conformity of GP referral with guidelines:** **Other results** 38/63 patients did not have a diagnosis recorded. 17/25 patients had a cancer diagnosis, 8 were recorded as not cancer. 5 patients were reported as deceased.	Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 144) **Year:** 2001 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** Lung **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 01.09.00 to 31.05.01	**Aims:** To review the impact of a weekly chest radiology meeting, where consensus is reached on the level of urgency of cancer suspected referrals, on the patients referred from primary care using 2-week proformas. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Process of collecting 2ww data: Time from referral to meeting and first consultation were calculated. The appropriate management of patients referred via the 2-week system (whether patients should be admitted or given an urgent outpatient appointment (2 weeks); given a soon outpatient appointment (1 month); given a routine outpatient appointment; whether further information was requested; or whether no outpatient appointment was given) was discussed at the radiology meeting and a consensus reached. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 68 **Patient population:** All 2-week referrals made between September 2000 and May 2001, 62 were discussed at the weekly meeting. The authors state that 2 patients went to another hospital so complete data was available for 58 patients. **Population source:** Not stated	**Data source:** Not stated **How collected:** Date of referral, date of radiology meeting, suggested management, date of consultation by respiratory physician and diagnosis were collected, though the authors do not state how or by whom. **How validated:** **Process of applying audit criteria:** **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Mean number of days from referral to consultation: All patients = 23.1 (n=?) Admission/Urgent patients = 9.3 (n=42) Non-urgent patients = 55.4 (n=?) Cancer patients = 9.1 (n=36) Non-cancer patients = 40.9 (n=24) 2/34 urgent referrals for patients who had cancer were more than 14 days (15 and 16 days).	**Comments:** This audit was presented in the form of a conference abstract, therefore, little methodological detail was available. The audit looks at the use of a clinical radiology meeting to stratify the urgency of 2 week referrals. The authors reported that complete data was only available for 58 patients, and the reason why data was not available was given for 2 patients. 62 patients were discussed in the meeting and the cancer diagnosis status was reported for 68 patients. The authors do not report how many patients were included in the evaluation of mean time between referral and consultation.

34/36 patients diagnosed with cancer were offered an urgent appointment. For the remaining 2, a decision was made with the GP not to investigate further for one and the other was seen within 14 days of further information becoming available, but the total referral to consultation time was 28 days. **Results relating to conformity of GP referral with guidelines:** Management plan was (n=62): 42 = admission or urgent outpatient (2 weeks) 7 = routine outpatient 6 = soon outpatient (1 month) 2 = no outpatient 5 = requested more information 20/62 (32%) referrals discussed at the meeting were not considered to be cancer. **Other results** Diagnosis: 36 = cancer 24 = non-cancer 8 = unknown	The mean number of days between referral and meeting, and meeting and consultation were also reported. The authors do not report ranges and, unlike the median, the mean is influenced by outliers. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment

Audit ID no.:
(WTA 145)
 	
Year:
2002
 	
Institution type:
Teaching hospital
 	
Study type:
clinical audit
 	
Cancer site:
Lung
 	
Audit type:
2WWR
 	
Design:
Retrospective
 	
Recruitment time frame (follow-up, where reported):
1.4.01 to 30.9.01
	Aims:
	To examine :
	$ the use of the 2WW guidelines
	$ the interface between primary and secondary care
	$ the patient journey from referral to diagnosis and treatment
	
	Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):
	$ Was the patient seen within 2 w from receipt of referral? (DoH)
	
	Extra outcomes (audit criterion not relating to the 2 week wait policy
	$ Was the date of diagnosis or formulation of management plan within 4 w of the first appointment?
	$ If a positive diagnosis of malignancy was made, was the time to first treatment =< 8 w of first appointment?
	
	Extra outcomes (non-criterion based):
		Sample type
		Consecutive series
		
		Sample size:
		80
		
		Patient population:
		80 referrals to the Chest clinic, of which 58 were 2WW referrals. 14 were referred from within secondary care and 8 via routine GP letter.
		
		Population source:
		Not stated. The Clinic provided a list of 1st appointments from the timeframe, referred from primary or secondary care.
			Data source:
			GP records, hospital casenotes
			
			How collected:
			GP practices completed an audit questionnaire.
			
			How validated:
			Not stated
			
			Process of applying audit criteria:
			Not stated
			
			Statistical method (before and after studies only):
			Descriptive statistics
				Involvement:
				Yes
				Motive:
				Yes
				Project plan:
				Yes
				Source integrity:
				Not stated
				Appropriateness:
				Yes
				Inclusion criteria:
				Yes
				Source check:
				Not stated
				Tool design:
				Not stated
				Collection validity:
				Not stated
				TF justified:
				No
				Process conduct:
				Unclear
				Reporting:
				Not stated
				Analysis:
				Yes
				Attrition:
				Yes
				Re-audit:
				Not stated

Results	Comments
Results relating to meeting the 2WW criterion: $ 100% (58/58) 2ww referrals seen =< 14 d **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** $ Diagnosis or formulation of management plan =< 4 w of 1st appointment: 63% (48/76) of all patients; 68% (21/31) of patients found to have lung cancer	**Comments:** Few details of the audit conduct were given, making appraisal difficult. **Dissemination:** Discussed at clinical governance leads meeting.

$ 35/36 patients found to have lung cancer seen =< 14d $ cancer patients time to first treatment =< 8 w of first appointment: 81% (25/31). 5 patients died before treatment.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 146) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Lung **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.11.00 to 31.5.01	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 94 **Patient population:** 94 (62 m) urgent referrals for suspected lung cancer in the audit timeframe. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 68/94 (72%) seen =< 14 d 11 seen 15-16 d 10 seen 17-21 d 3 seen 22-28 d 2 seen > 28 d **Results relating to conformity of GP referral with guidelines:** Not reported	**Comments:** This appears to have been an analysis of monthly monitoring statistics. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

Other results 86 fax, 8 post	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 147) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Lung **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.02 to 08.02.	**Aims:** A case note audit was undertaken to elicit the following: $ Number of appropriate referrals (within the criteria) $ Number of inappropriate referrals (without the criteria) $ Reasons for inappropriateness $ Number of actual cancers detected **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 115 **Patient population:** All fast track referrals during the study period (n=115, 102 casenotes obtained). **Population source:** Not stated	**Data source:** Case notes. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** 94/102 fast track referrals were appropriate. 7/102 fast track referrals were not appropriate. 1 patient was not a fast track referral. Of the 7 inappropriate referrals, reasons for inappropriateness were: $ already under consultant care for bronchiectasis. $ (x2 referrals) radiograph not suspicious of cancer. $ Haemoptysis in smoker and stridor ticked. Patient and non smoker and no stridor present. $ Persistent haemoptysis ticked (only present for 1 day) and radiograph arranged after fast track referral sent.	**Comments:** This audit reports relevant data relating to the appropriateness of referrals under the 2WW guideline and the appropriateness of the guideline (i.e. proportion of patients subsequently diagnosed with cancer). However, many important details are omitted such as details of the population source, validity of the data source and data collection methods. Therefore, the validity of the audit's findings cannot be verified. There was no interpretation of the results or conclusions drawn. **Dissemination:** Not stated

$ Patient presented with paratracheal mass. H/O alcoholic hepatitis. Patient died of alcoholic liver failure 3 weeks later. $ Patient already had history of lung cancer. Awaiting follow-up appointment when fast tracked. **Other results** 48/94 appropriate referrals were diagnosed with lung cancer (or highly probable). 46/94 appropriate referrals were diagnosed with benign lung disease or other non-malignant conditions. Of the 48 patients diagnosed with lung cancer 28 patients have died.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 148) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Lung **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.10.00 to 31.12.00	**Aims:** To look at the referrals received by one consultant in a 3 month time span, with particular reference to GP referrals compared to the specified 'Guidelines for Urgent Referral for Patients with suspected Lung cancer'. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 129 **Patient population:** Patients referred to a single consultant during a three month time period (October to December 2000). **Population source:** List of GP referrals held by the consultant's secretary.	**Data source:** Case notes. Where the paperwork was not available, the Trust patient administrative system (PAS) was used to collect data on GPs, referral status and appointment dates. **How collected:** Data were collected on a pre designed form. It was not stated how it was designed or whether it was piloted in advanced. **How validated:** All GP codes were checked against referring GP addresses. Lists of urgent referrals and cancer patients were validated using information collected for quarterly regional audit. **Process of applying audit criteria:** Referrals were coded as urgent if the word 'urgent' had been used/ highlighted by the GP or the referral indicated cancer was 'suspected' (but the term urgent not used). Referrals were coded as being on a proforma if the paperwork was structured to include a box for information, even if this was a simple tick-box or 'urgent referral' at the top of a letter. Faxed referrals were noted where possible. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Unclear **Tool design:** Not stated **Collection validity:** Unclear **TF justified:** No **Process conduct:** Unclear **Reporting:** yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Seen within 14 days: 25/32 Referral received within 24 hours for 3/7 not seen within 14 days (1 referral not found) Time between referral to 1st appointment:	**Comments:** The authors reported that the list of urgent referrals and cancer patients were validated using information collected for other purposes, but the source of this data was not reported. The classification for urgent referrals was broad. The authors report that few referrals included both 'urgent' and 'suspected malignancy' (actual numbers were not reported). The authors also noted that for

0 to 7 days = 16 8 to 14 days = 9 15 to 21 days = 1 22 to 28 days = 4 29 to 35 days = 2 Time between referral decision and receipt (n=27, no receipt found for 5): 15 = 0 days (all faxes) 8 = 1 day (3 faxes) 1 = 2 days 1 = 3 days (fax to wrong number) 1 = 4 days (post) 1 = 5 days (post) **Results relating to conformity of GP referral with guidelines:** 29/32 urgent referrals were graded A or A+ by the consultant, 1 was graded B and 2 were not graded. **Other results** 119/129 were GP referrals, of which 32 were urgent and 87 routine. Referral paperwork could not be found for 5, 3 - listed as urgent on PAS. For remaining urgent referrals, 18 were on proforma and 11 on letters. Diagnosed with cancer: 17/32 urgent referrals 2/87 routine referrals (discovered 4 months after referral)	those that were not marked urgent clearly enough, there could be a delay of up to 4 days between receipt and processing of the referral (i.e. treated as routine). The consultant grading system was not explained. For the same time period, only 11 urgent referrals were noted on lists for quarterly regional audit (QMCW). **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 149) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Lung **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.1.2 to 1.1.3	**Aims:** The aims were not specifically stated, but appear to have been to audit the management of lung cancer patients against the following government initiative targets: $ seen by respiratory physician within 2 weeks $ Have a bronchoscopy within 1 week $ Histological diagnosis and review at outpatients department within 1 week $ CT thorax within 2 weeks $ First definitive treatment within 8 weeks $ Operation within 8 weeks. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Not stated **Sample size:** 288 **Patient population:** Method of referral included A&E (n=12), fax (n=134), letter (n=62), General Medicine (n=40), X-ray (n=26), and telephone (n=4). 119 patients were referred as target referrals 168 were not referred as target referrals. 108 were male. 15 were <40 years; 59 40 to 59 years; 117 60 to 75 years; 87 75 to 90 years; and 3 >90 years). 38 patients had never smoked, 96 were ex-smokers, and 134 were current smokers. **Population source:** Not stated	**Data source:** Referral documentation, x-ray database, pathology database, patients notes and clinical letters. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Unclear **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** No **Analysis:** Yes **Attrition:** Unclear **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Seen within 2 weeks: 256/288 (90%) Time between referral and 1st outpatient appointment: Median 7 (range 0 to 85) days for target referrals (n=119) Median 7 (range 0 to 66) days for non target referrals (n=168) Median 7 (range 0 to 140) days for all referrals (n=288) **Results relating to conformity of GP referral with guidelines:**	**Comments:** The audit report was only available as a power point presentation, and important information relating to methodology were missing. The aims and objectives were not clearly reported. The eligibility criteria for the study population was not stated. It was also not stated how the study population was identified. The authors note that data were collected prospectively from date of referral, yet the data sources listed tend to imply that this was a retrospective audit, but that included patients may have been identified prospectively.

Other results No. of patients with malignant disease: 67/119 target referrals 104/168 non target referrals	It is assumed that target referrals are 2WW referrals. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 150) **Year:** 2002 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** Lung **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.4.00 to 1.1.02	**Aims:** Not reported **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 414 **Patient population:** Patients referred to the respiratory medicine department under the 2ww rule. **Population source:** Not stated	**Data source:** Data were obtained from letters and proformas. The source of data on the clinical outcomes of patients was not reported. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics were used to describe the results.	**Involvement:** Yes **Motive:** No **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported. **Results relating to conformity of GP referral with guidelines:** 45 referrals were deemed inappropriate by hospital consultants. **Other results** 84.5% of lung cancers were identified from this route of referral. 41% of referred patients had lung cancer and 8% had other malignancies.	**Comments:** This audit was very briefly reported and as such the methods are not very clear. The rationale and aims of the audit were not reported. Additionally, in a number of instances, there were patients unaccounted for. The proportion of patients who were referred under the 2ww rule who were and who were not seen within the allowed 14 days was not reported. **Dissemination:** Not stated

From April 1st to October 1st, 2000, referrals were received by 48 mailed letters (38%), 42 faxed letters (33%) and 36 faxed proformas (29%). From July 1st to October 1st, 2001, referrals were received by 7 mailed letters (7%), 11 faxed letters (10%) and 88 faxed proformas (83%).	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 151) **Year:** **Institution type:** Teaching hospital **Study type:** audit (non c-b) **Cancer site:** Lung **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.4.00 to 31.8.00; 1.4.01 to 31.8.01; 1.4.02 to 31.8.02.	**Aims:** The aims appeared to be to assess the functioning of a lung cancer rapid referral clinic. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** None stated. **Extra outcomes (audit criterion not relating to the 2 week wait policy** None stated. **Extra outcomes (non-criterion based):** None stated.	**Sample type** Consecutive series **Sample size:** 640 **Patient population:** All patients referred to the clinic during April to August in three consecutive years. There were 203 patients in 2000 (120 males and 83 females including 7 patients who failed to attend their appointments). Patients had a median age of 68, range 20 to 91 years. There were 211 patients in 2001 (114 males and 92 females including 5 patients who failed to attend their appointments). Patients had a median age of 71, range 25 to 95 years. There were 226 patients in 2002 (122 males and 100 females including 4 patients who failed to attend their appointments). Patients had a median age of 70, range 25 to 94 years. **Population source:** All referral letters were assessed.	**Data source:** Information was obtained from histopathology records, out-patient letters, and multi-disciplinary team meeting minutes. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics were used, with most data being presented in graphs.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** No **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Not reported. **Results relating to conformity of GP referral with guidelines:** In 2000 and 2001 almost all cases were in adherence with the guidelines but in 2002 14 (6%) were outside the remit of the guidelines. 6 of 14 inappropriate referrals were later found to have either a primary or secondary thoracic cancer. **Other results** Proportion of Patients found to have Malignancies: 2000 - Not reported.	**Comments:** This audit was poorly reported with most areas of the process remaining undecided. It is not clear what the auditors were attempting or if they met their own expectations. However, as the report consists of a visual aid for an oral presentation, it is unsurprising that many details are omitted. The time frame for the audit consisted of three 5-month periods over succeeding summers. No justification was given for this choice of periods. Data relating to the waiting period for appointments was presented as a graph and the raw data were not presented. Figures estimated from the graph did not agree with the total number of patients and as

2001 - 99/206 (55 males, 44 females, median age = 72, range 45 to 93) 2002 - 88/222 (46 males, 42 females, median age = 71, range 43 to 88). While the 2ww workload increased by 9%, the hit rate fell from 48% to 40% in one year. 47% of lung cancers were identified in non-2ww patients. 252 of 631 (40%) patients were found to have primary lung cancer. 38 of 631 (6%) patients were found to have a cancer metastatic to the lungs. 7 of 631 patients were found to have non-lung primaries.	such, the data have been omitted from this report. Data given on different slides appear to contradict each other - for example, one slide states that 88 persons were found to have cancer in 2002 while another suggests that 110 persons were. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 152) **Year:** 2000 **Institution type:** Teaching hospital **Study type:** research study **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** Dx cancer **Design:** Retrospective before and after **Recruitment time frame (follow-up, where reported):** 1.3.00 to 31.3.00 and 1.10.00 to 31.10.00	**Aims:** To compare management of squamous cell carcinoma (SCC) and malignant melanoma (MM) before and after October 1st 2000 "2 week deadline". **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 9 **Patient population:** Patients diagnosed with MM or SCC in March (before the 2-week deadline) (n=21) or October (after the deadline) (n=14) 2000 (n=35) who were not identified at routine follow-up (n=9), excised by the GP (n=1), referred by other departments (n=2) or failed one of the other inclusion criteria that was not listed. Only 6 patients from March and 3 patients from October were included. **Population source:** Pathology database.	**Data source:** Pathology database. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Unclear **Appropriateness:** No **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** N/a **Reporting:** Yes **Analysis:** N/a **Attrition:** Unclear **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Average delay between referral and receipt of GP letter was 15 days pre-guideline (range 2 - 27) and 2 days after the guideline. Average delay from receipt of letter to clinical appointment was 77 days (range 18 - 144) (74 days for those marked as cancer) pre-guideline and 6 days post-guideline. **Results relating to conformity of GP referral with guidelines:** The size of the tumour was given in the GP letter in 3/6 March patients and all 3 October patients. **Other results**	**Comments:** The study was only available in the form of minutes of the Regional Audit Meeting with very few methodological data presented, therefore, it is not possible to assess the validity of the results. The study reported strong conclusions considering the small number of patients included and the fact that twice as many patients were included from March than from October. The study does not actually state whether all 3 post-guideline cancer patients were referred as 2WW referrals. The authors also report the number of patients whose lesion was excised the same day as their appointment.

	The integrity of the population source was discussed by the authors in terms of it being a problem as there is variable correlation between the histological diagnosis and referral diagnosis, the pathology database does not indicate the source of referral and the lack of correlation between month of histology and month of referral or diagnosis. The appropriateness of the sample has been classified as inappropriate as it is so small and the authors acknowledge that their study was a bit quick after the introduction of the guidelines. The authors do not list the reasons for exclusion for all patients who were excluded from the study. Whilst no specific action plan or re-audit are described, the authors state that problems encountered in this audit will be helped by GP skin cancer referral forms and skin cancer clinic audit forms. **Dissemination:** The audit was presented at the Regional Audit Meeting for the Department of Dermatology 20 November 2000 and recorded in the minutes.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 153) **Year:** 2003 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.10.02 to 31.12.02	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 17 **Patient population:** Patients newly presenting to the dermatology department with squamous carcinoma between October 2002 and December 2002. The mean age was 81 (range 65 to 98) years. 10 patients were male. 14 patients were referred by the GP and 3 by hospital specialists. 2 patients were already under the care of the Consultant Dermatologist. **Population source:** Not stated	**Data source:** Not stated **How collected:** Using a predefined data collection form. **How validated:** Not applicable **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Unclear **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Unclear **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Mean time to 1st appointment (15 referred patients): 37.2 (range 0.5 to 86) days Mean time to 1st appointment for patients referred with a diagnosis of squamous cell carcinoma (SCC): 4 (range 0.5 to 8) days Mean time to 1st appointment for patients referred with a diagnosis of basal cell carcinoma (BCC): 36 (range 0.5 to 70) days	**Comments:** Only printouts of a slide presentation of the audit were available, with very little information on the methodology. The aims of the audit were not reported. The data on GP referrals were not presented separately. The 2ww rule was not applied to Fast Track BCC referrals. It was unclear whether the 'mean time to 1st appointment for patients referred with a diagnosis of SCC and BCC' was for the 8 patients for whom a SCC or BCC diagnosis was offered by the referring clinician.

Results relating to conformity of GP referral with guidelines: 4/15 patients not already under consultant care, were referred as Fast Track (using proforma) to the Suspected Skin Cancer clinic; 3 as suspected BCC. 5/15 were referred as urgent, and urgency was not stated for 6/15. Diagnosis offered by referring clinician (n=17): 6 not stated 4 BCC 4 SCC 1 Actinic Keratosis 1 Sebaceous cyst 1 Pruritus ani **Other results** 8/15 patients were seen in the Suspected Skin Cancer clinic.	**Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 154) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.10.00 to 30.11.00	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 19 **Patient population:** 19 (11 m) urgent referrals for suspected skin cancer in the audit timeframe. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 18/19 (95%) seen =< 14 d 1 seen 15-16 d (posted referral) 11/19 referrals received =< 24 h 2 received > 1 <= 2 d (delay fax; post) 1 received > 2 <= 3 d (post) 3 received > 3 <= 4 d (post) 2 received > 4 d (delay faxing; post)	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

Results relating to conformity of GP referral with guidelines: 15/19 referrals were appropriate and met guidelines **Other results** 11 fax, 8 post Dx cancer = 8 No evidence cancer = 9 Awaiting histology = 2	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 155) **Year:** 2003 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.01 to 31.10.02	**Aims:** To undertake an audit of squamous cell carcinoma (SCC) patients. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 32 **Patient population:** Patients newly presenting to the dermatology department with SCC between April 2001 and October 2002. The mean age was 76.4 (range 42 to 97) years. 19 patients were male. 29 patients were referred by the GP and 3 by hospital specialists. 9 patients were already under the care of the Consultant Dermatologist. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not applicable **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Unclear **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Patients referred by the GP as urgent seen within 14 days: 10/10 Mean time to 1st appointment (23 referred patients): 16.9 (range 0.5 to 84) days Patient waiting 84 days was referred as routine and not seen in the Skin Screening Clinic. Mean time to 1st appointment for 12/13 routine referrals or those where urgency was not stated, subsequently upgraded by consultant: 14.2 days.	**Comments:** This study was also reported as a letter in a journal.(WTA 245) Some of the data were extracted from this source. No methods were reported, only a brief description of the study population and the results. Data on GP referrals were not reported separately. **Dissemination:** Not stated

Results relating to conformity of GP referral with guidelines: 5/23 patients not already under the care of the dermatologist were referred by faxed protocol 10/23 were referred as suspected urgent by their GP. For the remaining 13/23 the degree of urgency was not stated or stated as routine on the referral; 12 were graded as urgent or soon by the consultant dermatologist. Diagnosis offered by referring clinician (n=23): 11 not stated 2 basal cell carcinoma 6 SCC 1 SCC previously diagnosed by histology 2 Bowen's disease 1 leg ulcer **Other results**	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 156) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** (5 mon)02	**Aims:** $ To ensure appropriateness of 2WWR for suspected skin cancers $ To determine whether treatment for patients with skin cancer began appropriately soon. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ All 2WWR patients will be (a) appropriate, (b) seen =< 2 w $ All patients will begin treatment =< 1 mon from dx **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 32 **Patient population:** New 2WWR patients referred to the dermatology clinic during a 5-month period in 2002. **Population source:** List of urgent skin referrals kept by project leader	**Data source:** List of urgent skin referrals. Clinical notes. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Case notes were examined by the Audit clerk for compliance with criteria. Those not meeting criteria were peer reviewed by the project leader. **Statistical method (before and after studies only):** Descriptive statistics; bar charts	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Yes **Collection validity:** Not stated **TF justified:** No **Process conduct:** Yes **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 2WWR seen =< 2 w: 23/30 (77%) (15 d x 1, 18 d x 2, 21 d x 2, 25 d, 51 d). 2 patients excluded because DNA **Results relating to conformity of GP referral with guidelines:** Met criteria: 3/32 (9%) **Other results** Dx cancer: 3/32 Treatment began < 1 mon: 2/3	**Comments:** The audit appears to have been well-designed, conducted and reported. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 157) **Year:** 2002 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 09.00 to 11.01	**Aims:** To analyze the melanomas referred assess the degree of accuracy of the diagnosis and to examine the invasiveness and hence the prognosis of these lesions. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To see how many MMs are being referred under the 2ww system and by other means. $ To assess the Breslow thickness of the MMs presenting. $ To review the differential diagnosis and other lesions referred under the 2ww system. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 41 **Patient population:** Of 541 patients referred to the dermatology medicine department under the 2ww rule, the patient population was 41 patients subsequently diagnosed with malignant melanoma. **Population source:** Patients were identified from the PAS computer system.	**Data source:** Data on the Breslow thickness of tumours was obtained from a histopathology database. The source of other information was not reported. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics, graphical representation or both were used to describe the results.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported. **Results relating to conformity of GP referral with guidelines:** Not reported. **Other results** The GP correctly diagnosed malignant melanoma in 73% of the referred patients. 26 referrals were sent by fax and 15 by post.	**Comments:** This audit was very briefly reported and as such the methods are not very clear. There was inconsistency in the detail - for example two different date ranges were provided. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 158) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.12.00 to 31.12.00	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 44 **Patient population:** 44 (13 m) urgent referrals for suspected skin cancer in the audit timeframe. 1 patient sought private treatment and was excluded. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 34/43 (79%) seen =< 14 d 1 seen 15-16 d (self referred) 2 seen 17-21 d (next available OPA after Christmas x 1; self referred x 1) 3 seen 22-28 d (self referred x 3) 3 seen > 28 d (self referred x 3) 10/19 referrals received =< 24 h 9 received > 1 <= 2 d (self referred) 4 received > 4 <= 5 d (self referred)	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

6 received > 5 <= 6 d (self referred) 3 received > 6 <= 7 d (self referred) 11 received > 7 <= 154 d (self referred) **Results relating to conformity of GP referral with guidelines:** 34/43 referrals were appropriate and met guidelines **Other results** 3 fax, 40 referred to PLC Dx cancer = 7 No evidence cancer = 27 Awaiting further review = 9	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 159) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 2 months (not specified)	**Aims:** Assessment of 2WWR appropriateness **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 45 **Patient population:** 45 2WWR referrals to dermatology dept **Population source:** National Cancer Dataset Pilot	**Data source:** National Cancer Dataset Pilot **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** 4 patients excluded as inappropriate (referrals for BCC or Bowen's disease) **Other results** 3/45 (6%) dx Ca 3/10 (30%) cancers referred under 2WWR (3/4 SCC and 0/6 MM)	**Comments:** Few details of the audit conduct were given, making appraisal difficult. **Dissemination:** Presented at local and national Cancer Data Pilot group

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 160) **Year:** 2003 **Institution type:** Teaching hospital **Study type:** audit (non c-b) **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Unclear **Recruitment time frame (follow-up, where reported):** March 03 to April 03	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 54 **Patient population:** Patients whose referral was sent on a proforma or by letter faxed to a central cancer fax number. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics were used to give data for each of the boroughs in the hospitals catchments area.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Unclear **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** 2 of 54 patients (3.7%) had SCCs and no MMs were diagnosed.	**Comments:** The methods used to conduct this audit were not fully reported. It is not possible to comment on the appropriateness of the methods for the aims of the audit as these were not reported. Only the pickup rates were investigated and the compliance with the waiting time and the appropriateness of referrals were not assessed. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 161) **Year:** 2002 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.03.01 to 31.12.01	**Aims:** $ To re-audit rapid lesion clinic and recommendations from last audit (23.05.01). $ To see whether 2-week targets have been met $ To review all cases of MM and SCC seen via Rapid Lesion Access (RLA) clinic between March and December 2001 (10 months) $ To study management of these cases **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 57 **Patient population:** Patients diagnosed with MM (n=22) or SCC (n=35) between March and December 2001 seen at the RLA clinic. Skin cancers diagnosed at general clinics were not included. **Population source:** Not stated	**Data source:** Clinical Information database, pathology database, casenotes. **How collected:** Audit forms were attached to casenotes of each patient attending the clinic. The Clinical Information Department inputs the data. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** No **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Malignant melanoma: Mean waiting time of faxed referrals (n=9) = 10 days, range 3 - 20. Mean waiting time of letter referrals (n=13) = 29 days, range 1 - 57. SCC: Mean waiting time of faxed referrals (n=15) = 7 days, range 2 - 14 (100% within 14 days). Mean waiting time of letter referrals (n=20) = 31 days, range 8 - 52. **Results relating to conformity of GP referral with guidelines:** **Other results**	**Comments:** The audit was only available in the form of minutes of the Regional Audit Meeting with very few methodological data presented, therefore, it is not possible to assess the validity of the results. This audit follows on from the audit reported as (WTA 187). Audit forms were attached to casenotes of each patient attending the clinic, however, it is not stated whether these forms were designed specifically for the project, nor whether they were piloted or tested before use. The total number of patients referred to the clinic during the audit timeframe is also not stated. The sample was not appropriate because the authors only looked at patients diagnosed with cancer rather than all 2WW referrals.

9/22 malignant melanomas were referred by fax, 13 by letter. 15/35 SCCs were referred by fax, 20 by letter. Many were referred as BCCs.	The authors also reported the mean waiting time for first dermatology procedure and re-excision and pathology data. **Dissemination:** The audit was presented at the Regional Audit Meeting for the Department of Dermatology 29 May 2002 and recorded in the minutes.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 162) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 8.2001 to 2.2002	**Aims:** Assessment of 2WWR compliance **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 59 **Patient population:** 59 2WWR referrals to dermatology dept **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics, bar chart	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 56/59 (95%) seen =< 14 d 1 seen at 15 d because of annual leave 1 seen ate 17 d (= 14 d from receipt of letter) 1 downgraded **Results relating to conformity of GP referral with guidelines:** Not reported **Other results**	**Comments:** Few details of the audit conduct were given, making appraisal difficult. Unusually, the study excluded patients referred with suspected SCC or MM when the referral was not explicitly 2WWR. **Dissemination:** No

Not reported	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 163) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.01.01 to 31.07.01	**Aims:** $ To examine the workings of the two week skin screening clinic. $ To comply with the cancer standard: The MDT should have undertaken or be undertaking a survey of its patients experience of the services offered by the team. $ To assess the quality of data held on skin cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 64 **Patient population:** Patients referred by fax, using the Skin Cancer Protocol form, to the skin screening clinic between January and July 2001 (n=35). 12/191 patients referred to the clinic between May and July 2001 were via faxed protocol. The audit also included cancer patients seen in the dermatology department during the same time period (n=29): 13 with malignant melanoma (MM), 7 of whom were referred as urgent or to the skin screening clinic; and 16 with squamous cell carcinoma (SCC), 2 of which were referred by the GP as urgent and none referred to the skin screening clinic. **Population source:** Patients diagnosed with cancer were identified from the Dermatology Department Diagnostic Database for skin cancers. A data quality check included a search of the following sources for patients diagnosed with skin cancer: the Pathology department database between January and June 2001 (3 MM, 9 SCC), and the Clinical Coding database between January and July 2001 (4 MM, 0 SCC).	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Unclear **Motive:** No **Project plan:** No **Source integrity:** **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** No **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Seen within 14 days: 35/35 patients referred via the faxed protocol 11/13 patients with MM, seen in the skin screening clinic (Dermatologist graded urgency of referral letters; not stated how many patients seen within 2 weeks were referred via fax protocol or as urgent by GP) 8/11 patients with SCC (excluding 5 patients attending follow-up appointments) 2/11 SCC were seen with 2-3 weeks and 1 seen within 3-4 weeks of referral.	**Comments:** The aims of the audit were vague, and as such it was difficult to assess the appropriateness of the study population, e.g. why patients diagnosed with cancer, referred from any source were included (when the aim was to examine the skin screening clinic), and why the authors did not include all patents referred to this clinic during the audit time frame. The actual audit criteria relating to the DoH guidelines that were to be evaluated were not pre-specified in the methods section. The audit included a patient satisfaction questionnaire, which was given to all patients diagnosed with

Results relating to conformity of GP referral with guidelines: **Other results** 2 patients referred via the faxed protocol were diagnosed with cancer. 2 SCC were referred by the GP as urgent, 7 as routine, 2 were referred by other wards, and 5 were still under dermatology follow-up.	cancer, to ensure that they complied with a cancer standard (the author's second aim). The results of which were presented separately. Very little information was given on the methodology and it was therefore difficult to be certain what was done. The patient population of interest was not clearly described and had to be deduced from the results section. The total number of referrals to the screening clinic during the audit period was not stated (but was for May to July 2001), nor was it stated how many GP urgent referrals were sent via a letter (and how many were marked as urgent). The total number of patients with MM referred to the skin cancer clinic, and by whom, was not stated. It was not stated why the Pathology database was not searched using the same time frame as the audit. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 164) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** Mixed **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.4.01 to 31.3.02	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Criteria: The Department of Health 2ww guidance. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 76 **Patient population:** All patients referred under the 2ww rule whose referral was received by fax (n = 76) and all patients diagnosed with cancer whom had not been referred under the 2wwr (number not given). **Population source:** All faxed referrals	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics are reported.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** No **Reporting:** No **Analysis:** No **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: 100% of 76 faxed referrals were seen with 2 weeks. **Results relating to conformity of GP referral with guidelines:** 17 of 76 referrals did not refer to SCCs or MMs and as such were inappropriate. 7 of 76 did not cite any criterion for referral and were deemed inappropriate. 52 of 76 referrals were appropriate. **Other results** 14 patients subsequently found to have an SCC were not referred under the 2ww rule.	**Comments:** This audit was reported only in summary. As such the methods used were only briefly discussed and so it is not possible to comment on their appropriateness. The total number of patients who had cancer but who had not been referred under the 2ww rule or the number of patients who had cancer but were not eligible for a 2ww referral were not reported. The number of patients who had SCCs who were referred outside the rule was reported but the proportion of 2ww referrees who had SCCs was not. As such, it is not possible to gauge the proportions of SCC patients who were referred under the system or outside of it. No information was given on the number of MMs diagnosed in patients either under or outside the terms of the 2ww

	system. No interpretation of the findings was presented by the auditors and it is unclear what they intended to do with the information gathered. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 165) **Year:** 2002 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.01 to 30.06.01	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 81 **Patient population:** All patients referred through the 2-week suspected skin cancer system (n=60) and all patients with skin cancer diagnosed by the local histopathologists during the same period (n=32). 11 of the cancer patients had been referred via the 2WW system. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Unclear **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Interval between receiving the fax to first appointment for 2WW referrals was less than 2 weeks in 56 cases and within 18 days in all 60 cases. Mean time interval between receipt of referral to first appointment for conventional urgent or non-urgent GP letter was 19 days for malignant melanoma (MM) (range 6 - 35 days) and 29 days for squamous cell carcinoma (SCC) (range 8 - 57 days). **Results relating to conformity of GP referral with guidelines:** **Other results** 2 confirmed MMs and 1 confirmed SCC on GP biopsy prior to referral were referred via the 2WW rule. 6 2WW referrals were subsequently diagnosed with MM and 4 2WW referrals were subsequently diagnosed with SCC. A further unsuspected MM was found on	**Comments:** Very little detail was given in this audit report, such as where, when and by whom the audit was undertaken, no aims or objectives were stated and very little information on methodology was reported, therefore, it is difficult to draw conclusions on the validity of this audit. Time intervals from referral to histological diagnosis were included in the report, but have not been reported above. The authors state that 'Locally circulated guidelines for the 2-week system were adhered to by 57 of the 60 referrals', but they do not state which part of the guidelines they refer to, e.g. appropriateness of referral. **Dissemination:**

general examination of a patient referred with an SCC. 35 of the remaining 47 patients underwent biopsy: 2 had basal cell carcinoma, the remainder had dysplastic or benign lesions. 14 MMs were diagnosed in the histopathology department during the same 3 month period: 7 via the 2WW system, 5 on biopsies done by GPs, 1 via an urgent GP referral and 1 on an in-patient. 18 SCCs were diagnosed: 4 via the 2WW system, 3 on biopsies done by GPs, 3 via urgent GP letter, 2 via non-urgent GP letter, 4 in follow-up dermatology patients and 2 referred from other specialties. Of those diagnosed on GP biopsy, 3 MMs and 2 SCCs were not subsequently referred on the 2WW system.	Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 166) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.01.01 to 30.06.01	**Aims:** **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To identify the route of referrals for patients diagnosed with squamous cell carcinomas (SCCs) and Melanomas during a 6 moth period, to look at any delays within their diagnostic and treatment pathways and work towards improving the service. The audit evaluated compliance with the Clinical Guidelines for the Management of Skin Cancer Within the West Midlands Region (1995). **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 86 **Patient population:** SCC and melanomas diagnosed between 1.1.01 and 30.6.01. Only 81 patients were included in the audit, owing to the non-availability of case notes. Histological diagnosis included: SCC (n=58), suspicion of SCC (n=2), superficial spreading melanoma (n=7), nodular melanoma (n=1), lentigo melanoma (n=8), melanoma (n=2), melanoma in situ (n=2), and suspicion of melanoma in situ (n=1). The audit included patients seen by consultant dermatologists and plastic surgeons at the Trust, patients referred from dermatology consultants from two other hospitals (to the plastic surgeons; tertiary referrals), and patients referred and treated by the GP. 70 patients were treated at the hospital Trust, 8 by their GP, and 3 were private patients. **Population source:** Reports provided by the pathology department.	**Data source:** Case notes. The actual diagnosis were taken from the histology reports that were available from the pathology department at the hospital Trust (includes data on biopsies from the dermatology and plastic surgeons at the Trust, as well as referrals to plastic surgeons from dermatology consultants from two other hospitals). For patients who had lesions excised by their GPs and did not receive any subsequent treatment/follow-up by the Trust, only data reported on the histology form/report were available. **How collected:** A data collection proforma was designed and tested before use. Data were subsequently entered onto an Access Database. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Unclear **Motive:** No **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Yes **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Unclear **Analysis:** Yes **Attrition:** No **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 28/61 (62%) were seen within 2 weeks Time from referral to 1st outpatient appointment (n=61 lesions): Not known 5 Same day 15 (patients attended as outpatient follow-up) < 1 week 7 1-2 weeks 6 2-3 weeks 6 3-4 weeks 6	**Comments:** The audit included patients with suspected SCC or melanoma. Two graphs showing the patient diagnosis (SCC, melanoma (all), suspected SCC, and suspected melanoma) and the urgency of referral according to both the GP and the consultant were presented, but the actual numbers within each category was not stated. The results could therefore not be presented here. It was unclear why only 61/70 lesions were included in the analysis of waiting times to 1st appointment, and how many of these were referred by the GP, or were 2WW referrals.

4-5 weeks 5 5-6 weeks 7 67 days 1 (referred as sebrrhoeic wart) 80 days 1 (consultant referral for BCC) 87 days 1 (routine referral as pigmented lesion) 124 days 1 (initial referral as seborrhoeic wart) **Results relating to conformity of GP referral with guidelines:** Clinical diagnosis was not reported in 45/81 referrals. 8/81 patients were referred with a different diagnosis than the eventual histological diagnosis. **Other results** Type of referral priority given by consultant (n=52; excludes Consultant or follow-up outpatients department attendances and A&E patients (n=29)): 67% urgent 10% soon 6% routine 17% not specified Referral route (n=81): 11 2WW referral proforma 28 GP other route 12 Consultant outpatients department* 15 Outpatients department follow-up 2 A&E 2 Route not know 11 Not applicable (GP specimen (n=8) or private patients (n=3)) *Consultant outpatients' department included dermatology referrals to plastic surgeons from within the hospital Trust (n=3), or from one of two other hospitals (n=9).The original referrals could have been 2WW referrals, GP other, or tertiary referrals. Specialty referred to: 24 Dermatology 38 Plastics 10 (9 2WW referrals) Open referral 1 (excised in A&E) Not recorded Referral priority (n=52; excludes attendances to Consultant or follow-up outpatients department, and A&E patients): 56% urgent 2% soon 2% routine 40% not specified 15 lesions were biopsied by GP, 7 of which (10 SCCs, 1 suspected SCC, 3 melanomas, 1 suspected melanoma in situ) were referred to the Trust for further treatment. Of the 8 not referred, 6 were SCCs and 1 was a melanoma.	Results relating to waiting times between 1st outpatient department and 1st biopsy, date of biopsy and histology report, date of diagnosis and patient being informed of diagnosis were also reported. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 167) **Year:** 2002 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.04.02 - 30.04.02	**Aims:** To assess the appropriateness of GP urgent referral in relation to skin cancers. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** Patients should have symptoms as specified in the guideline (DoH guidelines). Urgent referrals should be seen by a specialist at 1st appointment (DoH guidelines). **Extra outcomes (non-criterion based):** No of patients diagnosed with cancer.	**Sample type** Consecutive series **Sample size:** 88 **Patient population:** New patients referred as urgent by the GP, using a Proforma (or letter), with suspected cancer, and who attended their 1st appointment in April 2002. **Population source:** Letters received by the department were scanned by consultants for relevancy (patient suspected of having cancer). Specialist nurse collected all letters and Proformas and the Skin Cancer Clinic Data base checked for missing referrals. 2 were missing and excluded from audit.	**Data source:** Patients symptoms at 1st appointment. Biopsy results used to confirm cancer diagnosis. **How collected:** Referrals assessed for appropriateness by a specialist nurse. **How validated:** Not stated **Process of applying audit criteria:** Referrals assessed for appropriateness by a specialist nurse. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Yes **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Unclear **Tool design:** Not stated **Collection validity:** No **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** Referrals appropriate: 81/88 (7 had insufficient referral data) **Other results** 46/88 had biopsies Diagnosed with cancer deemed as urgent by guidelines:	**Comments:** A data extraction tool does not appear to have been used. It was not stated how the specialist nurse classified referrals as appropriate/inappropriate (e.g. patients' symptoms taken from case notes) or if this data was checked by another. It was not stated if extraction of biopsy results were checked for accuracy. The diagnosis for inappropriate referrals was not stated. **Dissemination:** Not stated

3/46 (2 Melanoma, 1 Squamous Cell Carcinoma) Diagnosed with Basal Cell Carcinoma: 8/46 Other: 33 benign, 2 biopsies not processed. 2/46	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 168) **Year:** 2002 **Institution type:** General hospital **Study type:** research study **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** Dx cancer **Design:** Retrospective before and after **Recruitment time frame (follow-up, where reported):** 01.01.99 to 31.03.00 and 01.04.00 and 31.12.01	**Aims:** To determine local practice before and after introduction of yellow faxed cancer referral form. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 100 **Patient population:** All cases of malignant melanoma diagnosed between 01.01.99 and 31.03.00 (n=23), and between 01.04.00 and 31.12.01 (n=77). **Population source:** Not stated	**Data source:** Case notes. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: In the earlier 15 month period (prior to implementation of the 2WW guidelines) 9/19 (47%) applicable patients were seen within 14 days. In the later 21 month period (most of which was after implementation of the 2WW guidelines) 43/71 (61%) applicable patients were seen within 14 days. **Results relating to conformity of GP referral with guidelines:** **Other results** In the earlier 15 month period 15/23 patients were referred as 'urgent' and 5 were referred as 'soon'. In the later 21 month period 52/77 patients were referred as 'urgent', 15 as 'soon' and 2 as 'routine'. 33 were referred on 'yellow forms'.	**Comments:** This study was reported as a Powerpoint presentation, therefore, very little detail was given. Study objectives were not explicitly stated and very little information on methodology was reported (such as population source, methods and tools used for data extraction, validity of data source). The results unrelated to the 2WW which have been presented in the results section (other than general patient and tumour characteristics) relate to the specialty the patient was referred to, GP excisions, time from 1st consultation to excision biopsy, which specialty performed the excision, completeness of excision, wider excision, time from 1st excision to wider excision, patient status, recurrence/metastases, and follow-up.

	None of the data in the later 21 month period was split according to whether the 'yellow forms' were used (i.e. referred on the 2WW referral proforma). **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 169) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.3.02 to 31.5.02	**Aims:** To improve the appropriateness of 2ww referrals for suspected skin cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To review referral letters against the criteria for urgent referral to assess appropriateness of the use of the 2ww rule. $ to elucidate other referral routes being used for patients, subsequently shown to have skin cancer, who are not referred via the 2ww system. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 103 **Patient population:** The sample consisted of all patients referred and all patients diagnosed as having skin cancer by any route. 40% were men. Age ranged from 22 to 94 years. **Population source:** Information service department.	**Data source:** Data were obtained from case notes. **How collected:** Data were entered into a data collection tool. They were then loaded onto an Excel spreadsheet. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Analysis was by descriptive statistics only.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** No **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Not reported. **Results relating to conformity of GP referral with guidelines:** 89 of 103 (86.5%) of referrals were made with the appropriate degree of urgency. **Other results** Of 27 patients referred under the 2ww system by GPs, 7 SCCs and 2 melanomas were identified. 3 referrals were made for suspected BCCs. This is not within the DoH referral criteria. Of these, one was a BCC and two were SCCs.	**Comments:** The audit's authors report that a specially designed data collection tool was used. They do not, however, report if it was piloted before use. **Dissemination:** A presentation on a referral proforma would be given to a local GP forum and at a regular MDT meeting at the North Devon and Dorset Hospital.

6 referrals were made for suspected SCCs. Of these, 3 were BCCs and 3 SCCs. 7 referrals were made for suspected melanomas. Of these, 1 was a melanoma and 6 were benign. Neither of two 2ww referrals which the GP had marked suspicious of cancer were malignant. 2 of 5 2ww referrals which did not have a provisional GP diagnosis were malignant (1 SCC and 1 melanoma). 1 BCC, 2 SCCs and 3 melanomas were identified in 7 patients referred urgently by their GPs. 2 BCCs and 3 SCCs were identified in 5 patients referred to be seen "Soon" by their GPs. 24 BCCs, 9 SCCs and 2 melanomas were identified in 64 patients referred routinely by their GPs. 64% of patients whose referrals were given an inappropriate degree of urgency were given too great a degree of urgency and the remaining 36% were treated with too little urgency.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 170) **Year:** 2003 **Institution type:** Teaching hospital **Study type:** audit (non c-b) **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.1.01 to 31.12.02	**Aims:** Not reported. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 112 **Patient population:** All patients referred to the fast-track skin cancer clinic. **Population source:** Patients were identified from a computer printout generated by the information services department.	**Data source:** Data were obtained from referral forms and case notes. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Data were analysed using descriptive statistics and presented both textually and graphically.	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: The average time from referral to the patient's first hospital appointment was 7.7 days, with a range of 1 to 16 days. 6 of 75 (8%) appropriately referred patients were not seen within 2 weeks; in three cases, this was due to the patients' non-attendance for an appointment and the remaining 3 patients were given appointments outside of the 14 day guideline. **Results relating to conformity of GP referral with guidelines:** Appropriateness information was presented on 109 of 112 patients. 75 of 109 patients (69%) were appropriately referred. These consisted of 40 suspected SCCs and 35 suspected MMs.	**Comments:** This audit was well reported in general but the some details of the methods were not given. For this reason, and because the aims of the audit were not reported, it is not possible to comment on whether the methods used were suitable for the audit. The audit gave the average waiting time from referral to appointment but did not report how many achieved the DoH 2-week standard. The auditors reported some measures which may improve the system but did not report who was responsible for implementing these or give any timescales for their achievement. **Dissemination:** Not stated

12 inappropriate referrals were for suspected BCCs, 9 gave contradictory information, 11 did not specify the reason for referral and 2 were for benign disease. **Other results** Of the 40 suspected SCCs, 9 were confirmed (22.5%). A further 8 were found to be BCCs. Of the 35 suspected MMs, 3 were confirmed (9%). A further case was found to be a BCC. Data from the audit time period (less one month) show that there were 19 SCC and 148 MM treated in the department. 9 SCCs and 4 MMs were referred through the fast track clinic.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 171) **Year:** 2002 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.9.02 to 30.9.02	**Aims:** $ To assess whether patients with suspected skin cancer are referred on the faxed skin proforma. $ To assess whether patients with suspected skin cancer meet the referral criteria. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 147 **Patient population:** 147 referrals to the pigmented lesion clinic in the audit timeframe, of which 115 were categorised as urgent. 97 were made on the faxed proforma and 48 were by letter. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics, bar and pie charts	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Unclear **Tool design:** Yes **Collection validity:** Unclear **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 97/97 faxed referrals received on day fax sent 83/97 (86%) seen =< 14 d (DNA x 4; patient asked for later appointment x 10) 1/18 posted urgent referrals seen =< 14 d (Doctor shortage x 8; patient asked for later appointment x 3; classified as 'new urgent' x 5; misdirected referral x 1) Mean days wait Urgent fax referrals: 11.25 d (range 0, 38) Urgent letter referrals: 57 d (range 13, 99)	**Comments:** This re-audit appears to have been conducted according to a project plan, although information on data sources, tool piloting, collection and validation are not reported, making appraisal difficult. The authors also report how many clinical dx matched histological dx and treatment received. **Dissemination:** Not stated

Results relating to conformity of GP referral with guidelines: 80/80 suspected melanoma referrals met criteria 32/33 suspected SC carcinoma referrals met criteria **Other results** Dx cancer = 4/18	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 172) **Year:** **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 11.7.00 to 25.1.02	**Aims:** To test compliance with 2WWR **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** All patients referred with suspected skin cancer (MM or SCC) must be seen within 2 w of referral **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 155 **Patient population:** All 155 urgent referrals (faxed proformas) with suspected MM or SCC received by Dermatology Department in the audit timeframe. **Population source:** Record database of fax proformas	**Data source:** Faxed proforma referrals **How collected:** A record of all faxed proformas was kept, including name, hospital number, suspected diagnosis, referral date on fax, date fax received, referring GP, consultant, date patient seen (under or over 14 d). It is not reported how or by whom these data were collected. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Unclear **TF justified:** No **Process conduct:** Unclear **Reporting:** No **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 130/146 (89%) seen =< 2 w CNA x 3; DNA x 3; problem cleared x 3 **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** Not reported	**Comments:** This audit gave some information on the data that was collected, but most details of audit conduct were missing, making appraisal impossible. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 173) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** audit (non c-b) **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 2.01 to 7.01.	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** The number and type of surgical procedures conducted.	**Sample type** Consecutive series **Sample size:** 157 **Patient population:** All patients referred to the Rapid Access Clinic in the audit period. **Population source:** Clinic lists obtained from the patient administration system.	**Data source:** Data were obtained from referral proformas. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics were used.	**Involvement:** Yes **Motive:** No **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** Of 160 lesions identified, only one was an SCC and two were MMs.	**Comments:** This audit was reported very briefly and as such it is not possible to comment on whether the methods are appropriate to the aims. Some of the results appear to include arithmetical errors. The reasons for conducting the audit were not listed. The auditors presented their results but appear not to have drawn any conclusions and it is unclear what they intended to do with them. (Two audits were reported in the same document.) **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 174) **Year:** 2003 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.10.01 to 31.8.02	**Aims:** To examine whether the dermatology service was seeing patients within 2 weeks and whether the majority of squamous cell carcinoma (SCC) and malignant melanoma (MM) were identified from the 2WW referral system. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 157 **Patient population:** All patients referred to the Dermatology department under the 2WW rule, between October 2001 and August 2002. **Population source:** Not stated	**Data source:** Case notes (including biopsy results). **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** Unclear **Reporting:** No **Analysis:** Yes **Attrition:** Unclear **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Did not attend or cancelled their appointment: 21/157 patients Seen within 2 weeks: 85/136 (62.5%) patients **Results relating to conformity of GP referral with guidelines:** Patients with suspected SCC or MM by GP: 151/157 (96%) patients had an SCC or MM suspected by their primary care physician:	**Comments:** The audit was published as a conference abstract, with very little detail on methodology. One of the aims of the audit was to look at whether the majority of SCC and MM were identified from the 2WW referral system, yet the audit sample reported only included patients referred under the 2WW rule. The authors report minimal data on patients diagnosed with SCC and MM from other sources. Within the same time period, 19 MMs and 74 SCCs were identified through non-2WW appointment and follow-up appointments. It was not stated how these patients were identified or how many were referred by the GP.

SCC 48/151 MM 103/151 Patients with suspected SCC or MM by dermatology department: SCC 12 (8%) MM 13 (9%) **Other results** Histologically proven SCC or MM: SCC 9 (6%) MM 8 (5%) 89% of patients seen via a 2ww appointment had benign lesions. 82 (54%) patients had a benign mole, seborrhoeic keratosis or basal cell carcinoma.	**Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 175) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.10.00 to 30.9.01	**Aims:** 1) To see if the 2WW rule had an impact on increasing the speed of melanoma diagnosis and to ascertain how it would affect the waiting time for other patients. 2) To find out whether the publication of national guidelines would improve the accuracy of GPs referral to the 2WW rule clinics. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** GP referrals should be in accordance with guidelines (DoH guidelines). **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 160 **Patient population:** Patients attending 2WW rule appointments from 1.10.00 to 30.9.01 were studied (n=124). Melanoma cases from non-2WW rule referrals were also obtained for the same time period (n=36). Total number of patients diagnosed with melanoma was 42. **Population source:** Melanoma cases from non-2WW rule referrals were identified from the histopathology department. Source of 2WW referrals were not stated.	**Data source:** Not stated **How collected:** Data collection included the GP's, dermatologists' and histopathological diagnosis. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** No **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** Unclear **Reporting:** no **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: No. of patients (2WW referrals) seen within 14 days was not stated. Average waiting time for routine referrals: 14 weeks in October 2000 32 weeks in October 2001 **Results relating to conformity of GP referral with guidelines:** GP referrals deemed inappropriate: 68%	**Comments:** The audit was published as a conference abstract, with very little detail on methodology. The process used to identify 2WW rule patients and data extraction were not reported. The total number of routine referrals was not stated. The aims of the audit would suggest that all GP referrals within the audit time frame should be considered (including non-2WW rule patients not diagnosed with melanoma), as well as pre-guideline referrals (the authors did compare changes in waiting times from the start of the audit (immediately after the implementation of the guideline in October 2000) to October 2001. The result for inappropriate GP referrals was only given as a percentage.

Other results Referral source for histological diagnosed melanomas: 6 2WW rule 9 non-2WW rule skin referrals 21 other surgical departments 6 direct from GP excisions Non-melanoma diagnosis: 13 squamous cell carcinoma (SCC) 17 basal cell carcinoma (BCC) 11 solar keratosis 34 benign moles 49 other skin conditions	**Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 176) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.1.02 to 31.3.02	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The authors report the proportion of patients who meet the 2 week guidelines (interval between referral and clinic date). **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 174 **Patient population:** Patients seen at the skin cancer clinic within a 3 month period. 89 were referred using the 2WW skin cancer referral form. 77 were male and 97 female with an age range of 10 to over 90 years. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Unclear **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 80% of referrals are being seen within the 2 week guidelines. The authors do not state whether this figure includes routine referrals as well as the 89 2WW referrals. Where time from referral to clinic could be established for confirmed melanoma cases (n=6) the average was 12.7 days (range 1 - 26). For patients with confirmed SCC, the time from referral to clinic averaged 18.5 days. **Results relating to conformity of GP referral with guidelines:**	**Comments:** The audit was only available in the form of minutes of the Regional Audit Meeting with very few methodological data presented, therefore, it is not possible to assess the validity of the results. The authors do not state any aims, therefore, it is not possible to state whether the population was appropriate for their aims. For some results the authors only report percentages, rather than figures (e.g. the proportion seen within 2 weeks), therefore, it is not possible to state whether the analysis was correct or whether all patients were accounted for.

Other results 6/8 confirmed melanomas were referred by fax. 1 delayed patient had been diagnosed as BCC by another dermatologist. Average time from clinical appointment to surgery was 8 days. The total wait from referral to surgery was a mean of 21 days (range 10 - 35). For patients with confirmed SCC, the time from clinic to surgery averaged 16.5 days. The total wait from referral to surgery was a mean of 35 days. Accuracy of clinical diagnosis: 10 clinically diagnosed MMs: 8 were MM, 2 were SCC. 9 clinically diagnosed SCCs: 6 were SCC, 1 was BCC. 18 clinically diagnosed BCCs: 15 were BCC, 1 was scarring, 1 was intradermal naevus and 1 was rosacea. 21 melanocytic naevi: 20 were benign naevi, 1 was a seborrhoeic keratosis. Histology for 7 patients was still outstanding. All lesions clinically thought to be benign were histologically benign.	The conclusions include data not presented in the results, therefore, it is not possible to state whether the interpretation of the results was fair. The conclusions refer to a previous audit, so this may have been a re-audit. **Dissemination:** The audit was presented at the Regional Audit Meeting for the Department of Dermatology 29 May 2002 and recorded in the minutes.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 177) **Year:** 2001 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 6.01 to 7.01.	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 183 **Patient population:** All patients referred to the Rapid Access Clinic in the audit period. 156 of the 183 patients were included in the audit. **Population source:** Clinic lists were printed from the patient administration system.	**Data source:** Data were obtained from clinic attendance printouts and the surgical register. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics were used.	**Involvement:** Yes **Motive:** No **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** Of 157 patients who underwent surgery, 6 were found to have MMs and 4 were found to have SCCs. (In addition one NHL was found.)	**Comments:** This audit was reported very briefly and as such it is not possible to comment on whether the methods are appropriate to the aims. The reasons for conducting the audit were not listed. The auditors presented their results but appear not to have drawn any conclusions and it is unclear what they intended to do with them. (Two audits were reported in the same document.) **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 178) **Year:** 2002 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.02 to 31.05.02	**Aims:** To see how closely government guidelines are being followed by General Practitioners with regards to the use of the appropriate fast track system route of skin cancers. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 204 **Patient population:** New patients of a named consultant seen in April and May 2002 (n=204). The authors retrieved only 149 sets of case notes, of which 12 patients did not attend. Therefore 137 patients were analysed. 115 patients were directly referred to the rapid access clinic, 19 patients were referred to another consultant dermatologist. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Date referral received by hospital to date patient seen in out-patient clinic: 72 patients (52.5%) were seen in less than 2 weeks 41 patients (29.9%) were seen between 2 - 3 weeks 18 patients (13.1%) were seen in more than 3 weeks For 6 patients (4.3%) it was not possible to identify the waiting time A letter took an average of 5 - 7 days before it was received by the hospital. **Results relating to conformity of GP referral with guidelines:**	**Comments:** Very little methodological information is provided, such as how and by whom the data were collected and whether a validated data collection tool was used, therefore, it is not possible to verify the validity of the results. It is unclear whether the authors' definition of 'appropriate route of referral' relates to 2WW referrals versus non-2WW referrals or 2WW referrals via fax versus 2WW referrals via other means. The authors' conclusions that GPs are very good at picking up the real pathology and referring it through the appropriate route and that a big proportion of GPs are not aware of the existing referral routes and can not make appropriate use of them do not appear to follow from their results. The authors appear to include BCC in the fast track system for suspected skin cancers, although these are not included in the Department of Health 2WW guidelines.

88/137 patients were referred via the appropriate route (including the hotline, fax and letter (when GP diagnosis was a basal cell carcinoma (BCC))). 3 patients with squamous cell carcinoma (SCC) and 5 patients with BCC were referred via an inappropriate route. **Other results** 115 patients were directly referred to the rapid access clinic, of those 64 were referred via letter, 20 were referred via fax and 31 were referred via the cancer hotline. The 19 patients referred to another consultant dermatologist were referred via letter. 34 patients referred via the inappropriate route had been referred via letter, their diagnoses were: Benign moles x 12 AK/SK/Bowen's disease x 15 Eczema/psoriasis/lichen planius x 5 Viral warts x 2 GP diagnosis: Malignant melanoma (MM) x 53 SCC x 18 BCC x 38 Diagnosis other than obvious skin malignancy x 24 No diagnosis mentioned x 4 Dermatological diagnosis: MM x 2 SCC x 7 BCC x 16 Diagnosis other than relevant skin malignancy x 113 (1 patient had both SCC and BCC so is included twice)	**Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 179) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.2.02 to 31.1.03	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ All patients referred with suspected skin cancer (MM or SCC) must be seen within 2 w of referral $ Only patients who attend their appointment should be counted (www.doh.gov/uk/cancer) **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 211 **Patient population:** 208 of 211 urgent referrals (faxed proformas) with suspected MM or SCC received by Dermatology Department and who attended their appointment, within the audit timeframe. 3 patients DNA. **Population source:** Record database of fax proformas	**Data source:** Faxed proforma referrals **How collected:** A record of all faxed proformas was kept, including name, hospital number, suspected diagnosis, referral date on fax, date fax received, referring GP, consultant, date patient seen (under or over 14 d). It is not reported how or by whom these data were collected. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Not stated **Motive:** No **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Unclear **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 206/208 (99%) seen =< 2 w **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** Not reported	**Comments:** This audit gave some information on the data that was collected, but most details of audit conduct were missing, making appraisal impossible. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 180) **Year:** 2002 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.7.01 to 31.1.02	**Aims:** The aims appear to be to conduct an audit of the referrals under the two-week wait system to the dermatology service. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 276 **Patient population:** The patient population consisted of all patients referred for suspected dermatological cancers under the 2ww system by fax or e-mail during a 7-month period. Only 216 of 276 patients eligible were included in the audit. **Population source:** The audit identified patients from those whose referrals was sent by e-mail or to a central fax number.	**Data source:** Patients' emailed or faxed referral. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics were presented.	**Involvement:** Unclear **Motive:** No **Project plan:** No **Source integrity:** No **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: The median wait from the date of decision to refer to the first appointment was reported for each surgeon. This median value ranged from 9 days to 14 days; the minimum wait was 2 days and the maximum wait was 28 days. **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** In 216 patients referred under the 2ww system, 15 patients with basal cell carcinomas (BCCs), 6 patients with squamous cell carcinomas (SCCs) and 19 patients with malignant melanomas (MM) were identified.	**Comments:** The report on this audit was accompanied by an e-mail which reported that this was a draft copy. The motive, aims or objectives underpinning the audit were not reported. As such it is not possible to assess if the audit aims were met. It is not clear whence data on the clinical outcomes of patients were obtained. As the processes used in the study were not reported, it is not possible to know if the audit was conducted in a robust manner.

	The median waiting time for all patients was not presented. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 181) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.03.03 to 31.03.03	**Aims:** $ To review the different approaches of each Trust to the fast track skin cancer referrals target $ To find out the case mix seen in these fast track skin cancer referrals clinics $ How many malignancies are picked up $ Does each Trust reach 100% for seeing all faxed referrals within 2 weeks of the GP deciding they should be seen. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 291 **Patient population:** Patients seen in a 2 week target skin cancer clinic over a 1 month period. **Population source:** Questionnaire of 6 trusts.	**Data source:** Questionnaire sent to 6 Trusts, it is not stated what source the Trusts used to complete the questionnaire. It is not stated whether any other source of data was used, however, given the data presented, this seems likely. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Average waiting times in days: Trust A = 7.2 (range 1 - 18) Trust B = 19.4 (range 6 - 104) Trust C = 6 (range 1 - 14) Trust D = 8.23 (range 1 - 14) Trust E = 6.2 (range 3 - 12) Trust F = 11.9 (range 1 - 28) In the questionnaire all but one trust stated that they met the two week target for all referrals.	**Comments:** The audit was presented in the form of a PowerPoint presentation and attached to the minutes of the Regional Dermatology Audit Meeting, with very few methodological data presented, therefore, it is not possible to assess the validity of the results. Whilst no specific action plan or recommendations were described in the presentation of the audit, these were discussed at the Dermatology Audit meeting. The study appears to have been conducted in the form of a questionnaire of 6 trusts. Although the data collection methods are not explicitly stated, summary results for 8 pre-specified questions are reported under the heading 'Results of the Questionnaire'. Further detailed results on time to referral, etc, are then presented in subsequent slides, but is not stated whether these data were also collected via the

Results relating to conformity of GP referral with guidelines:

Other results
Faxes accounted for 95 - 100% of referrals to all hospitals apart from one, where 35% of the referrals were standard letters.

Skin cancers diagnosed (12 MM, 13 SCC) per total number of referrals (n=291; 171 referred as MM, 120 referred as SCC):
Trust A = 3/47 MM, 2/35 SCC
Trust B = 2/30 MM, 1/32 SCC
Trust C = 2/16 MM, 1/2 SCC
Trust D = 1/17 MM, 1/9 SCC
Trust E = 2/35 MM, 2/20 SCC
Trust F = 2/26 MM, 6/22 SCC

2 patients referred as MM had a clinical diagnosis of SCC.

Responses to the question "what do you do with an ordinary referral letter you feel might be an SCC or an MM?":
Mark it 'rapid lesion clinic urgent'
Give it the same priority as a fax
Add it to the skin cancer list
Book it onto a dedicated clinic
Mark it '2/52 cancer'
Mark it 'urgent' i.e. within 4/52.

questionnaire.

Other results reported from the questionnaire include details about the 2 week skin cancer clinic, such as frequency and who staffs the clinic, when and whether it is a dedicated clinic or whether patients are added onto a routine clinic, how the clinic is booked, by whom surgery is performed for malignancies and who made the referral.

Dissemination:
The audit was presented in the form of a powerpoint presentation and attached to the minutes of the Regional Dermatology Audit Meeting 28 May 2003, where it was discussed.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 182) **Year:** **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 2.1.02 to 30.6.02	**Aims:** To identify if the system is being used appropriately **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ Referrals meeting 2WWR criteria $ Patients seen within 14 d **Extra outcomes (audit criterion not relating to the 2 week wait policy** $ Time to surgery **Extra outcomes (non-criterion based):** $ Referral rate for skin cancers $ Number of patients needing surgery $ Which nonmalignant lesions are commonly referred	**Sample type** Consecutive series **Sample size:** 316 **Patient population:** 185 of 316 urgently referred patients seen in the skin clinic in the audit timeframe. **Population source:** Not stated	**Data source:** Casenotes **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Unclear

Results	Comments
Results relating to meeting the 2WW criterion: 175/185 (95%) seen =< 14 d (average 9, range 1-21) **Results relating to conformity of GP referral with guidelines:** 118/185 referrals were appropriate: 70/109 MM 39/65 SCC 4/6 MM + SCC **Other results**	**Comments:** This audit asked clear criteria-based questions. However, it was disseminated as a presentation, and information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Presentation

184 fax, 1 post
 	
$ n cancers diagnosed from malignant melanoma referrals = 3/109 (9/109 considered suspicious of MM by consultants)
 	
$ n cancers diagnosed from SCC referrals = 6/65 (13/65 considered suspicious of SCC by consultants)
 	
New dx MM Jan-June 2002 = 12
2WWR: 3
Tumour clinic: 8
Routine: 1	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 183) **Year:** 2002 **Institution type:** Teaching hospital **Study type:** audit (non c-b) **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Retrospective before and after **Recruitment time frame (follow-up, where reported):** Not stated	**Aims:** The Health Authority complained that the 2-week wait was often breached, the authors aimed to find out why. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 346 **Patient population:** An initial study was undertaken of 1 month's activity in the weekly 'walk-in' clinic for skin cancer (140 patients). A re-audit was carried out 6 months later (206 patients) **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 58% of 140 patients in the initial study were seen within 2 weeks of attending their GP. 16% of delays were due to the patient and 21% delays were due to the GP referring by post. 57% of 206 patients in the re-audit attended within 2 weeks of seeing their GP. 13% of delays were due to the patient and 23% of delays were due to the GP referring by post. **Results relating to conformity of GP referral with guidelines:** **Other results** Patients who delayed attending were more likely to be younger, female and to have had the skin lesion for longer than those who responded	**Comments:** This audit was reported in abstract form, therefore, very little detail was given. Specific objectives relating to the two week rule were not stated, very little information on methodology was reported and results were only reported as percentages, with some data missing, as the figures did not add up to 100%. The number of cancers detected at the clinic was only reported for melanoma, no data were reported for squamous cell carcinoma cases. **Dissemination:** Not stated

promptly. Patients were more likely to attend within 2 weeks if they had a family history of skin cancer, if the skin lesion had been found by the GP during unrelated examination or if the GP wrote "cancer suspected" on the referral letter. There were 2 cases of melanoma in the initial study: both were young females who failed to attend within 2 weeks. There were 4 cases of melanoma in the re-audit: 3 were seen within 2 weeks. 25 patients who delayed attending were interviewed, 26% cited work commitments as the reason for delay, other reasons included illness, pregnancy and not understanding the urgency to attend or being aware of the 2-week rule.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 184) **Year:** 2002 **Institution type:** Teaching hospital **Study type:** audit (non c-b) **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.11.00 to 30.04.01	**Aims:** To assess how often GPs mistake a basal cell carcinoma (BCC) for a squamous cell carcinoma (SCC) or a malignant melanoma (MM) and whether it is practical to include them in the 2WW. The trust included all three malignancies in their referral guideline for the 2WW between November 2000 and April 2001, and assessed the outcomes. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 368 **Patient population:** 368 new patients were seen at the dermatology department between 01.11.00 and 30.04.01; the case notes were available for 319 patients (with 339 lesions). 34% (115 lesions) were referred as BCC, of which 77% underwent surgical procedures. 18% (61 lesions) were referred as SCC, of which 64% underwent surgical procedures. 31% (104 lesions) were referred as MM, of which 36% underwent surgical procedures. 59 lesions were referred without a diagnosis. **Population source:** Not stated	**Data source:** Case notes. All diagnoses of malignancy were confirmed histologically. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** N/a **Reporting:** Yes **Analysis:** Unclear **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Patients seen within 2 weeks: 69% **Results relating to conformity of GP referral with guidelines:** **Other results** Confirmed diagnosis for suspected BCC referrals (115 lesions): BCC 67 lesions SCC 3 lesions	**Comments:** The audit was published as a conference abstract, with very little detail on methodology. The referral guideline used in the audit, included BCCs, which is different to the DoH guidelines. This does not appear to have been a criterion based audit (no pre-specified audit criterion reported), although the authors do report the percentage of patients seen within 14 days. It was not stated how the patient population was identified or whether the list (and source) was checked for completeness/accuracy. It was not stated if the number of patients seen at the dermatology clinic (patient population) was the same as the no. referred by GPs. 49 patients were excluded as their

MM 1 lesion Non-malignant 38% of lesions Confirmed diagnosis for suspected SCC referrals (61 lesions): SCC 9 lesions BCC 16 lesions Non-malignant 59% of lesions Confirmed diagnosis for suspected MM referrals (104 lesions): MM 11 lesions BCC 3 lesions Non-malignant 86% of lesions	case notes were not available. It was not stated how the data were extracted from the case notes or if they were checked for accuracy. The results were based on the number of lesions seen (not patients); Some were presented as percentages only. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 185) **Year:** 2003 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.01.02 to 30.06.02	**Aims:** To identify if the 2ww referral system was being appropriately used and whether the target 2ww time was being met. The audit also looked at referral rates of malignant and non-malignant lesions. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** $ Waiting times for excision of melanoma referred through the 2WW system compared to the conventional referral system audited between 01.01.00 and 31.12.00.	**Sample type** Consecutive series **Sample size:** 384 **Patient population:** All patients referred to the hospital trust, through the 2ww referral system, between 01.01.02 and 30.06.02 (The case notes of 236/373 patients referred under the 2WW rule were reviewed). All patients diagnosed as having primary melanoma during the same period (14 patients; 11 non-2WW referrals). **Population source:** Not stated	**Data source:** case notes **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** No **Analysis:** Unclear **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 1st appointment within 14 days of receipt of referral (for patients referred under 2ww rule): 94%. Mean waiting time = 9 days. Mean time between referral and 1st appointment for malignant melanoma (MM) referred by GP via conventional letter: 40 days (number of patients not stated). **Results relating to conformity of GP referral with guidelines:** GP referrals deemed appropriate according to guidelines:	**Comments:** The audit was published as a conference abstract, with very little detail on methodology. It is unclear why 137 patients referred under the 2WW rule were not included (e.g. missing case notes, not referred within the audit time frame). The number of SCC referred within the same period were not reported. The audit looks at time between receipt of referral and 1st appointment and not between the GP's decision to refer and 1st appointment.

65%. **Other results** Most common diagnosis for suspected MM referrals was benign moles (39%) and seborrhoeic warts (26%). Most common diagnosis for suspected squamous cell carcinoma (SCC) referrals was basal cell carcinoma (33%). Cancer diagnosis during audit period: MM 14 (3 via 2ww referrals; 10 in existing tumour clinic; 1 as routine referral)	Only percentages are reported for some of the results, and the number of participants used as the denominator was not stated. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 186) **Year:** 2002 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 01.01 to 07.01	**Aims:** To audit the referrals to the dermatology clinic via the faxed cancer referral forms. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 404 **Patient population:** All patients referred under the 2WW rule by fax to the fast-track weekly pigmented lesion clinic for suspected melanoma or non-melanoma skin cancer such as an aggressive SCC, lymphoma or other more rare tumour, during a 7 month period. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated. However, the appropriateness of referrals appears to have been assessed based on the diagnosis made at the first consultation. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Unclear **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** **Reporting:** **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** **Other results** 13% patients urgently referred had either a diagnosis of MM (7%) or SCC (6%) made on the day of the consultation. 40.3% of 404 referred patients did not have a skin cancer, 10% had a BCC and 30.4% of patients had a lesion suspicious of skin cancer that was excised pending histological diagnosis (i.e. diagnosis at first appointment was uncertain).	**Comments:** This audit was presented in the form of a published letter, with very few methodological data presented, therefore, it is not possible to assess the validity of the results. The results were only presented in the form of percentages, therefore, it is not possible to assess whether the analysis was performed correctly or whether all patients were accounted for. The authors do not state what aspect of the 2WW rule they audit, although from the results it appears to be the appropriateness of referrals received. **Dissemination:** The audit was published as a letter in the journal Clinical and Experimental Dermatology.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 187) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.11.00 to 28.02.01	**Aims:** To assess the functioning of the rapid lesion assessment (RLA) clinics. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 476 **Patient population:** All patients referred to the rapid lesion assessment clinics over a 4 month period (including DNAs at one of the hospitals) referred by GPs on faxed specially designed forms, or by referral letters suggestive of any form of skin cancer. **Population source:** Audit forms attached to casenotes of each patient attending the clinic (including DNAs at one of the hospitals).	**Data source:** Not stated **How collected:** Audit forms were attached to casenotes of each patient attending the clinic (including DNAs at one of the hospitals), to be completed by medical, nursing and secretarial staff. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Unclear **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 50/63 (79%) faxed referrals were seen within 14 days after the fax was sent; 100% were seen within 32 days. Waiting time to first appointment was under 2 weeks for 5/12 patients with biopsy confirmed SCC (including all 3 faxed referrals), 2 - 4 weeks for 5 patients with biopsy confirmed SCC and more than 4 weeks for 2 patients with biopsy confirmed SCC (both of which had been referred as BCC). Waiting time to first appointment for patients with biopsy confirmed MM was a mean of 11 days for 2-week fax forms and a mean of 32 days for referral letter, the delays were caused by clerical/administrative processes.	**Comments:** The audit was only available in the form of minutes of the Regional Audit Meeting with very few methodological data presented, therefore, it is not possible to assess the validity of the results. The audit reported as (WTA 161) follows on from this audit. Audit forms were attached to casenotes of each patient attending the clinic, however, it is not stated whether these forms were designed specifically for the project, nor whether they were piloted or tested before use. The authors also reported data on biopsy rate of faxed referrals, time to biopsy, time interval between

Results relating to conformity of GP referral with guidelines: **Other results** There were 63 faxed referrals and 306 letter referrals; data were not available for 107 patients. Dermatology clinical diagnoses were 20 cases of SCC and 14 cases of malignant melanoma, along with 77 cases of basal cell carcinoma and various other benign conditions. No data were available for 47 patients. 41/63 faxed referrals had a biopsy; 248/433 in total (for all clinic attendees). 44/63 faxes suspected melanoma, 7 of which were confirmed as melanoma and 1 as SCC. 17 faxes suspected SCC, 3 of which were confirmed as SCC. Of 12 biopsy-confirmed SCCs, 3 were referred as SCC, 4 as BCC, 1 as AK, 1 as KA and 1 as 'keratotic lesion', no referral diagnosis was given for 2. Dermatology clinical diagnosis for these lesions was SCC x 6, KA x 2, BCC x 2, Bowens x 1 and AK x 1. Of 11 biopsy-confirmed melanomas, 2 week wait forms were used for 7 patients. 44 faxed forms suspected melanoma, of which 7 had biopsy confirmed melanoma.	appointment and diagnostic/definitive procedure and times to re-excision. Whilst no specific action plan is described, the authors state recommendations for future audit and practice. The authors state that more data has been collected on the RLA clinic audit forms as time has gone on (e.g. copy of GP letter, histology result), so data for the whole period is incomplete. **Dissemination:** The audit was presented at the Regional Audit Meeting for the Department of Dermatology 23 May 2001 and recorded in the minutes.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 188) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.05.00 to 31.07.00 and 1.05.01 to 31.06.01	**Aims:** To assess the effect of administrative changes made after an initial audit conducted over a three month period in 2000 (May to July), by comparing the data with a subsequent audit conducted over a three month period in 2001 (May to July). The second audit also aimed to identify proportions of SCC/MM referred on 2ww vs conventional route, and to compare tumour thickness for each group. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 580 **Patient population:** Patients who were given dedicated target slots within existing clinics (allocated to those referred using a skin cancer referral form or included the key words malignant, cancer, malignant melanoma (MM), squamous cell carcinoma (SCC) or a suitable description in a GP letter) were eligible, which included 334 patients during the first audit and 246 during the second. Of which, 264 patients were included in the initial audit (143 had a surgical procedure following their initial appointment), and 215 in the second audit (130 had surgery). **Population source:** Not stated	**Data source:** Patient records were analysed for delay factors and final diagnosis. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** Unclear **Reporting:** yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: All results are for the 2001 audit Seen within 2 weeks: 119/215 78% for faxed skin cancer referral forms 85% when discounting delays in receipt of letters Time (days) to 1st appointment (n=215): Mean 15, median 14 (range 0-60)	**Comments:** The audit was also published as a conference abstract. The initial audit was conducted prior to the implementation of the DoH 2WW guideline, and therefore only the results of the second audit are presented here. Recommendations implemented after the first audit: use of fax proforma, reception staff to book directly into target slots, ability to overbook clinics to meet the target. The process used to identify 2WW rule patients and data extraction were not reported. The eligibility

Time (days) to 1st appointment (using skin cancer referral forms, 162): Mean 14, median 14 Time (days) to 1st appointment (referrals not using skin cancer referral forms, 53): Mean 18, median 17 Time (days) for GP referral letter to get to dermatology department (n=207): Mean 1, median 0, range 0-12 Reason for delay: 20% patient postponing appointment Mean time (days) to 1st appointment for cancer patients: Target clinic: SCC (n=8) 17 (range 8-36), MM (n=8) 16.5 (range 8-41) Referred on skin cancer form: SCC (n=4) 14 (range 14), MM (n=7) 16 (range 8-14) Conventional clinic: SCC (n=9) 46 (range 7-115), MM (n=7) 46 (range 0-84) **Results relating to conformity of GP referral with guidelines:** **Other results** Histologically confirmed diagnosis: 8 MM (7 using skin cancer form, 6 seen within 14 days (1 given appointment within 14 days but patient postponed it)) 8 SCC (4 using skin cancer form, 6 seen within 14 days (2 given appointment within 14 days but patient postponed it)) overall detection rate 7% (16/215) Most common clinical (69%) and histological (60%) diagnoses were benign naevus, basal cell carcinoma and seborrhoeic warts. Conventional referrals diagnosed with cancer (referred as new patients to conventional clinic during May to July 2001): 7 MM 9 SCC	criteria for a target clinic slot appear to have been quite broad. It was therefore unclear if all referrals that did not use the skin cancer referral form (or fax proforma) would have been classified as a 2ww referral according to the DoH guidelines. It was not stated why some patients, who had been given target clinic slots, were not included in the audit. The total number of patients referred to the conventional clinic was not reported. All GP letters were initially screened by the reception staff for eligibility for target clinic slots. The GP letters of those classified as having been referred the conventional way were not later checked to ensure that they did not express a clinical suspicion of SCC or MM. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 189) **Year:** 2003 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Skin (melanoma, squamous cell) **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** A 3-month period was used but the start and finish dates were not reported.	**Aims:** To assess the quality of referrals by GPs with regards the two-week rule. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 610 **Patient population:** All patients referred to a skin oncology screening clinic. The audit contained data on 63 men and 97 women; median age 60 , range 16 to 94). **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics were presented.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Unclear **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: The median time from referral to appointment was 9.5 days (range 4 to 69 days) for patients subsequently diagnosed with melanoma whose referral was received on an agreed proforma. It was 14 days (range not reported) for patients whose referral was received in letter format. The median time from referral to appointment was 8 days (range 6 to 71 days) for patients subsequently diagnosed with an SCC whose referral was received on the proforma. It was 25 days (range 7 to 127 days) for patients whose referral was received in letter format. **Results relating to conformity of GP referral with guidelines:** Not reported	**Comments:** This audit was presented as a conference abstract. Few details of its methodology were reported. It is not stated how patients were identified, where data were obtained or by whom this was done. The time intervals between the appointment and the date at which final diagnoses were recorded or the process by which this was assessed are not stated. No information on whether data were checked for accuracy was given. As the methods used are so poorly reported and the aims are only sketchily given, it is not possible to comment as to whether the audit was conducted in a robust manner or in a way that was appropriate to its aims. The proportion of patients referred under the 2ww system who were or were not seen within the

Other results Of 26 urgently referred patients whose GP suspected that they had a melanoma, one patient was diagnosed with melanoma. Of 10 urgently referred patients whose GP suspected that they had an SCC, three patients were diagnosed with SCCs. Of 2 non-urgently referred patients whose GP suspected that they had a melanoma, both patients were recategorised as urgent but neither was diagnosed with melanoma. Of 14 non-urgently referred patients whose GP suspected that they had an SCC, 8 patients were recategorised as urgent and three were diagnosed with SCCs. 5 additional non-urgently referred patients were diagnosed with melanoma and two with an SCC.	allowed 14 days was not given. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 190) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Urological **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.12.00 to 31.12.00	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 8 **Patient population:** 8 (7 m) urgent referrals for suspected urological cancer in the audit timeframe. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 6/8 (75%) seen =< 14 d 1 seen 15-16 d (clinic cancelled over Christmas) 1 seen 22-28 d (clinic cancelled) 8/8 referrals received =< 24 **Results relating to conformity of GP referral with guidelines:** 8/8 referrals were appropriate and met guidelines	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

Other results 8 fax, 0 post Dx cancer = 2 No evidence cancer = 3 Awaiting further investigation/review = 3	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 191) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Urological **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.10.00 to 30.11.00	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To ascertain whether GP referrals were received =< 24 h $ To ascertain whether time from referral to 1st appointment was =< 14 d **Extra outcomes (audit criterion not relating to the 2 week wait policy** $ To analyse whether clinical information provided by GPs met referral guidelines **Extra outcomes (non-criterion based):** $ To present numbers of urgent referrals subsequently diagnosed with cancer	**Sample type** Consecutive series **Sample size:** 21 **Patient population:** 18 (16 m) urgent referrals for suspected urological cancer in the audit timeframe. 3 patient were excluded: 1 not urgent, 1 referred back to GP, 1 sought private treatment). **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 17/18 (94%) seen =< 14 d 1 seen 15-16 d (posted referral) 15/18 referrals received =< 24 h 1 received > 1 <= 2 d (delayed fax) 1 received > 4 < 5 = d (post) 1 received > 5 < 6 = d (post) **Results relating to conformity of GP referral with guidelines:**	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

15/18 referrals were appropriate and met guidelines **Other results** 16 fax, 2 post Dx cancer = 4 No evidence cancer = 4 Awaiting further investigation = 7 Awaiting medical notes = 3	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 192) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Urological **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.1.01 to 28.2.01	**Aims:** To monitor appropriateness and efficacy of urgent GP referrals for suspected urological cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 23 **Patient population:** 19 (19 m) urgent referrals for suspected urological cancer in the audit timeframe. 4 patients were excluded: not urgent, referred back to GP. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** N/a **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 16/19 (84%) seen =< 14 d 3 seen 17-21 d (posted referral x 1, next available OPA x 1, faxed at w/e + next available OPA x 1) 16/19 referrals received =< 24 h 2 received > 2 <= 3 d (delayed fax) 1 received > 3 < 4 = d (post) **Results relating to conformity of GP referral with guidelines:** 18/19 referrals were appropriate and met guidelines	**Comments:** This appears to have been an analysis of monthly monitoring statistics, with some extra information on appropriateness. While it appears that the population of interest was identified from the "Fast track Referral Office", this was not stated explicitly. Information on the conduct of the audit is almost completely missing, making appraisal impossible. **Dissemination:** Not stated

Other results 18 fax, 1 post Dx cancer = 5 No evidence cancer = 4 Awaiting further investigation/review = 5 Awaiting receipt medical notes = 5	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 193) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Urological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.1.3 to 31.10.03	**Aims:** To audit a sample of 30 consecutive patients who have been seen in the 2 week rule clinic. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To assess the validity of the referrals (against the 2WW urgent referral criteria for urological cancer) and to calculate the rate of cancer detection. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 30 **Patient population:** Consecutive patients seen at the 2WW clinic. There were 21 men. The mean age of the sample was 57 (range 18 to 89) years. The type of cancers suspected by the GP were bladder/kidney (n=2), bladder (n=8), kidney (n=3), prostate (n=7), testicular (n=9), and not stated (n=1). **Population source:** Not stated	**Data source:** GP referrals. It was not stated how information on the hospital clinical assessment were established. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** The appropriateness of GP referrals were assessed according to whether the patients presented with symptoms that were in line with the referral guidelines, when assessed at the hospital. Three clinicians were involved in this process. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Unclear **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** No **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** 21/30 referrals were considered appropriate. Appropriate referrals according to the referral cancer site: bladder or bladder/kidney 10/11 kidney 2/3 prostate 7/7 (1 patient was referred with back pain and found to have metastatic disease) testicular 2/9	**Comments:** The audit report was only available as a power point presentation, and as such some important information relating to methodology were missing. In addition, because the information was presented in an abbreviated form, it was sometimes difficult to interpret and there appeared to be some discrepancies, e.g. one slide reporting the hospital diagnosis for prostate showed 4/7 patients had cancer whilst the final slide reported that the most appropriate referrals were for prostate cancer because all were proven to be true cancer; a summary statement for kidney cancer showed 2/3 referrals to be appropriate, yet a breakdown of appropriateness of each referral according to the hospital diagnosis showed 1/3 to be appropriate. Only overall summary findings were therefore abstracted.

Other results No. of hospital suspected cancers (according to referral cancer site): bladder or bladder/kidney 1/11 (prostate cancer) kidney 0/3 prostate 4/7 testicular 2/9	Three clinicians were involved in the audit, but it was not stated if more than one clinician assessed the appropriateness of each referral, or how they were assessed, e.g. using the case notes. An independent review by more than one clinician would help to minimise potential bias and errors. Appropriateness of referrals were assessed according to the hospital clinical assessment and not whether the GP referral specified patient symptoms that were in line with the referral criteria. It was not specifically stated that the hospital assessment of appropriateness was based on the findings of the first clinical assessment (and not the results of further investigations), but the results have been interpreted as if they were. The authors reported in their final summary that for renal and 'collecting system', cancer referrals were considered appropriate if the patients presented with haematuria. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 194) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Urological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.07.02 to 31.07.02	**Aims:** **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To review "Target Referrals" for Suspected Urological Cancer and assess their appropriateness. Were GPs filling in the new forms correctly and supplying the requested additional information? To compare appropriate referral numbers with previous audit. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Not stated **Sample size:** 32 **Patient population:** Urology target referrals for suspected cancer during a 1 month period. 1 patient was referred by letter and 31 by proforma. **Population source:** Not stated	**Data source:** Referral forms. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Patients were deemed to be inappropriately referred if: the GP did not follow the guidelines for referral; patients did not present with symptoms described on the form; or the patient was already in the system and had been fast tracked using the form. It is not stated who applied the criteria. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** No **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** Reason for urgent referral: haematuria = 17 age elevated PSA = 8 testicular lump = 3 renal mass = 2 (all of the above are listed in the guidelines for urgent referral) none given = 2	**Comments:** Few methodological details were reported so it is not possible to verify the validity of the results. Only percentages were given for most of the results, therefore, it is not possible to assess whether the data were analysed appropriately or whether all patients were accounted for. This service was been audited previously and it appears that this is a re-audit. Details of the previous audit are also included in this review.(WTA 201)In the initial audit the patient population was a random sample, however, the authors do not specify the sample type or any inclusion criteria for this re-audit.

78% referrals were deemed appropriate based on the criteria devised by the authors. **Other results** For 66% referrals the forms were filled in correctly, the main problem for the incorrectly filled in proformas was that the requested test results were not included. 8/32 referrals resulted in a positive diagnosis of cancer.	**Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 195) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Urological **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 16.08.02 to 30.09.02	**Aims:** To monitor how urology cancer patients are being referred into the trust. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ Obtain list of urology cancer patients for the six weeks. $ Find out the route of referral for each patient. $ Calculate Length of each patient journey. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 34 **Patient population:** Patients who had received a biopsy between 16.08.02 and 30.09.02. **Population source:** List of patients who had had a biopsy was obtained from the specialist nurse.	**Data source:** The specialist nurse recorded urology histologies and passed this data to the audit department. Further data were extracted from the Patient Administration System (PAS) and diagnostic and treatment details were obtained from the case notes (where available). **How collected:** Data were extracted on to a spread sheet. Time taken to reach each stage was calculated using formulae. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Unclear **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** **Other results** Routes of referral included urgent 2WW (n=5), GP urgent not 2WW (n=10), GP routine (n=12), consultant routine (n=3), consultant urgent (n=2), and emergency (n=2). All patients referred by the GP via the urgent 2WW route had prostate cancer (n=5), those referred by the GP as urgent but not via the 2WW route had bladder (n=3) or prostate cancer (n=7) and those referred as (GP) routine had bladder (n=6), prostate (n=4), renal (n=1) or testicular cancer (n=1).	**Comments:** The results of the audit indicate that this was a criterion based audit, with the percentage meeting the following criteria being reported: $ Time between referral and 1st treatment should be < 62 days. $ Time between diagnosis and 1st treatment should be < 31 days. However this was not reflected in the aims/objectives and methodology of the audit (criterion/standards not pre-specified). The methods section describe the audit sample as patients who had had a biopsy, but only patients with a diagnosis of cancer were included. It was not stated if the list of included patients was checked for

	completeness. It was not stated how many were involved in data extraction or whether entries were checked for accuracy. It was also not stated if the data on PAS were checked for accuracy. A summary table, in the results section, relating to the average length of patient journey, split by referral type, appears to be missing; only the heading was include. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 196) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Urological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** Not stated	**Aims:** $ To assess the urology departments compliance with the 2 week rule for cancers. $ To assess the appropriateness of 2 week referrals to urology. $ To identify any delays in diagnosis, management and investigations. $ To suggest any improvement that may be necessary to improve performance. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Not stated **Sample size:** 40 **Patient population:** Not stated (n=40, 33 casenotes obtained). **Population source:** Not stated	**Data source:** Case notes. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Unclear **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: 97% of patients were seen within 14 days and 100% in 21 days. **Results relating to conformity of GP referral with guidelines:** 12% referrals were inappropriate. Macroscopic haematuria and testicular swellings were the most common reason for referral. **Other results** 19% patients had cancer. 47% patients had a diagnosis within 28 days. 90% patients had completed their investigations within 3 months.	**Comments:** This audit reports relevant data relating to the appropriateness of referrals under the 2WW guideline, the appropriateness of the guideline (i.e. proportion of patients subsequently diagnosed with malignancy) and the proportion of patients seen within 2 weeks. However, many important details are omitted such as details of the population studied, validity of the data source and data collection methods. Therefore, the validity of the audit's findings cannot be verified. Whilst the patient population is not explicitly stated, it appears to be patients referred under the 2WW rule. For the result relating to the proportion of patients who had a diagnosis within 28 days, the authors do not explicitly state whether this relates to all the patients referred or just those who were diagnosed with cancer.

	Dissemination: Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 197) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Urological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 9.00 to 11.00	**Aims:** $ To ensure appropriateness of 2WWR for suspected urological cancers $ To determine the proportion of referrals from other routes dx with cancer $ To determine whether treatment for patients with urological cancer began appropriately soon. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ All 2WWR patients will be (a) appropriate, (b) seen =< 2 w $ No patient will be referred under 2WWR if unwilling $ All patients will begin treatment =< 1 mon from dx **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 50 **Patient population:** New patients referred to the Urologists, and identified by them as urgent, including 4 2WWR patients **Population source:** List of urgent urology referrals.	**Data source:** List of urgent urology referrals. Clinical notes. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Case notes were examined by the Audit clerk for compliance with criteria. Those not meeting criteria were peer reviewed by a consultant urologist the GP representative. **Statistical method (before and after studies only):** Descriptive statistics; bar charts	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Yes **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 2WWR seen =< 2 w: 3/4 (75%) (1 seen at 16 d, but referred before 2WWR began) **Results relating to conformity of GP referral with guidelines:** Met criteria: 4/4 (100%) **Other results** Dx cancer: 9/50 (2WWR = 1, urgent = 5, 3 = non-urgent GP letter) Treatment began < 1 mon: 9/9	**Comments:** Although some details of conduct were missing, such as tool design, the audit appears to have been well-designed, conducted and reported. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 198) **Year:** 2002 **Institution type:** Teaching hospital **Study type:** research study **Cancer site:** Urological **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 1.6.01 to 30.4.03	**Aims:** To compare whether patients referred under the 2ww rule had a higher incidence of cancer than those referred routinely. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** **Sample size:** 64 **Patient population:** All patients referred with frank haematuria under the 2ww rule were studied (n=32). These were compared with a control group consisting of all patients referred routinely for frank haematuria (n=32). **Population source:** Patient referrals	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics were used to describe the data and the significance of the difference was assessed using the chi-squared test.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 32/32 2W rule patients received cystoscopy within 2 weeks. Average time to cystoscopy for control was 4.5 (range 2 to 9) weeks. **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** 4/32 patients referred under the 2ww rule were diagnosed with cancer and 5/32 of the control patients were. This difference was not statistically significant.	**Comments:** This research study investigated a very small number of cases. There were only nine cancers involved in the study and as such, drawing the conclusions from the data as the authors have done, is of questionable merit. The study was reported in outline only and as such, the methods used are poorly described. It is therefore not possible to appraise the quality of the methods used or their appropriateness. **Dissemination:** Not reported.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 199) **Year:** **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** Urological **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** Not stated	**Aims:** None reported **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** unclear **Sample size:** 73 **Patient population:** Patients were identified from three sources: patients diagnosed with cancer on the patient management system (PMS) between September and October 2001 (n=54), patients that were on a single consultant's outpatient clinic list and had been referred as urgent (n=26), patients classified as urgent referrals on the MPI (n=43) (it was not stated what this abbreviation means). The following patients were then excluded: patients diagnosed with cancer prior to the new standards (n=35), consultant referrals (n=10), marked as routine referrals (n=3), A&E referrals (n=2). 55% of referrals were marked urgent, 47% cancer, 41% 2 weeks, and 60% urgent or cancer or 2 weeks. Type of referral included, GP letter (41%), the Trust's proforma (37%), GP's own proforma (8%) and not recorded (11%). **Population source:** PMS, consultant's outpatient clinic list, and MPI.	**Data source:** Case notes. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: For the 30/73 referrals marked 2 weeks, 17 were seen within 2 weeks. Mean, median days between referral and 1st appointment (n=30): 15, 14 (range 3-32) For those diagnosed with cancer and referrals marked 2 weeks (n=12), 7 were seen within 2 weeks. Mean, median days between referral and 1st appointment (n=12): 15, 14 (range 3-32)	**Comments:** This was a very poorly reported audit, with no aims or objectives being reported and very little data on methodology. The target population of interest was not reported. The three sources of data used to select patients for inclusion do not look as if they would be mutually exclusive, but the data was reported as if they were. The authors list A&E referrals as one of their exclusions, yet 11% of included patients were reported to have been referred to A&E. The time frame for the audit was not stated, but when listing the data sources for identifying patients the dates 'September to October 01' were given with 'diagnosis of cancer on PMS'. It is therefore not clear if this date refers to the dates that patients were diagnosed with cancer or the initial referral date. No dates were given for other data sources.

For the 9/73 referrals with no indication of urgency, cancer or 2 week standard on them, 2 were seen within 2 weeks. Mean, median days between referral and 1st appointment (n=9): 22, 20 (range 12-41) **Results relating to conformity of GP referral with guidelines:** **Other results** 12/30 referrals marked 2 weeks had a diagnosis of cancer (14 were non cancer, 4 unknown). Type of cancer included bladder (n=3), prostate (n=6), bone metastases (n=1), transitional cell (n=1), and renal (n=1). Type of referrals for those marked 2 weeks (50% were faxed and 50% posted): Trust proforma 53% GP letter 23% GP own proforma 13% Not recorded 10%	Waiting time data is only presented for referrals marked 2 weeks (and not for those marked, urgent, cancer or all three). No further explanation was given on how referrals were classified according to these four categories. Other outcomes that were reported in the results section were symptoms, duration of symptoms and non cancer diagnosis for referrals marked 2 weeks; and symptoms, duration of symptoms and type of cancer for referrals with no indication of urgency, cancer or 2 week standard on the referral and were diagnosed with cancer. It is not clear whether the **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 200) **Year:** 2003 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Urological **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 6.01 to 7.01	**Aims:** To investigate the workload generated by the introduction of the two week wait referral system and the compliance with the two-week wait rule. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 82 **Patient population:** All patients referred to the urology department in the audit timeframe which stated or implied a suspicion on the part of the GP of a possible diagnosis of cancer. **Population source:** Patients were identified by referral letter.	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Data were analysed using descriptive and inferential statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 13% of 82 patients were seen within the allowed 14-day period; the median time to appointment was 40 days, (range 8 to 97 days). However none of the 31 patients referred with suspected haematuria were seen within this time period (median time 56.5 days, range 20 to 80 days). 35% of the 51 patients with other referral symptoms were seen within 14 days (median time 21 days, range 8 to 97 days). **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** Suspected cancer form used = 0	**Comments:** This audit was generally well reported but some key information was omitted. The authors highlighted some problems with their practice but have not reported a full action plan which may help to overcome these. The auditors assessed referrals according to a locally agreed system in order to upgrade some. The detail of this system was not reported. As only about one eight of the referrals were within the 2ww rule and the remaining seven-eights were upgraded as a result of the local system (and as the results presented here reflect this two-part population), it is not clear if this audit can be taken to give information about the subset of patients who had been referred under the 2ww rule. The results of the

GP comments in referral letter: See within 2 weeks = 3 Possibility of cancer stated + 'urgent' = 7 Possibility of cancer stated - 'urgent' = 7 Possibility of cancer implied = 46 Possibility of cancer neither stated nor implied = 19 37% of the referral letters were faxed. The remainder were sent by mail. None used the "Suspected Cancer" form.	2ww referrees were not presented separately. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 201) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Urological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.09.01 to 31.02.02	**Aims:** **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To review "Target Referrals" for Suspected Urological Cancer and assess their appropriateness. Were the Target patients fulfilling the criteria for suspected urological cancer? Were GPs filling in the new forms correctly? How many of them included the requested additional information? **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Random sample **Sample size:** 150 **Patient population:** Random selection of 100 patients referred on proformas and 50 on letters during a 6 month period. All were urology target referrals for suspected cancer. **Population source:** Not stated	**Data source:** Referral forms and clinic letters. Patients whose investigations had discovered cancer were identified through positive histologies. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Referrals on a proforma which resulted in a cancer diagnosis were considered appropriate. Patients referred using a proforma who did not have cancer were deemed to be inappropriately referred if: the GP did not follow the guidelines for referral; patients did not present with symptoms described on the form; or the patient was already in the system and had been fast tracked using the form. Since the introduction of the proforma, referrals on letters were considered to be inappropriate. It is not stated who applied the criteria. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** No **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** Reason for urgent referral (proforma referrals): haematuria = 51 testicular swelling = 13 renal mass = 4 elevated PSA = 16	**Comments:** Few methodological details were reported so it is not possible to verify the validity of the results. Only percentages were given for most of the results, therefore, it is not possible to assess whether the data were analysed appropriately or whether all patients were accounted for. This service has been re-audited. Details of the re-audit are included in this review.(WTA 194) **Dissemination:**

other = 6 more than one reason = 10 Reason for urgent referral (letter referrals): haematuria = 27 testicular swelling = 6 elevated PSA = 17 The authors do not state that haematuria, testicular swelling, renal mass and elevated PSA are criteria for urgent referral, listed in the National Guidelines. 24/61 referrals made on the proforma which did not result in a diagnosis of cancer were judged to be inappropriate based on the criteria devised by the authors. 31/61 were classed as appropriate referrals and 6 were unknown (including DNAs, no record of appointments in notes, notes not reviewed or cases where the patients died before investigations were complete). **Other results** 31 referral proformas were incorrectly filled in; 15 had no results sent/inadequate comments, 7 had no dates included, 6 were awaiting results and 3 had no reason for the referral included. 39/100 patients referred on the proformas were diagnosed with cancer, 14/50 letter referrals resulted in a positive diagnosis of cancer.	Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 202) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Urological (3 sites) **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.07.02 and 31.12.02	**Aims:** To ensure that all patients receive an equitable service in accordance with national guidance. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To identify the number of patients diagnosed with bladder, renal and prostate cancer $ To ensure patients receive the appropriate tests and investigations $ To identify patient pathways, bottleneck and difficulties $ To assess current practice provided by secondary care against National Guidance recommendations **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 123 **Patient population:** Patients newly diagnosed with bladder (n=53) and renal cell cancer (n=19; non kidney cancers were excluded) between July and December 2002, and patients newly diagnosed with prostate (n=51) cancer between October and December 2002. 9 patients were excluded as their case notes were not available (bladder, renal and prostate cancer). Private patients were also excluded, as was one patient who was on holiday. **Population source:** Information provided by the histopathology department and coding data provided by Information Services (IS).	**Data source:** Case notes **How collected:** Data were collected on forms designed using the Formic scanning system and the results were analysed using Excel. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: 2WW referrals seen within 2 weeks: Bladder 27/27 (excludes 1 patient admitted to A&E day after referral) Renal 8/8 Prostate 12/12 Median time (range) between referral and 1st appointment for 2WW referrals: Bladder (n=28): 9 (4 to 14) days Renal (n=9; includes a consultant referral upgraded to 2WW priority): 11 (1 to 35) days Prostate (n=12): 10 (0 to 14) days	**Comments:** The authors did not pre-specify, within the methods section, which audit criteria they were going to audit their clinical practice against. Results were presented for additional criteria (not reported here) taken form the NICE guidance Improving Outcomes in Urological Cancers. These included: for bladder cancer, 2 criteria relating to first appointment, 5 relating to appropriateness of treatment, 2 regarding waiting times, and 1 regarding MDT meetings; for renal cancer, 6 criteria relating to appropriateness of treatment, 2 regarding waiting times, and 2 regarding MDT meetings; and for prostate cancer, 1 criteria relating to first appointment, 8 relating to appropriateness of treatment, 2 regarding waiting times, and 2 regarding MDT meetings.

2WW referrals received within 24 hours: Bladder 28/28 Renal 8/8 Prostate 11/12 **Results relating to conformity of GP referral with guidelines:** No. of patients referred under the 2WW rule that had referrals that met the symptoms of the 2WW referral criteria: Bladder 28/28 Renal 8/8 Prostate 9/12 No. of patients referred using non 2WW routes that had symptoms that met the 2WW referral criteria (GP plus unmarked referrals): Bladder 20/23 (14/18) Renal 6/11 (1/3) Prostate 9/39 (9/30) - includes one patient 1st referred in 1996, before guidelines The urologist vetted the referrals and made changes to their priority where necessary: Bladder: 1 urgent was down graded to routine, 2 soons were upgraded to urgent, 4 routines were changed (2 upgraded and 2 downgraded), and 1 unmarked was graded soon. Renal: no GP referrals were changed. Prostate: No referrals were upgraded to 2WW priority. 3 routine were upgraded to urgent and 1 routine to soon. **Other results** Type of referral for bladder cancer (n=53): 28 patients were referred under the 2WW rule, 2 as urgent, 2 as soon, 10 as routine, 5 were emergency admissions, 1 was referred for follow-up, 3 by other consultants, and 2 were unmarked. Type of referral for renal cell cancer (n=19): 8 patients were referred under the 2WW rule, 2 as urgent, 1 as routine, 3 were emergency admissions, and 5 were referred by other consultants. Type of referral for prostate (n=51): 12 patients were referred under the 2WW rule, 4 as urgent, 2 as soon, 18 as routine, 5 were emergency admissions, 4 were referred by other consultants, and 6 were unmarked. The following results include changes (upgrading or downgrading) made by the urologist Median time (range) between referral and 1st appointment for urgent referrals: Bladder (n=6): 30 (14 to 147) days Renal (n=5; includes 3 A&E referrals): 39 (14 to 63) days Prostate (n=11): 49 (6 to 73) Median time (range) between referral and 1st appointment for soon referrals: Bladder (n=2): 87 (60 to 113) days Prostate (n=9): 70 (22 to 142) days Median time (range) between referral and 1st appointment for routine referrals: Bladder (n=6): 72 (15 to 131) days	It was not stated why prostate cancer was evaluated over a different time period. **Dissemination:** Not stated

Prostate (n=8): 57 (36 to 265) days Median time (range) between referral and 1st appointment for other/unmarked referrals: Bladder (n=5): 43 (4 to 50) days Renal (n=5; includes 4 consultant referrals): 31 (24 to 57) days Prostate (n=6): 55 (28 to 109) days	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 203) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Urological (testicular) **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.01.01 to 31.12.01	**Aims:** To study how patients are referred into the hospital and how long the patient journey is. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ Obtain a list of testicular cancer patients from Business Objectives. $ Find out the routes of referral for each patient. $ Calculate the length of each patient journey. **Extra outcomes (audit criterion not relating to the 2 week wait policy** $ The number of days from GP referral to the first definitive treatment should not be longer than 62 days (cancer services collaborative project). $ All patients should be treated within a month of diagnosis (cancer services collaborative project). **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 11 **Patient population:** Patients with a diagnosis of testicular cancer, who had been admitted to the Trust between 01.01.01 to 31.12.01. **Population source:** Business Objectives query was used to identify eligible patients on the computer administrative system.	**Data source:** Case notes. The notes of one patient could not be found. Date of referral and date first seen was also obtained from the patient administrative system (PAS). **How collected:** Data were extracted on to an excel spreadsheet. **How validated:** **Process of applying audit criteria:** The time taken for each patient to reach each stage was calculated using formulas in excel. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Yes **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Unclear **Tool design:** Unclear **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 2WW referrals seen within 14 days: 8/8 **Results relating to conformity of GP referral with guidelines:** **Other results** No. of patients referred via GP as a faxed urgent referral: 8/10 (only 4 were coded as a 2WW referral on the PAS)	**Comments:** The introduction and results section of the report imply that this was a criterion based audit (with the percentage meeting the following criteria being reported: no. of days between referral and 1st treatment should be < 62 days; no. of days between diagnosis and 1st treatment should be < 31 days). However the criteria/standards were not explicitly reported in the objectives and methodology of the audit. To double check the number of included patients, the Oxford Cancer Intelligence Unit (OCIU) was asked for the number of testicular cancer patients they had on their system for 2001. They could only provide the data for the first 6 months (n=7). An attempt was also made to use the Histology system but this was not feasible due to coding difficulties. There were discrepancies in the number of patients

Route of referral for remaining patients: 1 emergency and 1 via other consultant (within Trust)	identified with testicular cancer via the OCIU and the Trust's PAS, and not all 2WW referrals were being coded as QMCW. It was not stated if the patient data entered onto excel were checked for accuracy or how many were involved in the process. Time (days) between date of referral and 1st appointment was given for each patent (range 0 to 14), but it was not stated which of the patients had been referred by the GP. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 204) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Urological (testicular) **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** Not stated	**Aims:** $ To assess if the current SIGN guidelines are being adhered to with regards to early diagnosis of testicular germ cell tumour. $ To assess the time taken from referral to specialist appointment. $ To assess if preoperative investigations and management in hospital is according to the SIGN guidelines. $ To assess patient awareness/involvement in diagnosis and treatment. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 13 **Patient population:** Patients diagnosed with a testicular germ cell tumour over a four year period. Mean age of included patients was 37.7 (range 21 to 63) years. **Population source:** From the Patient Administrative System (PAS), using Focus.	**Data source:** Letters sent to GP requesting referral information and case notes. **How collected:** Data collection sheet devised using the SIGN guidelines. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Unclear **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Unclear **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Seen within 14 days, from receipt of referral: 43% Time (days) between receipt of referral and 1st appointment (by a specialist): Mean 10.5, median 5, range 0 to 44, SD 14.08. Time (days) between GP appointment and referral to hospital: Mean 4.2, median 1, range 0 to 19, SD 6.53.	**Comments:** The audit looked at adherence to the Scottish SIGN guidelines (Management of Adult Testicular Germ Cell Tumours) not the DoH guidelines, and as such examine the time from referral to specialist appointment, not the time from GP decision to refer to specialist appointment. The SIGN guidelines were identified from literature searches. The actual time frame of the audit was not reported. The author noted that some patients were seen prior to the implementation of the DoH '2ww rule'. It was not stated if data extraction sheets were piloted in advance or how many were involved in data collection. 13 patients were included in the audit, but it was not stated how many patients were identified as eligible.

Results relating to conformity of GP referral with guidelines: **Other results**	The actual audit criteria/indicators, taken from the SIGN guidelines, that were to be looked at were not reported in the methodology, but results were reported on the following criteria: $ pre operative investigation should include assay of AFP, HCG, LDH, an ultrasound of both testes and the abdomen, and a chest x-ray. $ Patients who are ill with high markers and widespread metastases should be referred for immediate chemotherapy. $ Where possible an inguinal orchidectomy should be performed. $ A testicular prosthesis should be offered to all patients. $ Where appropriate sperm storage should be offered to men who may require chemotherapy or radiotherapy. $ Following confirmation of tumour, all patients should be referred to a specialist centre for the management of testicular cancer and seen by an oncologist within 1-2 weeks. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 205) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Urological (testicular) **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.4.02 to 31.8.03	**Aims:** To ascertain the appropriateness of referrals under the 2ww rule for suspected testicular cancers. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** Reason for referral. The availability of ultrasound. If ultrasound had also been conducted by the GP.	**Sample type** Consecutive series **Sample size:** 68 **Patient population:** All patients referred under the 2ww rule for suspected testicular cancers. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics were used.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** Not reported. **Other results** 14 of 68 patient (20.5%) were found to have testicular cancers.	**Comments:** This audit was presented only in abstract form, though a fuller paper is expected to be produced shortly. The methods used are described only briefly. As such their appropriateness can not be commented upon. The audits reported some actions which they recommend following the audit but they do not appear to have reported who was responsible for these or set any timescale for their conduct. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 206) **Year:** 2003 **Institution type:** PCT **Study type:** clinical audit **Cancer site:** Brain & CNS, Breast, Children's, GI Lower, GI Upper, Gynaecological, Haematological, Head & Neck, Leukaemia, Lung, Sarcoma, Skin, Urological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** Calendar year 2002	**Aims:** $ To ensure referrals are made in accordance with DoH guidelines $ To compare age, symptoms, diagnostic rates, across the PCT and nationally $ To assess current outcomes and effectiveness of the guidelines, and to forward any findings to a national guidelines review **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 833 **Patient population:** 833 patients identified at practice level as having been 2WWR. Brain and CNS - 2 Breast - 214 Children's - 1 GI Lower - 109 GI Upper - 77 Gynaecology - 73 Haematology - 5 Head and Neck - 80 Lung - 46 Sarcoma - 5 Skin - 116 Urological - 83 Other - 12 Not Known - 10 **Population source:** GP medical records	**Data source:** GP medical records **How collected:** All 15 practices in the PCT collected data. This was forwarded to the PCT headquarters for collation in Excel. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics, charts	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Yes **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** Time from consultation with GP to referral: =< 24 h = 92%	**Comments:** The audit looked primarily at the primary care target of 24-h referral. Although appropriateness of referral was also included in the audit, results were given only for patients subsequently diagnosed with cancer. Few details of the audit conduct were given, making appraisal difficult. **Dissemination:** Report distributed to practices. Each practice supplied with a list of patients, ordered by suspected cancer site, to allow review of appropriateness of referrals.

Dx cancer: Brain & CNS: 0/2 Breast: 25/215 (12%) Children's: 0/1 GI Lower: 12/109 (11%) GI Upper: 10/77 (13%) Gynaecological: 6/73 (8%) Haematological: 3/5 (60%) Head & Neck: 4/80 (5%) Lung: 18/46 (39%) Sarcoma: 0/5 Skin: 34/116 (29%) Urological: 21/83 (25%)	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 207) **Year:** 2003 **Institution type:** PCT **Study type:** audit (non c-b) **Cancer site:** Brain & CNS, Breast, Children's, GI Lower, GI Upper, Gynaecological, Haematological, Head & Neck, Lung, Sarcoma, Skin, Urological **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.4.02 to 30.3.03.	**Aims:** Not reported **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 2985 **Patient population:** All patients referred under the 2ww rule. Breast - 706 Children's cancers - 1 Lung cancer - 142 Haematological - 14 Upper GI - 449 Lower GI - 634 Gynaecological - 242 Skin - 265 Brain and CNS - 2 Urological - 263 Head and Neck - 257 Sarcomas - 10 **Population source:** Patients were identified from copies of referral letters.	**Data source:** Data were obtained from referral letters and proformas. **How collected:** Not stated **How validated:** 10% of the data were validated by cancer leads. **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics were reported.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Yes **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** 2,310 of 2,985 referrals were in accordance with the referral guidelines. 2 of 2 (100%) referrals for suspected brain cancer were in accordance with the criteria. 512 of 706 (72.5%) referrals for suspected breast cancer were in accordance with the criteria. 1 of 1 (100%) referrals for suspected children's cancer were in accordance with the criteria. 160 of 242 (66.1%) referrals for suspected gynaecological cancer were in accordance with the criteria.	**Comments:** This audit was reported briefly. It is not possible to comment on whether the methods used were appropriate to fulfill the aims as they were not reported. The auditors do not give an indication of what the information collected was to be used. While they refer to specific problems with the referral process, they did not identify any actions to remedy these. **Dissemination:** Not stated

14 of 14 (100%) referrals for suspected haematological cancer were in accordance with the criteria. 195 of 247 (75.9%) referrals for suspected head and neck cancer were in accordance with the criteria. 452 of 634 (71.3%) referrals for suspected lower GI cancer were in accordance with the criteria. 128 of 142 (90.1%) referrals for suspected lung cancer were in accordance with the criteria. 6 of 10 (60%) referrals for suspected sarcoma were in accordance with the criteria. 211 of 265 (79.6%) referrals for suspected skin cancer were in accordance with the criteria. 383 of 449 (85.3%) referrals for suspected upper GI cancer were in accordance with the criteria. 246 of 263 (93.5%) referrals for suspected urological cancer were in accordance with the criteria. **Other results**	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 208) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Brain & CNS, Breast, GI Lower & Upper, Gynaecological, Haematological, Head & Neck, Lung, Sarcoma, Skin (melanoma), Urological **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.9.01 to 31.1.02	**Aims:** To identify areas which can be improved to aid the pathway to and through local cancer services. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To assess whether non-2WW-referral patients diagnosed with cancer experienced delays to 1st appt and diagnosis, and what proportion of all cancer patients this is. To identify delays in the patient pathway and reasons for them. To assess the speed and quality of patient information sent by Cancer Teams to GPs. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 96 **Patient population:** 94/96 patients diagnosed with a new cancer between 1.9.01 and 31.1.02 (including radiological and clinical diagnosis when a histological diagnosis has not been made). 2 sets of casenotes were not located. Patients not eligible for inclusion were: private patients, patients with a diagnosis of basal or squamous cell skin carcinoma, patients with recurrence of previously diagnosed tumours, children's cancers. Lower GI - 24 Lung - 23 Breast - 23 Gynaecology - 8 Upper GI - 7 Head and Neck - 5 Urology - 2 Sarcoma - 1 Haematology - 1 Brain - 0 Skin (melanomas) - 0 **Population source:** Hospital pathology system with the hospital PAS. This excluded patients not admitted to hospital or without a definite histological diagnosis.	**Data source:** Casenotes. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** No **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Proportion of patients seen within 2 weeks: 2ww referrals: 44/46 (96%) Urgent non-2ww referrals: 6/7 (86%) (8 patients, 1 not included in the analysis as they were admitted to another hospital prior to the first appointment)	**Comments:** Patients with brain and malignant melanoma skin cancers were eligible for this audit but none were diagnosed during the audit period. The authors also reported results relating to timeframes from first appointment to diagnosis, diagnosis

Routine referrals: 0/15

Time between date of referral to date of first appointment:
2ww referrals: median 9 days (range 0-22)
Urgent non-2ww referrals: median 8 days (range 1-174)
Routine referrals: median 43 days (range 19-128)
Other sources of referral: median 5 days (range 0-95)

Time between date of decision to refer and date referral received by hospital:
2ww referrals: median 0 days (range 0-1)
Urgent non-2ww referrals: median 2 days (range 0-7)
Routine referrals: median 4 days (range 0-10)

Site-specific data were not reported.

Results relating to conformity of GP referral with guidelines:
Patients referred as 'routine' (n) but meeting guidelines for urgent referral:
colorectal = 2/7; gynaecological = 3/4; upper GI = 1/1; sarcoma = 1/1; head and neck = 1/1; breast 0/1.

Other results
46/94 cancer patients were referred via 2ww rule, split by site as follows:
Breast: 19/23
Lower GI: 11/24
Lung: 10/23
Upper GI: 1/7
Urology: 2/2
Head and Neck: 1/5
Gynaecology: 2/8
Sarcoma: 0/1
Haematology: 0/1

Mode of referral for non-2ww referred cancer patients (n=48):
Routine = 15
Via A&E = 15
GP urgent non-2ww = 8
Other sources, such as from other hospital consultants = 10

to first treatment and decision to refer to first treatment, as well as data on the speed and quality of patient information sent to GPs.

In an appendix the authors report the following figures for 2ww referrals seen between 1.09.01 and 31.1.02:
Number of 2ww referrals (number of which were diagnosed with cancer):
Breast: 171 (19)
Lower: GI 143 (11)
Lung: 74 (10)
Skin: 63 (0)
Upper GI: 58 (1)
Urological: 52 (2)
Head and neck: 46 (1)
Gynaecological: 45 (2)
Sarcoma: 1 (0)
Total: 653 (46)

Very little methodological data were presented, therefore, the validity of the results cannot be verified.

Dissemination:
Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 209) **Year:** 2002 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Brain & CNS, Breast, GI Lower, GI Upper, Gynaecological, Haematological, Head & Neck, Lung, Sarcoma, Skin, Urological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.4.01 to 30.4.01	**Aims:** To provide an efficient and effective process for urgent referrals to the trust in line with government requirements. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To identify the appropriateness of urgent referrals. $ To assess the timeliness of requests for appointments. $ To assess GP's compliance with the referral criteria. $ To assess the time delay prior to treatment for confirmed cancers. $ To assess the communication of confirmed cancers to patients and GP's. **Extra outcomes (audit criterion not relating to the 2 week wait policy** $ There should be a maximum of 2 months from urgent GP referral to first treatment and of 1 month from diagnosis to first treatment for all cancers. $ There should be a maximum of 24 hours between the GP's decision to refer a patient and the receipt of the referral by the NHS. $ Patients should be accompanied by a relative, career or nurse when informed of their diagnosis of cancer. $ There GP should be informed of this diagnosis by the end of the following working day. **Extra outcomes (non-criterion based):** To identify the appropriateness of urgent referrals.	**Sample type** Consecutive series **Sample size:** 300 **Patient population:** All patients referred under the 2wwr for 11 of the 12 sites for which that rule applies during a one-month period. GI Lower - 73 Breast - 63 GI Upper - 31 Gynaecological - 29 Skin - 28 Urological - 27 Head & Neck - 23 Lung - 10 Sarcoma - 5 Brain - 4 Haematological - 4 Three patients were excluded as their notes were not located (1 Upper GI, 2 Lung). **Population source:** The COGNOS system was used to identify patients. The authors do not report what this system is.	**Data source:** Data were extracted from the patients' case notes, the Hospital Patient Administration System (PAS) and the electronic Clinical Imaging system. **How collected:** Data collection forms were designed for each of the categories of referral listed in the Department of Health guidelines. Data were extracted by clinical audit staff. **How validated:** Not stated **Process of applying audit criteria:** Criteria were applied by the clinical audit staff. **Statistical method (before and after studies only):** Descriptive statistics were presented. Information was additionally presented on individual salient cases.	**Involvement:** No **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Proportion of patients seen within 2 weeks of decision to refer: GI Lower – 39 of 69 (57%). (4 patients N/A) Breast – 53 of 57 (93%). (6 patients N/A) GI Upper – 6 of 30 (20%). (1 patient N/A) Skin – 16 of 27 (59%). (2 patients N/A) Gynaecological – 17 of 28 (63%). (1 patient N/A) Urological – 8 of 26 (30%). (1 patient N/A) Head and Neck – 16 of 23 (70%). (No patients N/A)	**Comments:** This appears to be a well conducted audit but the report could benefit from some additional detail describing the methods used. No information is presented about the effect the two week wait referral process had on those patients who were referred by their GP outside of the system whether they were subsequently given a confirmed diagnosis of cancer or not. It is not clear from the report if the service was provided in a dedicated clinic or those patients referred

Lung – 9 of 9 (100%). (1 patient N/A)
Sarcoma – 3 of 5 (60%). (No patients N/A)
Brain – 1 of 3 (33%). (1 patient N/A)
Haematological – 2 of 3 (67%). (1 patient N/A)

N/A = patients who had an emergency admission before they were first seen by the specialist, or who cancelled or failed to attend their apointment.

Results relating to conformity of GP referral with guidelines:
GI Lower – 40 of 73 referrals (55%).
Breast – 47 of 63 referrals (75%).
GI Upper – 24 of 31 referrals (77%).
Skin – 23 of 29 referrals (79%).
Gynaecological – 20 of 28 referrals (71%).
Urological – 24 of 27 referrals (89%).
Head and Neck – 13 of 23 referrals (57%).
Lung – 10 of 10 referrals (100%).
Sarcoma – 3 of 5 referrals (60%).
Brain – 1 of 4 referrals (25%).
Haematological – 0 of 4 referrals (0%).

Other results
Proportion of patients referred under the 2 week wait system who subsequently received a confirmed diagnosis of cancer:
GI Lower – 10 of 73 (14%).
Breast – 17 of 63 (27%).
GI Upper – 3 of 31 (10%).
Skin – 6 of 29 (21%).
Gynaecological – 3 of 28 (11%).
Urological – 5 of 27 (19%).
Head and Neck – 1 of 23 (4%).
Lung – 6 of 10 (60%).
Sarcoma – 1 of 5 (20%).
Brain – 0 of 4 (0%).
Haematological – 0 of 4 (0%).

Reasons for patients' not being seen:
GI Lower – 3 patients had their urgency status downgraded by a hospital clinician and were not seen within 2 weeks. One was subsequently found to have cancer. No reasons were given why the remainder of the patients were not seen within two weeks.
Breast – No reasons were given why some patients were not seen within two weeks.
GI Upper – No reasons were given why some patients were not seen within two weeks.
Skin – 4 patients had their urgency status downgraded by a hospital clinician and were not seen within 2 weeks. None was subsequently found to have cancer. No reasons were given why the remainder of the patients were not seen within two weeks.
Gynaecological – 5 patients had their urgency status downgraded by a hospital clinician and were not seen within 2 weeks. None was subsequently found to have cancer. No reasons were given why the remainder of the patients were not seen within two weeks.
Urological – 2 patients had their urgency status downgraded by a hospital clinician and 1 was not seen within 2 weeks. Neither was under this system were seen in the routine clinics with non-2 week wait patients.

This service was re-audited at a later date. Details of the re-audit are included in this review.(WTA 210)

Dissemination:
The audit results were circulated to:
$ The cancer lead and chief executives of local primary care organisations
$ The GP lead cancer clinicians
$ The network and health authority cancer leads
$ The regional cancer lead
$ The trust board.

subsequently found to have cancer. The authors note that in some patients' cases (numbers not given) the patient was referred for investigation by their GP and discharged to their GP's care following negative results of these investigations. Head and Neck – 5 patients had their urgency status downgraded by a hospital clinician and 4 were not seen within 2 weeks. None was subsequently found to have cancer. No reasons were given why the remainder of the patients were not seen within two weeks. Lung – Not applicable. Sarcoma – 1 patient had their urgency status downgraded by a hospital clinician and was not seen within 2 weeks. This patient was not subsequently found to have cancer. Brain – 3 patients had their urgency status downgraded by a hospital clinician and were not seen within 2 weeks. None was subsequently found to have cancer. Haematological – Not applicable.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 210) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Brain & CNS, Breast, GI Lower, GI Upper, Gynaecological, Head & Neck (incl. thyroid), Lung, Sarcoma, Skin, Urological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.02 to 30.04.02	**Aims:** To ensure that the 2WW urgent referral process has improved since a previously conducted audit, based on the recommendations and action plan advised at the time. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To identify an improvement in appropriateness of urgent cancer referrals $ To identify an improvement in timeliness of the 1st appointment $ To determine the number of patients who received a cancer diagnosis from the 2WW referrals Specific audit criteria evaluated for the first two objectives were: $ GPs need to identify patients most likely to have cancer and refer as urgent $ Down grading 2WW referrals by Trust should cease $ GP referral letter/fax should be sent as a generic referral $ GP referral should be received within 24 hours or next calendar day $ patients referred under the 2WW rule should see a specialist within 2W of GP's request of an appointment. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** Data was also collected on how many cancer patients were discussed at the MDT meeting.	**Sample type** Consecutive series **Sample size:** 375 **Patient population:** All patients referred under the 2WW rule for the month of April 2002. 15 patients were excluded, 13 because the case notes were not available and 2 upper GI referrals identified as 2WW referrals and subsequently found to be non 2WW referrals. The number of referrals for each tumour site and (in parenthesis) the number included in audit (n=362) were: Breast - 91 (87) Lower GI - 62 (62) Upper GI - 53 (48) Urological - 42 (41) Gynaecological - 37 (36) Skin - 30 (28) Lung - 25 (25) Head and Neck - 23 (22) Thyroid - 8 (8) Brain - 3 (3) Sarcoma - 1 (1) **Population source:** Urgent Referral Office (URO) database.	**Data source:** Case notes **How collected:** Data were collected using the forms from the initial audit, adapted to collect data focusing on appropriateness of referral. Completed forms were scanned on to the Formic database and exported into Excel. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Yes **Appropriateness:** No **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Yes **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Seen within 2 weeks: Breast 85/87 (98%) Lower GI 58/62 (94%) Upper GI 30/44 (68%) Urological 41/41(100%) Gynaecological 34/35 (97%)	**Comments:** This was a re-audit of the 2WW referral Guidelines for suspected cancer. The initial audit was done in April 2001 and included 297 GP 2WW referrals.(WTA 209) Whether 2WW referrals identified via the URO database were in fact 2WW referrals was verified, but it was not stated if the authors checked whether there were any routine referrals that were in fact 2WW referrals. Although one of the objectives of the audit was to look at the appropriateness of urgent

Skin 27/27 (100%) Lung 24/25 (96%) Head & neck and thyroid 29/30 (97%) Brain and sarcoma 3/4 (75%) Time (range) between referral and 1st appointment for those not seen within 2 weeks (for any cancellations/DNAs time taken from date of cancellation or DNA) : Breast: 26 to 32 days Lower GI: 19 to 24 days Upper GI: 15 to 25 days (1 cancelled initial appointment) Gynaecological: 15 days Lung: 15 days Head & neck and thyroid: 15 days Brain and sarcoma: 26 days (time from DNA appointment to be seen) GP referral received within 24 hours: Breast 65/87 (75%) Lower GI 59/62 (92%) Upper GI 34/39 (87%) Urological 40/41(98%) Gynaecological 35/36 (97%) Skin 26/27 (96%) Lung 24/25 (96%) Head & neck and thyroid 28/30 (93%) Brain and sarcoma 4/4 (100%) Time (range) taken for Trust to receive GP referral for those not received within 24 hours: Breast: 3 to 21 days Lower GI: 2 to 6 days Upper GI: 3 to 6 days Urological: 48 hours Gynaecological: 5 days Skin: 3 days Lung: 13 days Head & neck and thyroid: 2 to 3 days **Results relating to conformity of GP referral with guidelines:** Breast 67/87 (77%) Lower GI 35/61 (57%) Upper GI 34/45 (76%) Urological 34/40 (85%) Gynaecological 32/36 (89%) Skin 15/27 (56%) Lung 21/25 (84%) Head & neck and thyroid 25/30 (83%)	referrals, the audit only includes 2WW referrals, and does not assess whether there were any routine referrals that should have been referred under the 2WW rule. In relation to the first audit criteria that was evaluated, the authors do not examine an appropriate sample to be able to assess whether the GP identified all patients most likely to have cancer. **Dissemination:** Not stated

Brain and sarcoma 4/4 (100%) **Other results** Patients diagnosed with cancer; no. of cancers for referrals that did not comply with the 2WW rule: Breast 22/87 (25%); 0 Lower GI 1/60 (2%); 0 Upper GI 4/41 (10%); 1 Urological 9/40 (23%); 0 Gynaecological 3/36 (8%); 0 Skin 10/28 (36%); 4 Lung 13/25 (52%); 0 Head & neck and thyroid 5/30 (17%); 1 Brain and sarcoma 0/4 (0%) Number of referrals not compliant with the 2WW rule but considered urgent by those carrying out data extraction: Breast 3/20 Lower GI 5/26 Upper GI 4/11 Urological 1/6 Gynaecological 1/4 Skin 5/12 Lung 0/4 Head & neck and thyroid 2/5 Brain and sarcoma 0/0 6 patients whose referrals did not comply with the referral criteria were diagnosed with cancer.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 211) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Brain & CNS, Breast, GI lower, GI upper, Gynaecological, Head & Neck, Lung, Skin, Urological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.07.02 to 31.12.02	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The audit evaluated the following: $ Total delay beyond 14 days (2WW standard). $ No. of GP urgent suspected cancer referrals received by the Trust outside the 24 hour standard. $ How many routine referrals are upgraded by the consultant and how many urgent referrals are down graded. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 483 **Patient population:** GP urgent suspected cancer referrals received by the Trust between July and December 2002. **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Unclear **Attrition:** Unclear **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Referrals seen within 14 days: 450/483 Referrals not seen within 14 days (n=33): seen with 1 week - 40% Seen with > 1 week - 15 (20%) Specialties with the greatest number of delays were urology and gynaecology. 2WW Referrals not received within 24 hours:	**Comments:** This was a poorly reported audit. This audit did not report the number of patients referred for each individual site of suspected cancer. The aims and objectives were not stated, but the authors do list what they looked at during the audit. As the aims are not given and no clear inclusion criteria relating to the study population is stated, it is unclear whether the population was appropriate, e.g. the evaluation of all GP cancer suspected referrals may have been more appropriate, especially considering they evaluated the upgrade of GP referrals. It is also unclear if all patients were included in the analysis, with no exclusion e.g. owing to missing data. Data on the interval from referral to consultation are presented only in overview; information on those

77/483 Length of GP delay for those not received within 14 days: < 3 days - 32 4-6 days - 30 7-10 days - 9 10+ days - 6 **Results relating to conformity of GP referral with guidelines:** 13 GP referrals were downgraded by the consultant (specialties were breast (n=11), upper GI (n=1), and CNS (n=1)). 128 GP referrals were upgraded by the consultant (specialties were urology (n=71), gynaecology (n=48), colorectal (n=3), breast (n=1), skin (n=3), and head & neck (n=2)). **Other results**	referred under suspicion of each individual type of cancer are omitted. It was not stated how consultants made their decisions with regard to upgrading referrals, whether this was based on the 2WW referral criteria or their own clinical judgment. Although an agreed action plan was not reported, the recommendations following the audit were given. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 212) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Brain & CNS, Breast; GI lower, GI upper, Gynaecological, Head & Neck, Lung, Skin (melanoma, squamous cell, basal cell), Urological **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** Sample 1: 1.7.02 to 31.8.02, Sample 2: 1.1.02 to 30.6.02, Sample 3: 1.10.02 to 31.10.02, Sample 4: 1.12.01 to 28.2.02.	**Aims:** To identify areas of concern in the use of the 2ww system and to understand the effectiveness of the system in identifying patients with cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** GP referral guidelines were used to categorise referrals as inappropriate. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 1066 **Patient population:** The patients population consisted of four samples. Sample 1: This sample consisted of all patients referred using the 2ww system in two months. Skin - 51 Lower GI - 33 Head and Neck - 21 Gynaecology - 11 Brain - 1 Sample 2: This sample consisted of all patients referred using the 2ww system in six months. Breast - 233 Lower GI - 67 Upper GI - 38 Urology - 59 Haematology - 3 Head and Neck - 41 Gynaecology - 26 Lung - 6 Skin - 76 Others - 14 Sample 3: This sample consisted of all patients in whom a cancer was diagnosed during a one-month period. Breast - 17 Lower GI - 7 Upper GI - 3 Urology - 13 Haematology - 4	**Data source:** Sample 1: Data were obtained from the referral letter. Sample 2: Data for this sample were obtained from the histopathological database and from referral letters. Sample 3: Not stated. Sample 4: Not stated. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Sample 1: Signs and symptoms mentioned on the referral letter were compared with national guidelines. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Unclear **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

		Head and Neck - 4 Gynaecology - 5 Lung - 3 Skin - 50 Sample 4: This sample consisted of all patients referred using the 2ww system in three months. Breast - 113 Lower GI - 37 Upper GI - 23 Urology - 23 Haematology - 4 Head and Neck - 20 Gynaecology - 9 Lung - 4 Skin - 40 Others - 7 **Population source:** Sample 1: Patients were identified by means of referral letters sent to the Cancer Bureau. Sample 2: Patients were identified from the histopathological database. Sample 3: Not stated Sample 4: Patients were identified by means of referral letters sent to the Cancer Bureau.		

Results	**Comments**
Results relating to meeting the 2WW criterion: Not reported. **Results relating to conformity of GP referral with guidelines:** Skin (n = 51): Appropriate - 40; Inappropriate - 11. Lower GI (n = 33): Appropriate - 24; Inappropriate - 9. Head and Neck (n = 21):	**Comments:** Patients were categorised as having a malignancy if they were listed as having a cancer on a histopathological dataset. It is conceivable that some patients may have had a diagnosis of cancer made but no histopathological assessment. In cases of advanced disease or important co-morbidity where palliative therapy was given, it is possible that no biopsy would be conducted. This would not register on the pathology database as a malignancy. In Sample 1, the number of patients referred inappropriately was broken down by suspected diagnosis. The sum of the figures for each group do not add up to the total figures stated for either of the two months. In Sample 2, the proportion of breast cancer referrals which were subsequently found to have cancer was not reported for any of the months.

Appropriate - 18; Inappropriate - 3. Gynaecological (n = 11): Appropriate - 8; Inappropriate - 3 Brain (n = 1): Appropriate - 0; Inappropriate - 1. (These data were only calculated for Sample 1.) **Other results** Number of cancers detected (Sample 1): Skin - 4 (plus 8 basal cell carcinomas) Urological - 5 Gynaecological - 1 Breast - 1 Colorectal - 2 Upper GI - 1 Unknown - 1 Number of cancers detected (Sample 2): Skin - 15 Urological - 15 Gynaecological - 3 Breast - not reported Colorectal - 13 Upper GI - 7 Haematological - 4 Head and neck - 4 Lung - 3 Number of cancers detected (Sample 4): Skin - 10 Urological - 6 Breast - 38 Colorectal - 8 Upper GI - 5 Haematological - 3 Head and neck - 2 Lung - 3 Other - 1 Proportion of Cancers referred via the Cancer Bureau (Sample 3): Breast - 3 of 17 GI lower - 1 of 7	Few details of the process of the audit were reported. As such it is not possible to comment on the appropriateness of the methods used. **Dissemination:** Not stated

Gynaecological - 1 of 5 Haematology - 1 of 4 Head and neck - 1 of 4 Lung - 0 of 3 Skin (melanoma) - 2 of 3 Skin (squamous cell) - 2 of 6 Skin (basal cell) - 3 of 41 GI upper - 0 of 3 Urological - 4 of 13	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 213) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast, GI Lower, GI Upper, Gynaecological, Haematological, Head & Neck, Lung, Skin (melanoma, squamous cell), Urological **Audit type:** Mixed **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.7.00 to 31.12.00	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Not stated **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 6893 **Patient population:** All new cancer diagnoses (n=616, 61 of which were 2WW referrals) and all new referrals to the cancer clinics (n=6893, 349 of which were 2WW referrals). The sample of referrals incorporated all of the sample of new cancer patients. Referrals were split by site as follows: Breast - 646 Lung - 494 Haematology - 212 Upper GI - 636 Lower GI - 1334 Skin - 1448 Gynaecology - 621 Urology - 654 Head and Neck - 848 **Population source:** Histopathology + lung cancer clinical database + haematology meeting lists. Official 2WWR data from Information Department.	**Data source:** Histopathology + lung cancer clinical database + haematology meeting lists. Official 2WWR data from Information Department. **How collected:** Not stated **How validated:** Verification via Openguide (PAS). **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Yes **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Yes **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** Not stated **Reporting:** Not stated **Analysis:** No **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Confirmed cancer dx: $ 53/61 (86.9%) 2WWR were seen =< 2 w, 7 (11.5%) >2 <4 w, 1 (1.6%) seen >4 <8 w $ 166/390 (29.9%) referrals via other routes were seen =< 2 w, 79 (14.2%) >2 <4 w, 76 (13.7%) seen >4 <8 w, 68 (12.3%) >8 w Proportion of cancer patients referred as 2ww seen within 2w (Proportion of cancer patients not referred as 2wwr referrals seen within 2w): Breast - 22 of 29 (7 of 45) Lung - 4 of 4 (22 of 44) Haematology - 2 of 2 (26 of 55) Upper GI - 0 of 1 (13 of 47)	**Comments:** It is unclear whether all 6893 non-2WWR patients were being investigated for suspected cancer, since those referred for consideration of nonmalignant disease were included in this number. Data on the interval from referral to consultation were presented only for those who were later diagnosed with cancer; information on those who were found not to have cancer are omitted. Appraisal is hampered by the absence of details on, e.g. objectives; data source checking; data form validation; data collection; criteria application. See also other audits in this series.(WTA 214, 215) **Dissemination:** Not stated

Lower GI - 5 of 5 (14 of 62) Skin - 13 of 13 (25 of 165) Gynaecology - 2 of 2 (15 of 34) Urology - 2 of 2 (24 of 89) Head and Neck - 3 of 3 (10 of 14) **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** Dx cancer 61/349 (17.5%) 2WWR vs 555/6893 (8.1%) other routes	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 214) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast, GI Lower, GI Upper, Gynaecological, Haematological, Head & Neck, Lung, Skin (melanoma, squamous cell), Urological **Audit type:** Mixed **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.7.02 to 31.12.02	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Not stated **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 7740 **Patient population:** All new cancer diagnoses (n=731, 142 of which were 2WW referrals) and all new referrals to the cancer clinics (n=7740, 782 of which were 2WW referrals) during the 6 month audit period. The sample of referrals incorporated all of the sample of new cancer patients. Referrals were split by site as follows: Breast - 983 Lung - 474 Haematology - 239 Upper GI - 843 Lower GI - 1061 Skin - 1328 Gynaecology - 1193 Urology - 442 Head and Neck - 1186 **Population source:** Histopathology + lung cancer clinical database + haematology meeting lists. Official 2WWR data from Information Department.	**Data source:** Histopathology + lung cancer clinical database + haematology meeting lists. Official 2WWR data from Information Department. **How collected:** Not stated **How validated:** Verification via Openguide (PAS). **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Yes **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Yes **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** Not stated **Reporting:** Not stated **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Confirmed cancer dx: $ 132/142 (93.0%) 2WWR were seen =< 2 w, 8 (5.6%) >2 <4 w, 2 (1.4%) seen >4 <8 w $ 124/362 (34.3%) referred via other routes were seen =< 2 w, 91 (25.1%) >2 <4 w, 93 (25.7%) seen >4 <8 w, 54 (14.9%) >8 w Proportion of cancer patients referred as 2ww seen within 2w (Proportion of cancer patients not referred as 2wwr referrals seen within 2w): Breast - 45 of 47 (7 of 52) Lung - 18 of 19 (10 of 24) Haematology - 5 of 5 (21 of 50) Upper GI - 10 of 10 (10 of 46)	**Comments:** It is unclear whether all 6958 non-2WWR patients were being investigated for suspected cancer, since those referred for consideration of nonmalignant disease were included in this number. Data on the interval from referral to consultation were presented only for those who were later diagnosed with cancer; information on those who were found not to have cancer are omitted. Appraisal is hampered by the absence of details on, e.g. objectives; data source checking; data form validation; data collection; criteria application. See also other audits in this series.(WTA 213, 215) The figures shown in the flow diagram do not correspond with the figures in the table for patients diagnosed with cancer, the tabulated figures have been presented here.

Lower GI - 6 of 6 (11 of 56) Skin - 31 of 31 (47 of 214) Gynaecology - 3 of 4 (3 of 43) Urology - 5 of 11 (13 of 82) Head and Neck - 8 of 8 (2 of 18) **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** Dx cancer 142/782 (18.2%) 2WWR vs 589/6958 (8.5%) other routes	**Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 215) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast, GI Lower, GI Upper, Gynaecological, Haematological, Head & Neck, Lung, Skin (melanoma, squamous cell), Urological **Audit type:** Mixed **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.7.01 to 31.12.01	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Not stated **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 7744 **Patient population:** All new cancer diagnoses (n=596, 69 of which were 2WW referrals) and all new referrals to the cancer clinics (n=7744, 451 of which were 2WW referrals) during the 6 month audit period. The sample of referrals incorporated all of the sample of new cancer patients. Referrals were split by site as follows: Breast - 1024 Lung - 571 Haematology - 175 Upper GI - 813 Lower GI - 873 Skin - 1677 Gynaecology - 1013 Urology - 475 Head and Neck - 943 **Population source:** Histopathology + lung cancer clinical database + haematology meeting lists. Official 2WWR data from Information Department.	**Data source:** Histopathology + lung cancer clinical database + haematology meeting lists. Official 2WWR data from Information Department. **How collected:** Not stated **How validated:** Verification via Openguide (PAS). **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Yes **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Yes **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** Not stated **Reporting:** Not stated **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Confirmed cancer dx: $ 64/69 (92.7%) 2WWR were seen =< 2 w, 5 (7.3%) >2 <4 w $ 195/381 (51.2%) referred via other routes were seen =< 2 w, 65 (17.1%) >2 <4 w, 59 (15.5%) seen >4 <8 w, 62 (16.3%) >8 w Proportion of cancer patients referred as 2ww seen within 2w (Proportion of cancer patients not referred as 2wwr referrals seen within 2w): Breast - 19 of 24 (16 of 60) Lung - 8 of 8 (18 of 40) Haematology - 4 of 4 (21 of 46) Upper GI - 5 of 5 (10 of 36)	**Comments:** It is unclear whether all 7744 non-2WWR patients were being investigated for suspected cancer, since those referred for consideration of nonmalignant disease were included in this number. Data on the interval from referral to consultation were presented only for those who were later diagnosed with cancer; information on those who were found not to have cancer are omitted. Appraisal is hampered by the absence of details on, e.g. objectives; data source checking; data form validation; data collection; criteria application. See also other audits in this series.(WTA 213, 214) **Dissemination:** Not stated

Lower GI - 7 of 7 (26 of 61) Skin - 10 of 11 (48 of 164) Gynaecology - 3 of 3 (21 of 49) Urology - 4 of 5 (22 of 53) Head and Neck - 2 of 2 (13 of 17) **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** Dx cancer 69/451 (15.3%) 2WWR vs 527/7744 (6.8%) other routes	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 216) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast, GI Lower, GI Upper, Gynaecological, Haematological, Head & Neck, Lung, Sarcoma, Skin (melanoma, squamous cell), Urological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.07.01 to 31.12.01	**Aims:** To audit all 2ww referrals for suspected cancer received by the Trust. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 563 **Patient population:** 2WW referrals who attended their first outpatient appointment between 01.07.01 and 31.12.01. 405 patients were female. 27 patients were aged between 0-29 years, 64 30-39 years, 94 40-49 years, 103 50-59 years, 110 60-69 years, 96 70-79 years, and 69 were 80+. The number of referrals by specialty were: Breast - 202 Lung cancer - 47 Haematological - 3 Upper GI - 36 Lower GI - 75 Gynaecological - 66 Skin - 63 Urological - 34 Head and Neck - 36 Sarcomas - 1 **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Graphical presentation.	**Involvement:** Unclear **Motive:** No **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** No **Analysis:** Unclear **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Seen within 2 weeks (all referrals, n=563): 92% **Results relating to conformity of GP referral with guidelines:** **Other results** Final diagnosis: 108 (19%) were diagnosed with cancer, 445 (79%) as non cancer and 10 (2%) were unrecorded.	**Comments:** The audit report was only available as a power point presentation, and important information relating to methodology were missing. No clear aims/objectives were given. As the information was only presented in abbreviated form, the data were sometimes difficult to interpret, especially in terms of the patient population. It is presumed that included patients were all those referred via the 2WW system. However, one slide included the distribution of breast cancer patients that were referred as 2WW and other referrals for each month during the audit, although the numbers reported on this slide do not tally with those presented on other slides. Data on the interval from referral to consultation are presented only in overview; information on those referred under suspicion of each individual type of cancer are omitted.

No. of patients diagnosed with non-cancer/cancer by specialty (n=445/108): 165/36 breast, 57/8 gynaecological, 0/3 haematological, 31/3 head and neck, 64/9 lower GI, 23/23 lung, 1/0 sarcoma, 55/8 skin, 25/8 upper GI, and 24/10 urology.	It was not stated if any audit staff had been involved. **Dissemination:** The audit was presented to GPs that attended an event in 2002, which was organised to increase awareness of the 2WW guidelines.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 217) **Year:** 2002 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Breast, GI Lower, GI Upper, Gynaecological, Head & Neck, Lung, Skin, Urological **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.7.02 to 31.7.02	**Aims:** To use the audit findings to inform service planning and provide data for comparison with the audit report of Dec 2000. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To determine the number and percentage of 2WWR referrals during the month of July 2002. $ To determine the number and percentage of 2WWR patients referred in accordance with GP referral letter guidelines. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 362 **Patient population:** All patients referred under 2WWR in the audit timeframe. Breast - 110 Lung cancer - 18 Upper GI - 13 Lower GI - 58 Gynaecological - 27 Skin - 75 Urological - 43 Head and Neck - 18 **Population source:** Referral letters to Central Appointments Bureau.	**Data source:** Referral letters to Central Appointments Bureau. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** No **Motive:** Yes **Project plan:** Yes **Source integrity:** Unclear **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Unclear **Tool design:** Unclear **Collection validity:** Unclear **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** According to Guidelines/Total referred: 284/362 (78%) Breast: 94/110 GI Lower: 44/58 GI Upper: 12/13 Gynaecological: 16/27 (most non-guidelines referrals had only 1 episode of post menopausal bleeding, not prolonged) Head & Neck: 14/18	**Comments:** Few details of the audit conduct were given, making appraisal difficult. **Dissemination:** Not stated

Lung: 14/18 Skin: 51/75 (GPs referred new lesions or anxious patients without referring to guidelines) Urological: 37/43 **Other results** Not reported	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 218) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** audit (non c-b) **Cancer site:** Breast, GI Lower, GI Upper, Haematological, Lung **Audit type:** 2WWR **Design:** Retrospective before and after **Recruitment time frame (follow-up, where reported):** Breast: 1.4.98-30.9.98 vs 1.4.99-30.9.99 GI: 1.7.99-31.12.99 vs 1.7.00-31.12.00 Haematology: 1.4.99-30.9.99 vs 1.4.00-30.9.00 Lung: 1.4.99-30.9.99 vs 1.4.00-30.9.00	**Aims:** To determine the impact of the 2WWR on non-cancer outpatient waiting times. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 13056 **Patient population:** All relevant OP referrals in the 1st 6 mon post-2WWR compared with all OP referrals in the corresponding 6 mon of the previous year. The total numbers of referrals were as follows: Breast - 2504 GI - 8115 Haematology - 753 Lung - 1684 **Population source:** Waiting times data from Information Services	**Data source:** Waiting times data from Information Services **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics; bar charts	**Involvement:** No **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Average wait: Breast pre 2WW all referrals (n = 1190): 21 d post 2WW cancer referrals (n = 240): 11 d post 2WW non cancer referrals (n = 1074): 25 d Average wait: GI lower & upper	**Comments:** This appears to have been a very simple audit with a restricted focus. However, results were given as averages only, without ranges, and without percentages of those seen in =< 2 w. Due to differences in the methods of collection, it was not possible to separate the pre-2WW referrals into cancer and non-cancer, so the comparisons are not especially informative. **Dissemination:**

pre 2WW all referrals (n = 4040): 67 d post 2WW cancer referrals (n = 70): 14 d post 2WW non cancer referrals (n = 4005): 67 d Average wait: Haematology pre 2WW all referrals (n = 394): 32 d post 2WW cancer referrals (n = 2): 12 d post 2WW non cancer referrals (n = 357): 34 d Average wait: Lung pre 2WW all referrals (n = 833): 48 d post 2WW cancer referrals (n = 44): 7 d post 2WW non cancer referrals (n = 807): 26 d **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** Not reported	Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 219) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** audit (non c-b) **Cancer site:** Breast, GI Lower, GI Upper **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** Breast - 1.10.00 to 31.10.00 and 1.12.00 to 30.4.01 Upper and Lower GI - 1.12.00 to 30.4.01	**Aims:** The study aims appears to have been to assess the introduction of the Breast and Gastrointestinal 2ww referral system. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** None stated **Extra outcomes (non-criterion based):** $ The processes by which urgent Breast and Gastrointestinal referrals are made to a major teaching hospital. $ Efficiency of the practical response of the Breast and GI departments to government guidelines. $ Opinions of Breast and GI service users (GPs). $ Opinions of Breast and GI service providers (Consultants).	**Sample type** Consecutive series **Sample size:** 242 **Patient population:** The sample consisted of all patients referred on suspicion of one of three cancers; breast, upper GI and lower GI. Breast - 170 Upper GI - 20 Lower GI - 52 **Population source:** Out-patient monitoring lists and the electronic patient referral system.	**Data source:** Data were extracted from a departmental spreadsheet which listed details of referrals made under the 2ww rule.. **How collected:** The methods used to collect the data were unclear. **How validated:** Not Stated **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics and graphical representations were used.	**Involvement:** No **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** No **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: 88% of 170 breast cancer referrals were seen within two weeks. 65% of 50 lower GI cancer referrals were seen within two weeks. 56% of 20 upper GI cancer referrals were seen within two weeks. **Results relating to conformity of GP referral with guidelines:** Not assessed	**Comments:** Few details about how the study was performed were presented. Timeframes were presented for each result but these frequently represented periods that did not relate to the timeframe of data collection reported. **Dissemination:** Not stated

Other results Cancer Pick-up Rates: 27 of 170 (16%) urgent referrals to the breast service were subsequently found to have cancer. 9 of 52 (15%) urgent referrals to the lower GI service were subsequently found to have cancer. 4 patients were found to have colon cancer. 6 of 20 (30%) of urgent referrals to the upper GI service were subsequently found to have cancer. Method of referral: Breast - 84% were received in 24 hours, 81% used the proforma and 95% were faxed. Lower GI - 88% were received in 24 hours, 97% used the proforma and 97% were faxed. Upper GI - 92% were received in 24 hours, 94% used the proforma and 100% were faxed.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 220) **Year:** 2003 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** Breast, GI Upper, Gynaecological **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.1.2 to 31.12.02	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 1025 **Patient population:** All histologically confirmed upper GI (n=78), breast (n=182) and gynaecological (n=74) cancer patients; and all 2WW referrals for upper GI (n=232), breast (n=382) and gynaecological (n=161) cancer. The total number of included patients per cancer type were: Upper GI - 295 Breast - 510 Gynaecological - 220 **Population source:** The list of confirmed cancers were obtained from the pathology's IT manager, and the list of patients referred via the 2WW rule were obtained from the Cancer Service Manager.	**Data source:** The histopathology database and 2WW rule database. SNOMED cancer codes for searching the histopathology database were provided by three doctors. Any queries were referred to the histopathologists. **How collected:** The list of upper GI, breast and gynaecological cancers obtained from the histopathology database, and the list of referrals obtained from the 2WW rule database were ordered alphabetically and viewed through a spilt window. Each name in the 2WW rule database was cross-checked to see if it also existed in the histopathology database, and each name in the histopathology database was cross-checked against the 2WW rule database. **How validated:** **Process of applying audit criteria:** Not applicable **Statistical method (before and after studies only):** Descriptive statistics (including graphs).	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** No **Appropriateness:** Unclear **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** **Other results** 15/232 patients on the upper GI 2WW rule database went on to have a histologically confirmed cancer. 63/78 patients with upper GI cancer on the histological database were not referred via the 2WW rule. 54/382 patients on the breast 2WW rule database went on to have a histologically confirmed cancer. 128/182 patients with breast cancer on the histological database were not referred via the 2WW rule.	**Comments:** The audit report was only available as a power point presentation, and therefore only limited information on methodology was provided. Information on who was involved in the audit reported here is based on information given on the covering slide introducing the presenters. Although it was known that the lead presenter was known to be a consultant histopathologist (from information presented on another audit),(WTA 246) the specialty of the other authors was not stated. The aims and objectives of the audit were not given, and it is therefore not possible to assess the appropriateness of the study population. The authors do not report checking the accuracy of the data provided on the two databases and

15/161 patients on the gynaecological 2WW rule database went on to have a histologically confirmed cancer. 59/74 patients with gynaecological cancer on the histological database were not referred via the 2WW rule.	therefore the accuracy of the results as well as the inclusion of all relevant patients can not be assured. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 221) **Year:** 2003 **Institution type:** PCT **Study type:** clinical audit **Cancer site:** Breast, GI, Gynaecological, Haematological, Lung, Urological, Other **Audit type:** Dx cancer **Design:** Partially prospective before and after **Recruitment time frame (follow-up, where reported):** 1.2000 to 6.2000 vs 1.2001 to 6.2001	**Aims:** $ To determine the effect of the 2WWR on delays in the care pathway for patients referred with a new diagnosis of cancer. $ To provide pilot data on the patient experience of waiting between referral and treatment. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** =< 2 weeks from referral to appointment (DoH) **Extra outcomes (audit criterion not relating to the 2 week wait policy** <= 4 w from referral to treatment (DoH) **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 36 **Patient population:** Period 1: 16 patients with a new diagnosis of cancer referred prior to 2WWR Period 2: 20 patients with a new diagnosis of cancer referred via the 2WWR **Population source:** 1 General Practice serving an urban deprived population (n = 9600)	**Data source:** GP medical records and hospital letters. **How collected:** Data were extracted by a practice nurse onto a proforma. **How validated:** Queries were clarified with 1 GP, with reference to the referring GP and hospital of treatment if necessary. **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics; chi2; Fisher's exact test	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Yes **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Yes **Tool design:** Yes **Collection validity:** Unclear **TF justified:** Yes **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: 1. 38% (6/16) seen =< 14 d 2. 70% (14/20) seen =< 14 d (p = 0.05) **Results relating to conformity of GP referral with guidelines:** Not reported **Other results** <= 4 w from referral to treatment 1. 44% (7/16)	**Comments:** The report appears to have been prepared for publication. Methodological quality appears to be good, and appropriate statistical tests were used. The authors acknowledged (post hoc) that the sample was 25% of the size needed to achieve significance for time to treatment. The authors reported the number of patients diagnosed with each type of cancer but did not report the number of patients who had been referred with a suspicion of each cancer type. **Dissemination:** Journal publication?

2. 20% (4/20) p = 0.16 Number of Cancers detected: Breast: 1. 0 2. 1 GI: 1. 1 2. 8 Gynaecology: 1. 3 2. 0 Haematology: 1. 4 2. 3 Lung: 1. 4 2. 1 Urology: 1. 3 2. 2 Other: 1. 1 2. 2	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 222) **Year:** 2003 **Institution type:** Network **Study type:** clinical audit **Cancer site:** Breast, Colorectal, GI upper, Gynaecological, Lung, Skin (melanoma, squamous cell), Urological, Other **Audit type:** Mixed **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 01.04.01 to 31.03.03	**Aims:** To report the experience of the Cancer Network during the first two full years of implementation. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ Referrals were assessed as to whether they met the national criteria. $ Patients subsequently found to have a positive diagnosis with cancer were identified. $ Total number of cancers diagnosed in the hospitals over the same time frame were ascertained. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 16564 **Patient population:** All urgent referrals (n=11180) and cancers detected (n=7308; 1924 of which were urgent referrals) in the time period. Urgent referrals: Breast - 3288 Lung cancer - 810 Upper GI - 995 Lower GI - 1678 Gynaecological - 821 Skin - 1580 Urological - 1190 Other - 818 **Population source:** The number of cancers diagnosed was ascertained from the Cancer Registry. The population source for urgent referrals was not stated.	**Data source:** Cancer registry and urgent referrals. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** All urgent referrals were recorded and assessed as to whether they met the national criteria. The actual process used for assessing appropriateness was not stated. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** % urgent referrals meeting guidelines: Breast = 96.5% Lung = 99.2% Upper GI = 95.5% Colorectal = 89.3% Gynaecology = 93% Skin (excluding basal cell carcinomas) = 97.2%	**Comments:** The results of the first year of the study were presented at the British Oncological Association Annual Scientific Meeting 2003 and the abstract published, however, the full report of the full 2 year audit has been used for data extraction. The time trends in referral rates and detection rates by PCT were also reported for 2001-02 and 2002-03. The aims of the audit were very broad. No details were reported regarding the source of the population for urgent referrals. The data on cancer cases was obtained from the cancer registry, but it was not

Urology = 99.3% Other = 93.9% Total = 95.5% **Other results** Number of cancers detected/number of urgent referrals (cancers per 100 referrals): Breast = 667/3288 (20.3) Lung = 295/810 (36.4) Upper GI = 133/995 (13.4) Colorectal = 170/1678 (10.1) Gynaecology = 116/821 (14.1) Skin (excluding basal cell carcinomas) = 188/1580 (11.9) Urology = 260/1190 (21.8) Other = 95/818 (11.6) Total = 1924/11180 (17.2) Total number of cancers in time period (% of cancers detected via 2 week wait): Breast (excluding screen detected cases) = 1020 (65.4) Lung = 1013 (29.1) Upper GI = 728 (18.3) Colorectal = 863 (19.7) Gynaecology = 527 (22.0) Skin (excluding basal cell carcinomas) = 604 (31.1) Urology = 1036 (25.0) Other = 1517 (6.3) Total = 7308 (26.3)	reported whether this data source was tested for completeness and accuracy. No details were given regarding the methods of data collection and whether a validated data collection tool was used. Whilst this was a large audit representing three acute teaching hospitals in a cancer network, the lack of methodological data reported means that the results cannot be verified. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 223) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast, Colorectal, GI upper, Gynaecological, Head & Neck, Lung, Skin, Urological **Audit type:** Mixed **Design:** Unclear **Recruitment time frame (follow-up, where reported):** 01.08.02 to 31.08.02, 01.10.02 to 31.10.02 and 30.	**Aims:** To determine: $ Of those patients referred urgently under the two week waiting time standard, the proportion who were referred appropriately and the proportion referred inappropriately $ Of those patients NOT referred under the two week waiting time standard, the number who were referred inappropriately $ From eventual diagnoses of cancer, the proportion who were referred via the two week waiting time standard and the proportion who were not $ Of those patients referred under the Two Week Wait, the proportion who had an eventual diagnosis of cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 425 **Patient population:** All urgent suspected cancer referrals from 01.10.02 to 31.10.02 (n=49), all non urgent referrals to relevant consultants for a one week period commencing 30.09.02 (n=207), all new cancer diagnoses from 01.08.02 to 31.08.02 for which there was a pathway co-ordinator; breast, lung, urology, head and neck, upper GI, colorectal and gynaecological (n=169). Breast - 104 Lung - 15 Urology - 54 Head and neck - 86 Upper GI - 48 Colorectal - 57 Gynae - 57 Skin - 4 **Population source:** Not stated	**Data source:** Urgent referrals: referrals, WLCN forms and letters. Histopathology results, inpatient results or patients' medical notes were also obtained. Non urgent referrals: referral letter. Patients with a new diagnosis of cancer: data source not stated for diagnosis, two week wait database was used to check whether referral was for urgent suspected cancer. **How collected:** Urgent referrals: Cancer Referral Manager agreed audit proforma, based on guidelines, with lead consultants then prospectively audited the content of referral against network guidelines using the agreed audit proforma. Non urgent referrals: Pathway Co-ordinators audited content of referral letter against network guidelines, using the same audit proforma as described above. Patients with a new diagnosis of cancer: Pathway Co-ordinators obtained all new cancer diagnoses and checked on the two week wait database whether the referral was for urgent suspected cancer. **How validated:** **Process of applying audit criteria:** Urgent referrals: Cancer Referral Manager agreed audit proforma, based on guidelines, with lead consultants then prospectively audited the content of referral against network guidelines using the agreed audit proforma. Non urgent referrals: Pathway Co-ordinators audited content of referral letter against network guidelines, using the same audit proforma as described above. Patients with a new diagnosis of cancer: Pathway Co-ordinators obtained all new cancer diagnoses and checked on the two week	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Yes **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** No

			wait database whether the referral was for urgent suspected cancer. **Statistical method (before and after studies only):** Descriptive statistics.	

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** Urgent 2WW referrals: Breast: appropriate = 21, inappropriate = 2, total = 23 Lung: appropriate = 0, inappropriate = 0, total = 0 Urology: appropriate = 1, inappropriate = 1, total = 2 Head and neck: appropriate = 0, inappropriate = 1, total = 1 Upper GI: appropriate = 4, inappropriate = 0, total = 4 Colorectal: appropriate = 8, inappropriate = 2, total = 10 Gynaecology: appropriate = 4, inappropriate = 1, total = 5 Skin: appropriate = 3, inappropriate = 1, total = 4 Total appropriate = 41, total inappropriate = 8 Non urgent referrals: Breast: appropriate = 20, inappropriate = 10, total = 30 Lung: appropriate = 4, inappropriate = 2, total = 6 Urology: appropriate = 34, inappropriate = 2, total = 36 Head and neck: appropriate = 38, inappropriate = 8, total = 46 Upper GI: appropriate = 21, inappropriate = 2, total = 23 Colorectal: appropriate = 32, inappropriate = 3, total = 35 Gynaecology: appropriate = 31, inappropriate = 0, total = 31 Total appropriate = 180, total inappropriate = 27 **Other results** Type of referral by cancer diagnosis: Breast: 2 referred via 2WW, 49 not referred via 2WW, total = 51 Lung: 0 referred via 2WW, 9 not referred via 2WW, total = 9 Head and neck: 0 referred via 2WW, 39 not referred via 2WW, total = 39 Urology: 0 referred via 2WW, 16 not referred via 2WW, total = 16 Upper GI: 1 referred via 2WW, 20 not referred via 2WW, total = 21 Colorectal: 0 referred via 2WW, 12 not referred via 2WW, total = 12 Gynaecology: 0 referred via 2WW, 21 not referred via 2WW, total = 21 Total: 3 referred via 2WW, 166 not referred via 2WW, total = 169	**Comments:** This audit presents relevant data for assessing the appropriateness of 2WW referrals and non urgent referrals and the effectiveness of the guideline in identifying eventual cancer diagnoses. Overall, the audit appears to have been well designed, conducted and reported and appears to present valid results and conclusions. However, for urgent breast cancer referrals, the appropriateness of the referral and eventual diagnosis of cancer were only presented for 23 patients, the authors stated that there were 24 urgent breast cancer referrals, therefore, not all patients were accounted for. Further methodological details would have been useful in assessing the validity of the study, such as whether the audit proforma was piloted, whether the data sources were assessed for completeness and/or accuracy and what the source of the population was. The number of lung cancers reported was greater than the number of patients reported as being referred on suspicion of lung cancer. **Dissemination:** Not stated

2WW patients' outcome: Breast: 4 cancer diagnoses, 19 non-cancer diagnoses, total = 23 Lung: 0 cancer diagnoses, 0 non-cancer diagnoses, total = 0 Urology: 1 cancer diagnosis, 1 non-cancer diagnosis, total = 2 Head and neck: 0 cancer diagnoses, 1 non-cancer diagnosis, total = 1 Upper GI: 0 cancer diagnoses, 4 non-cancer diagnoses, total = 4 Colorectal: 1 cancer diagnosis, 9 non-cancer diagnoses, total = 10 Gynaecology: 1 cancer diagnosis, 4 non-cancer diagnoses, total = 5 Skin: 1 cancer diagnosis, 3 non-cancer diagnoses, total = 4 Total: 8 cancer diagnoses, 41 non-cancer diagnoses, total = 49	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 224) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast, Children's, Leukaemia (acute), Urological (testicular) **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.01.01 to 31.03.01 (Follow up date not stated)	**Aims:** To determine the hospital trust's performance against the following standards for January to March 2001 inclusive. $ Suspected cancers should be referred on an urgent 14 day referral proforma. $ All patients should be treated within 1 month of diagnosis (breast only) $ All patients should be treated within 1 month of urgent GP referral (paediatric cancer, testicular cancer and leukaemia only). **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Suspected cancers should be referred on an urgent 14 day referral proforma. **Extra outcomes (audit criterion not relating to the 2 week wait policy** All patients should be treated within 1 month of diagnosis (breast only). All patients should be treated within 1 month of urgent GP referral (paediatric cancer, testicular cancer and leukaemia only). **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 56 **Patient population:** $ 95 patients diagnosed with breast cancer between 01.01.01 and 31.03.01 were identified, the notes for 72 were reviewed (23 not found). Using the guidelines set out in the document a further 23 patients were excluded, giving a final sample of 49 breast cancer patients (29 = 2WW referral, 6 = routine GP referral, 6 = screening, 2 = other referral, 6 = no information). $ 5 patients diagnosed with testicular cancer between 01.01.01 and 31.03.01 were identified. Using the guidelines set out in the document 2 patients were excluded, giving a final sample of 3 testicular cancer patients (2 = 2WW referral, 1 = no information). $ 3 patients diagnosed with paediatric cancer between 01.01.01 and 31.03.01 were identified and included (2 = 2WW referral, 1 = emergency referral). $ 3 patients diagnosed with acute leukaemia between 01.01.01 and 31.03.01 were identified, 2 patients died before having treatment, therefore, 1 patient was included (emergency referral). As such, the total number of patients included in this audit are: Breast - 49 Children's - 3 Haematology - 1 Urology - 3 **Population source:** Breast and testicular cancer patients were identified from the Laboratory Management System. Paediatric patients were identified by clinicians and from HISS. Acute leukaemia patients were identified by clinicians.	**Data source:** casenotes and HISS. **How collected:** Data were collected by the Clinical Audit Department using an audit form. **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** **Other results** Number of patients (where data available) referred on an urgent 14 day referral proforma: breast = 29/49 paediatric = 2/3 testicular = 2/3 acute leukaemia = 0/1 Number of breast cancer patients (where data available) treated within 1 month (31 days) of diagnosis = 17/27, 5/27 were treated >60 days after diagnosis. All paediatric and testicular cancer patients were treated within 1 month of urgent GP referral. 44/47 breast cancer patients and all paediatric, testicular and acute leukaemia cancer patients were treated within 1 month of diagnosis.	**Comments:** This audit collected relevant information using a detailed audit proforma, the results were well presented, however, no conclusions have been drawn from the results, the only action plan reported was the dissemination of results and no plans to re-audit appear to have been made. The main flaw in this audit is the possibility that the small sample may have been biased and unrepresentative because a high proportion of eligible patients' notes were not found. A high proportion of patients were excluded 'using the guidelines set out in the document' (no further explanation given) and the source used for identifying paediatric cancer and leukaemia patients may not have been unbiased. **Dissemination:** Results to be forwarded to the cancer network.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 225) **Year:** 2003 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Breast, Gynaecological, Head and Neck, Lower GI, Lung, Upper GI, Urological **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 01.09.02 to 28.02.03 (no follow-up of patients)	**Aims:** Audit of 2WW rule referrals: To assess whether 2WW rule referrals made by GPs are appropriate in indicating the need for a 2WW rule appointment (through referral criteria and content of information given) and to identify reasons why 2WW rule referrals may be inappropriate. Audit of non-2WW rule referrals: To identify reasons why patients are not referred under the 2WW rule when the hospital consultant considers this is necessary based on the letter of referral. To provide feedback to GPs in an appropriate manner. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To assess whether 2WW rule referrals made by GPs are appropriate in indicating the need for a 2WW rule appointment (through referral criteria and content of information given) and to identify reasons why 2WW rule referrals may be inappropriate. To identify reasons why patients are not referred under the 2WW rule when the hospital consultant considers this is necessary based on the letter of referral. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 367 **Patient population:** 301 (40%) of the 749 patients referred under the 2WW rule during the audit timescale and 66 patients of the undetermined number of patients referred during the audit timescale, not under the 2WW rule. The inclusion criteria were all patients referred to the named specialties under the 2WW rule and all new patients referred to the named specialties routinely or urgently but not under the 2WW rule. Breast - 146 Gynaecology - 11 Haematology - 3 Head and Neck - 27 Lower GI - 24 Lung - 16 Upper GI - 45 Urology - 29 **Population source:** Not stated.	**Data source:** Audit proforma. **How collected:** Audit proforma was completed by the consultant or appropriate deputy with clinical expertise (e.g. SpR, CNS). For patients referred under the 2WW rule it was suggested that the first part was completed prior to seeing the patient, on the basis of the referral alone, and the second part be completed after having seen the patient. For patients not referred under the 2WW rule the proforma was completed on the basis of the referral and/or after seeing the patient (unclear whether the form was completed based on both referral and consultation or one or other). **How validated:** **Process of applying audit criteria:** The consultant or appropriate deputy with clinical expertise (e.g. SpR, CNS) reviewed each 2WW rule referred to their department to determine whether the referral would indicate that the patient should be seen within 2 w and whether, after seeing the patient, the consultant feels that patient's symptoms would indicate that the patient should be seen within 2 w. For non-2WW referrals the consultant or appropriate deputy decided whether the patient should have been referred by the GP as a 2WW rule referrals on the basis of the referral letter and/or after seeing the patient (unclear whether based on both or one of these). **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Yes **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments

Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** 2WW referrals: $ 106/301 were deemed inappropriate based on the referral letter, 4 of which were later deemed appropriate on seeing the patient. $ 154/301 were deemed inappropriate based on seeing the patient. $ Of those deemed appropriate on reading the referral letter (195), 52 were considered inappropriate on seeing the patient. $ Most common reasons why referrals were deemed inappropriate were: specific symptoms not suggestive of cancer, age of patient, no suspicion of cancer in referral letter, other diagnosis suspected/confirmed. Non-2WW referrals: $ 7/66 referrals were deemed inappropriate based on the referral letter (should have been 2WW), all still met the 2WW criteria after seeing the patient. $ Of those deemed appropriate on reading the referral letter (59), 4 were considered inappropriate on seeing the patient. $ Most common reasons why referrals were deemed inappropriate were: specific symptoms suggestive of cancer, strong family history. $ The response rate was too low for results to be significant. **Other results**	**Comments:** Whilst this study was reasonably well designed and reported, the major flaw that the audit proforma was not completed for all referrals received during the study period significantly biases the findings, as described below. Consultants were asked to complete the proforma for all 2WW rule referrals they deemed inappropriate, it would then be assumed that all forms not returned were appropriate referrals. However, a large number of forms completed were deemed appropriate, indicating that consultants completing forms did not follow the above assumption. Therefore all forms completed, 301 of 749 referrals (40%), were used as the basis for determining the percentage of inappropriateness. This may be an invalid assumption which potentially biases the results towards a higher proportion of referrals being classified as inappropriate. The fact that only 40% 2WW rule referrals had an audit proforma completed may have resulted in a biased and unrepresentative sample. 66 forms were completed for non-2WW rule referrals. The authors did not report the total number of patients referred with suspicion of each type of cancer in this group. They stated that the total number of new patients seen could not be determined and as such, this sample may also have been biased and unrepresentative. The authors do not state what source was used to identify patients, however it appears that the 2WW rule referral letter was used to identify 2WW rule patients. Consultants were given easy access to copies of the audit proforma in the clinic area for non-2WW rule patients referred to their specialty. **Dissemination:** Action plan was to present results at the next Cancer Services Centre meeting, ask clinicians for their views on how to feed back results to GPs, give feedback to GPs.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 226) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast, GI Lower, GI Upper, Gynaecological, Haematological, Head & Neck, Lung, Urological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.07.01 to 31.12.01	**Aims:** To assess the GP's referral practice via the urgent referrals fax line to see if they are in accordance with the DoH suspected cancer referral guidelines for each cancer site. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To ensure all suspected cancer patents are seen at a time that best improves the quality of care and the whole patient's journey. $ To ensure all suspected cancer referrals are allocated an appointment with a specialist within 2 weeks of the decision to refer by the GP. $ To improve the accuracy of the information supplied on the suspected cancer referral proforma. $ To assist in the reduction of the waiting time for non-urgent referrals. $ To assist in the reduction of patients diagnosed with a cancer following a non-urgent referral. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 238 **Patient population:** Cancer patients referred via the urgent fax line between July and December 2001 (total number not stated). Only patients with available case notes were included in the analyses. The number of patients with each cancer type were: Breast - 50 Lung cancer - 19 Haematological - 3 Upper GI - 46 Lower GI - 50 Gynaecological - 29 Urological - 28 Head and Neck - 13 **Population source:** Database that included a list of dedicated fax line referrals.	**Data source:** Case notes. **How collected:** Pre-defined data collection sheet. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Unclear **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: **Results relating to conformity of GP referral with guidelines:** Symptoms on proforma in line with the guidelines: Breast: 48/50 Upper GI: 40/46 Lower GI: 31/50 Gynaecology: 19/29 Urology: 25/28 H& N: 10/13	**Comments:** The authors reported that the audit looked at the following nine cancer sites: breast, upper GI, lower GI, colorectal, gynaecology, skin, urology, head and Neck, lung and haematology. However, no results were presented for skin cancer or colorectal cancer (which would come under the category lower GI). The results of each cancer site were reported separately. Only percentage values were reported for some outcomes in some cancer sites (here we have not made any attempt to calculate the actual numbers and therefore only the percentage values are presented). It was not stated how many eligible patients were excluded because their case notes were unobtainable.

Lung: 19/19 Haematology: 3/3 **Other results** Did not have malignancy: Breast: 44/50 Upper GI: 46/46 Lower GI: 88% (6% not known, 6% yes) - referral appropriate for n=15 without malignancy Gynaecology: 25/29 (3 with malignancy, 1 patient cancelled appointment and was transferred to another hospital for treatment) Urology: 79% (20 referrals, for those without malignancy, were appropriate) H&N: 12/13 (outcome not available for 1 patient (cancelled appointment, too ill to attend)). Lung: 84% Haematology: 3/3 Symptoms described by patients at clinic matching those identified on GP referral: Breast: 39/50 Upper GI: 45/46 Lower GI: 68% (28% no and 8% excluded) Gynaecology: 23/29 (5 did not match, 1 patient cancelled appointment and was transferred to another hospital for treatment) Urology: 24/28 H&N: 11/13 Lung: 18/19 Haematology: 3/3 Referral was considered appropriate: Breast: 19/50 Upper GI: 39/46 Lower GI: 36% (62% no and 2% not known) Gynaecology: 19/29 (9 inappropriate, 1 patient cancelled appointment and was transferred to another hospital for treatment) Urology: 25/28 H&N: 8/13 (4 inappropriate, 1 not recorded) Lung: 19/19 Haematology: 3/3	It was not clearly stated how the referrals were assessed for appropriateness/inappropriateness, although it was stated that inappropriate referrals were largely due to the fact that although patients did have the correct type of symptoms, they were not to the degree that warranted referral under the 2WW rule. **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 227) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Breast, GI Lower, GI Upper, Gynaecological, Haematological, Lung, Urological **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.09.01 to 31.12.01	**Aims:** To improve pathway to and through local cancer services. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ To assess whether patients diagnosed with cancer, not referred urgently under the '2WW rule', are subject to delays in their 1st appointment and diagnosis. $ To assess extent of problem, i.e. how many patients does this involve within given time period. $ To identify areas in patient pathway which contribute to delays and reason why. $ Assess areas where data capturing can be improved. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 260 **Patient population:** Patients newly diagnosed with cancer between 01.09.01 and 31.12.01. The case notes were available for 188/260. Patients diagnosed with basal cell and squamous cell skin cancers were then excluded. 87 patients were included in the analyses. The mean age was 61 (range 21 to 88) years. Type of tumours diagnosed were: Breast - 23 Lung cancer - 4 Haematological - 1 Upper GI - 13 Lower GI - 16 Gynaecological - 16 Urological - 14 **Population source:** Pathology records and patient Administrative Systems (PASs)	**Data source:** Case notes. **How collected:** data were collected using a pre-defined data collection sheet and then analysed using Access databases and Excel spread sheets. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Unclear **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Yes

Results	Comments

Results relating to meeting the 2WW criterion:
GP urgent - 14 day referrals seen within 14 days:
23/24 (1 had been offered appointment within 14 days but cancelled)
 	
Time (days) to 1st appointment for GP urgent - 14 day referrals (n=24):
Mean 10, median 8,9, range 3 to 36, SD 6.59
Patient that waited 36 days - cancelled 1st appointment, 2nd offered 1 month later.
 	
Time (days) to 1st appointment for GP urgent - not 14 day referrals (n=13):
Mean 35, median 30, range 7 to 81, SD 23.2
	Comments:
	The author reported in their methods that they were evaluating adherence to the DoH guidelines.
	
	It was not stated how many eligible patients (that did not have basal cell or squamous cell skin cancer) were excluded because their case notes were unobtainable.
	
	The results on the following additional outcomes were reported:
	$ waiting time from receipt of GP referral to diagnosis (according to referral type).
	$ waiting time from referral to treatment (according to referral type).
	$ Time to diagnosis for A&E patients

Time (days) to 1st appointment for GP routine referrals (n=24, data not recorded for 1 patient): Mean 44, median 38,39, range 10 to 150, SD 32.4 **Results relating to conformity of GP referral with guidelines:** Method of referral for patients with presenting symptoms that were in accordance with the guidelines urgent referral criteria (n=37): 24 GP urgent - 14 days 3 GP urgent - not 14 days 7 other (including Breast Screening referrals and other hospital consultants) **Other results** Source of referral: 25 GP routine 24 GP urgent - 14 days 13 GP urgent - not 14 days 12 A&E 13 other	$ Time to treatment for A&E patients $ Reason for delay to 1st appointment for 2 patients referred as GP routine (time was 150 and 90 days) and delay to diagnosis for 3 patients (routine pathway). $ Type, speed and quality of information given to GPs **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 228) **Year:** 2002 **Institution type:** Network **Study type:** clinical audit **Cancer site:** Breast, GI Lower, Gynaecological, Lung, Skin, Urological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.2.02 to 31.4.02	**Aims:** To identify current GP referral rates, with the particular aim of identifying PCTs with high referral rates not conforming to guidelines. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** $ Use of designated referrals office $ Method used to send referral to hospital $ Format of referral	**Sample type** Consecutive series **Sample size:** 579 **Patient population:** 579 referrals were received in the time frame, of which 476 were audited. Breast - 261 Lower GI - 77 Gynaecology - 33 Lung - 30 Skin - 64 Urology - 48 **Population source:** Referral letters	**Data source:** GP referral letters **How collected:** Referral letters were retrieved from the relevant departments and data entered into an Access database. **How validated:** Not stated **Process of applying audit criteria:** Referral letters were matched with referral guidelines for the relevant cancer site. **Statistical method (before and after studies only):** Descriptive statistics, bar graphs	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** No **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** 91/476 (19.1%) did not meet criteria: Breast = 26%; GI Lower = 9%; Gynaecological = 21%; Lung =3%; Skin = 11%; Urological = 17% **Other results** Total Dx Ca = 80.25%	**Comments:** Few details of the audit conduct were given, making appraisal difficult. The apparently high attrition rate was owing entirely to the lack of a cancer referrals office at one of the included hospitals. Letters went straight to the relevant department, and were difficult to retrieve. This hospital introduced a central cancer referrals office on 4.11.02. The total number of referrals audited given in the report was less than the total number of referrals listed by site in the report. **Dissemination:**

	Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 229) **Year:** 2002 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Brain & CNS, Breast, GI lower; GI upper, Gynaecological, Haematological, Head & Neck, Lung, Opthalmological, Skin (melanoma, squamous cell), Urological, Other **Audit type:** 2WWR **Design:** Not stated **Recruitment time frame (follow-up, where reported):** 1.4.00 to 30.9.02	**Aims:** To ascertain if the referral guidelines for patients with suspected lung cancer were being adhered to. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Standards: $ Greater than 80% of faxed referrals should contain a reference to one of the agreed referral criteria appropriate for the diagnostic category. $ The remaining referrals should have a specified clinical reason for referral. **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 1627 **Patient population:** All patients referred under the 2ww rule during the audit period. The population consisted of the following: Breast - 243 GI lower - 53 GI upper - 151 GI upper and lower - 3 Skin (melanoma, squamous cell) - 309 Urological - 241 Gynaecological - 128 Lung - 231 Head and neck - 160 (Including 159 ENT referrals and 1 Maxillofacial referral) Haematological - 8 Brain and CNS - 9 Ophthalmology - 4 Site not stated - 87 **Population source:** Not stated	**Data source:** Audit proformas returned to the Evaluation, Audit and Research Department. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics were provided.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** No **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** N/a **Reporting:** Unclear **Analysis:** Yes **Attrition:** No **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** Lung: Referrals meeting the criteria and were deemed clinically appropriate – 176 (76.2%) Referrals not meeting the criteria but were deemed clinically appropriate – 2 (0.9%) Referrals meeting the criteria but were deemed clinically inappropriate – 11 (4.7%) Referrals not meeting the criteria and were deemed clinically inappropriate – 37 (16%)	**Comments:** It is not clear from the report if clinical staff were involved in planning the audit or analysing its results. The audit report contained a specific aim to investigate if referral guidelines for patients with suspected lung cancer were being adhered to. However, the audit also assessed referrals made for suspected breast, GI, skin, urological, gynaecological, CNS and Brain, ENT, ophthalmological, haematological and maxillofacial cancers. This disparity was not explained. This audit has been reviewed with the assumption that similar methods were used to audit other diagnostic categories as were used to investigate lung cancer.

Appropriateness was not documented for 5 patients (2.2%). Breast: Referrals meeting the criteria and were deemed clinically appropriate – 204 (84%) Referrals not meeting the criteria but were deemed clinically appropriate – 10 (4.1%) Referrals meeting the criteria but were deemed clinically inappropriate – 11 (4.5%) Referrals not meeting the criteria and were deemed clinically inappropriate – 12 (4.9%) Appropriateness was not documented for 6 patients (2.5%). GI lower: Referrals meeting the criteria and were deemed clinically appropriate – 40 (75.4%) Referrals not meeting the criteria but were deemed clinically appropriate – 1 (1.9%) Referrals not meeting the criteria and were deemed clinically inappropriate – 10 (18.9%) Appropriateness was not documented for 2 patients (3.8%). GI upper: Referrals meeting the criteria and were deemed clinically appropriate – 125 (82.8%) Referrals not meeting the criteria but were deemed clinically appropriate – 1 (0.65%) Referrals meeting the criteria but were deemed clinically inappropriate – 3 (2%) Referrals not meeting the criteria and were deemed clinically inappropriate – 21 (13.9%) One patient failed to attend for appointment. GI upper and lower: Referrals meeting the criteria and were deemed clinically appropriate – 3 (100%) Skin: Referrals meeting the criteria and were deemed clinically appropriate – 155 (50.2%) Referrals not meeting the criteria but were deemed clinically appropriate – 1 (0.3%) Referrals meeting the criteria but were deemed clinically inappropriate – 5 (1.6%) Referrals not meeting the criteria and were deemed clinically inappropriate – 115 (37.2%) Appropriateness and compatibility with guidelines was not fully documented for 29 patients (9.2%). Four patients (1.3%) did not attend for appointment. Urological: Referrals meeting the criteria and were deemed clinically appropriate – 164 (68%) Referrals not meeting the criteria and were deemed clinically inappropriate – 19 (7.9%) Appropriateness was not documented for 57 patients (23.7%). One patient did not attend for appointment on a number of occasions. Gynaecological: Referrals meeting the criteria and were deemed clinically appropriate – 103 (80.5%)	While reasons for inappropriate referrals were listed for some patients, it is not clear why the appropriateness of referrals and/or the compliance with guidelines were not documented for others. **Dissemination:** Not stated

Referrals meeting the criteria but were deemed clinically inappropriate – 13 (10.15%) Referrals not meeting the criteria and were deemed clinically inappropriate – 8 (6.25%) Appropriateness and compatibility with guidelines was not documented for 4 patients (2.5%). Head and neck (ENT): Referrals meeting the criteria and were deemed clinically appropriate – 112 (70.4%) Referrals not meeting the criteria but were deemed clinically appropriate – 0 Referrals meeting the criteria but were deemed clinically inappropriate – 13 (8.2%) Referrals not meeting the criteria and were deemed clinically inappropriate – 34 (21.4%) Head and neck (Maxillofacial Surgery): The single referral met the criteria but were deemed clinically inappropriate. Haematological: Referrals meeting the criteria and were deemed clinically appropriate – 6 (75%) Referrals not meeting the criteria and were deemed clinically inappropriate – 2 (25%) Brain and CNS: Referrals meeting the criteria and were deemed clinically appropriate – 7 (77.8%) Referrals not meeting the criteria and were deemed clinically inappropriate – 2 (22.2%) Ophthalmology: Referrals meeting the criteria and were deemed clinically appropriate – 2 (50%) Referrals not meeting the criteria and were deemed clinically inappropriate – 2 (50%) Site not stated: Referrals meeting the criteria and were deemed clinically appropriate – 58 (66.7%) Referrals not meeting the criteria and were deemed clinically inappropriate – 10 (11.4%) Referrals meeting the criteria and were deemed clinically inappropriate – 1 (1.14%) Appropriateness was not documented for 17 patients (19.5%). One patient did not attend for appointment. **Other results**	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 230) **Year:** 2003 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Brain & CNS, Breast, Children's, GI lower; GI upper, Gynaecological, Haematological, Head & Neck, Lung, Opthalmological, Sarcoma, Skin (melanoma, squamous cell), Urological, Other **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 4.7.02 to 30.6.03	**Aims:** To conduct an audit of all referrals to identify those which were inappropriate. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The objective of the audit was to assess the appropriateness of referrals made under the 2ww system in comparison with the referrals criteria of the department of health's Referral Guidelines for Suspected Cancers and to assess if patients with cancer had symptoms listed in those guidelines. **Extra outcomes (audit criterion not relating to the 2 week wait policy** None stated **Extra outcomes (non-criterion based):** None stated	**Sample type** Consecutive series **Sample size:** 1133 **Patient population:** The population consisted of all patients referred to the service during one year under the 2ww system. Breast - 269 GI upper - 143 GI lower - 183 Urological - 90 Gynaecological - 118 Head and neck - 92 Skin - 126 Lung - 85 Hematological - 10 Brain and CNS - 2 Sarcoma - 6 Children's - 1 Other - 8 **Population source:** Consultants were asked to report to a co-ordinator any referrals they deemed to be inappropriate.	**Data source:** Referral letters. **How collected:** Not stated **How validated:** Not stated **Process of applying audit criteria:** At the end of the period, the cancer services co-ordinator collated the data by reviewing the patient case notes and referral letter of each patient. **Statistical method (before and after studies only):** Descriptive statistics were used, with most data being presented in tables.	**Involvement:** Not stated **Motive:** Yes **Project plan:** No **Source integrity:** No **Appropriateness:** Yes **Inclusion criteria:** Unclear **Source check:** No **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Yes **Reporting:** No **Analysis:** Yes **Attrition:** No **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Not reported. **Results relating to conformity of GP referral with guidelines:** Number of Inappropriate Referrals: Breast - 4/269 (+ 1 possible + 1 probable) GI upper - 5/143 (+ 1 probable) GI lower - 2/183	**Comments:** Key information was omitted from the report. No demographic details were provided. The level of involvement of important stakeholders was not detailed. The methods used to identify the referrals of interest were sketchily reported at best. For the examination of appropriateness, only those referrals considered inappropriate by consultants were examined. The methods by which this was done were not given. No check was made that the remaining referrals were indeed appropriate. The methods used to collect information and make decisions once those details were collected were not listed. It is not clear where some of the data were sourced; not all of the information presented could have been

Urological - 3/90 Gynaecological - 0/118 Head and neck - 1/92 Skin - 6/126 Lung - 1/85 Hematological - 1/10 (+ 1 probable) Brain and CNS - 0/2 Sarcoma - 0/6 Children's - 0/1 Other - 0/8 In addition, from 50 referrals deemed inappropriate by clinicians, 24 referrals were found to have been in accordance with the DoH guidelines. **Other results** None stated	found in referral letters. The data presented represent 1,133 patients. There were 123 missing cases (referred for consideration of a possible upper gastrointestinal malignancy). The authors reported that several consultants did not categorise any referral as inappropriate and that these included all the consultants in some specialties. The authors were not able to specify if this was because these consultants and specialties received no inappropriate referrals or if they chose not to take part in the audit. In addition, it proved difficult to asses open access endoscopy referrals as the referral form did not reflect the 2ww criteria. **Dissemination:** The audit was disseminated to the trust consultants and to local PCTs.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 231) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Brain & CNS, Breast, Children's, GI lower; GI upper, Gynaecological, Haematological, Head & Neck, Lung, Opthalmological, Sarcoma, Skin (melanoma, squamous cell), Urological, Other **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 1.4.00 to 31.3.01	**Aims:** The authors did not state their aims but these appear to have been to assess the impact of the introduction of the two week wait system on a district general hospital based on referrals received from one PCT. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Not stated **Extra outcomes (audit criterion not relating to the 2 week wait policy** None stated **Extra outcomes (non-criterion based):** The hospital consultant graded whether a referral should have been made (irrespective of the national guidelines concerning what type of referral was most appropriate). No criteria were given as to how consultants reached their decision.	**Sample type** Consecutive series **Sample size:** 617 **Patient population:** The sample included all patients referred to a DGH from one PCG. Breast - 217 GI lower - 111 Skin - 46 GI upper - 52 Urological - 41 Gynaecological - 49 Lung - 37 Head and neck - 42 Hematological - 5 Sarcoma - 3 Children's - 5 Brain - 3 Other - 6 **Population source:** Clinicians were provided with a form to record all patients they saw in their clinics during the relevant period.	**Data source:** A proforma was provided for consultant staff to provide details of patients they saw. **How collected:** Proformas were returned to a two-week wait co-ordinator. **How validated:** Not stated **Process of applying audit criteria:** Consultant staff applied the criteria when they saw the patient in their clinic. **Statistical method (before and after studies only):** Data were presented in tabular format with a brief overview.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** No **Attrition:** Yes **Re-audit:** Unclear

Results	Comments
Results relating to meeting the 2WW criterion: Not stated **Results relating to conformity of GP referral with guidelines:** **Other results** Proportion of referrals which the clinician assessed as appropriate: Brain: 100% of 3	**Comments:** No information as to the demography of the patients referred was provided. Details of the methods used and examples of the forms used were given in an attached document.(WTA 243) This gave some details but important information on the process of the audit was omitted. Information was also presented for each individual General Practice, but these are not reproduced here. Audit #402 uses the same methodology as this audit, but is of a different PCT. The audit of another

Breast: 79% of 214 Skin: 61% of 46 Gynae: 84% of 49 Haematology: 80% of 5 Head and neck: 76% of 42 Lower GI: 62% of 111 Lung: 92% of 37 Other: 67% of 6 Paediatric: 60% of 5 Sarcoma: 67% of 3 Upper GI: 77% of 52 Urology: 90% of 41 Proportion subsequently diagnosed with cancer: Brain: 0% of 3 Breast: 20% of 214 Skin: 33% of 46 Gynae: 2% of 49 Haematology: 20% of 5 Head and neck: 7% of 42 Lower GI: 10% of 111 Lung: 5% of 37 Other: 0% of 6 Paediatric: 0% of 5 Sarcoma: 0% of 3 Upper GI: 8% of 52 Urology: 34% of 41	PCT (WTA 233) appears to be a re-audit of the practices examined in this audit together with those of the neighbouring PCG following their merger to form one PCT. The audit states that the clinician assessed the appropriateness of the referral and figures are given for '% appropriate' and '% suspicious', the '% appropriate' figure has been taken to mean those which the clinician assessed as being appropriate, although no explanation is given as to what '% suspicious' refers to. **Dissemination:** Information was fed back to the involved consultants and the GPs who had referred patients.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 232) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Brain & CNS, Breast, Children's, GI lower; GI upper, Gynaecological, Haematological, Head & Neck, Lung, Opthalmological, Sarcoma, Skin (melanoma, squamous cell), Urological, Other **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 1.4.00 to 31.3.01	**Aims:** The authors did not state their aims but these appear to have been to assess the impact of the introduction of the two week wait system on a district general hospital based on referrals received from one PCT. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Not stated **Extra outcomes (audit criterion not relating to the 2 week wait policy** None stated **Extra outcomes (non-criterion based):** The hospital consultant graded whether a referral should have been made (irrespective of the national guidelines concerning what type of referral was most appropriate). No criteria were given as to how consultants reached their decision.	**Sample type** Consecutive series **Sample size:** 739 **Patient population:** The sample included all patients referred to a DGH from one PCG. Breast - 170 GI lower - 153 Skin - 79 GI upper - 70 Urological - 79 Gynaecological - 65 Lung - 56 Head and neck - 37 Hematological - 8 Sarcoma - 4 Children's - 2 Brain - 2 Other - 14 **Population source:** Clinicians were provided with a form to record all patients they saw in their clinics during the relevant period.	**Data source:** A proforma was provided for consultant staff to provide details of patients they saw. **How collected:** Proformas were returned to a two-week wait co-ordinator. **How validated:** Not stated **Process of applying audit criteria:** Consultant staff applied the criteria when they saw the patient in their clinic. **Statistical method (before and after studies only):** Data were presented in tabular format with a brief overview.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** No **Attrition:** Yes **Re-audit:** Unclear

Results	Comments
Results relating to meeting the 2WW criterion: Not stated **Results relating to conformity of GP referral with guidelines:** **Other results** Proportion of referrals which the clinician assessed as appropriate: Brain: 50% of 2	**Comments:** No information as to the demography of the patients referred was provided. Details of the methods used and examples of the forms used were given in an attached document.(WTA 243) This gave some details but important information on the process of the audit was omitted. Information was also presented for each individual General Practice, but these are not reproduced here. Audit #403 uses the same methodology as this audit, but is of a different PCT. The audit of another

Breast: 87% of 170 Skin: 68% of 79 Gynae: 94% of 65 Haematology: 75% of 8 Head and neck: 76% of 37 Lower GI: 71% of 153 Lung: 87% of 56 Other: 86% of 14 Paediatric: 100% of 2 Sarcoma: 100% of 4 Upper GI: 67% of 70 Urology: 78% of 79 Proportion subsequently diagnosed with cancer: Brain: 0% of 2 Breast: 12% of 170 Skin: 34% of 79 Gynae: 3% of 65 Haematology: 25% of 8 Head and neck: 13% of 37 Lower GI: 13% of 153 Lung: 5% of 56 Other: 35% of 14 Paediatric: not reported Sarcoma: 0% of 4 Upper GI: 10% of 70 Urology: 19% of 79	PCT (WTA 233) appears to be a re-audit of the practices examined in this audit together with those of the neighbouring PCG following their merger to form one PCT. The audit states that the clinician assessed the appropriateness of the referral and figures are given for '% appropriate' and '% suspicious', the '% appropriate' figure has been taken to mean those which the clinician assessed as being appropriate, although no explanation is given as to what '% suspicious' refers to. **Dissemination:** Information was fed back to the involved consultants and the GPs who had referred patients.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 233) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Brain & CNS, Breast, Children's, GI lower; GI upper, Gynaecological, Haematological, Head & Neck, Lung, Opthalmological, Sarcoma, Skin (melanoma, squamous cell), Urological, Other **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 1.04.01 to 31.3.02	**Aims:** The authors did not state their aims but these appear to have been to assess the two week wait system on a district general hospital based on referrals received from one PCT. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Not stated **Extra outcomes (audit criterion not relating to the 2 week wait policy** None stated **Extra outcomes (non-criterion based):** The hospital consultant graded whether a referral should have been made (irrespective of the national guidelines concerning what type of referral was most appropriate). No criteria were given as to how consultants reached their decision.	**Sample type** Consecutive series **Sample size:** 1935 **Patient population:** The sample included all patients referred to a DGH from one PCT. Breast - 449 GI lower - 372 Urological - 275 Skin - 239 GI upper - 204 Gynaecological - 176 Lung - 103 Head and neck - 56 Haematological - 23 Brain - 13 Other - 12 Sarcoma - 11 Children's - 2 **Population source:** Clinicians were provided with a form to record all patients they saw in their clinics during the relevant period.	**Data source:** A proforma was provided for consultant staff to provide details of patients they saw. **How collected:** Proformas were returned to a two-week wait co-ordinator. **How validated:** Not stated **Process of applying audit criteria:** Consultant staff applied the criteria when they saw the patient in their clinic. **Statistical method (before and after studies only):** Data were presented in tabular format with a brief overview.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** No **Attrition:** Yes **Re-audit:** Unclear

Results	Comments
Results relating to meeting the 2WW criterion: Not stated **Results relating to conformity of GP referral with guidelines:** Breast – 88% of 449 referrals GI lower – 66% of 372 referrals Urological – 96% of 275 referrals Skin – 88% of 239 referrals	**Comments:** No information as to the demography of the patients referred was provided. Details of the methods used and examples of the forms used were given in an attached document.(WTA 243) This gave some details but important information on the process of the audit was omitted. Information was also presented for each individual General Practice, but these are not reproduced here. The authors reported that 21 patients were referred under the Head and Neck guideline by their GDP and 50 patients by GPs in other PCTs. These patients were not considered further.

GI upper – 88% of 204 referrals Gynaecological – 95% of 176 referrals Lung – 100% of 103 referrals Head and neck – 86% of 56 referrals Hematological – 96% of 23 referrals Brain – 61% of 13 referrals Other – 92% of 12 referral Sarcoma – 82% of 11 referrals Children's – 100% of 2 referrals **Other results** Proportion of referrals which the clinician assessed as appropriate: Breast: 93% of 449 Lower GI: 72% of 372 Urology: 90% of 275 Skin: 80% of 239 Upper GI: 81% of 204 Gynaecology: 93% of 176 Lung: 97% of 103 Head and neck: 75% of 56 Haematology: 87% of 23 Brain: 46% of 13 Other: 92% of 12 Sarcoma: 100% of 11 Paediatric: 100% of 2 Proportion subsequently diagnosed with cancer: Breast: 17% of 449 Lower GI: 12% of 372 Urology: 19% of 275 Skin: 30% of 239 Upper GI: 9% of 204 Gynaecology: 2% of 176 Lung: 18% of 103 Head and neck: 9% of 56 Haematology: 39% of 23 Brain: 15% of 13 Other: 8% of 12 Sarcoma: 18% of 11 Paediatric: 0% of 2	The number seen within the time allowed was not reported. This audit appears to be a re-audit of the practices examined in two previous reports before the merger of two neighbouring PCGs to form one PCT.(WTA 231, 232) **Dissemination:** Information was fed back to the involved consultants and the GPs who had referred patients.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 234) **Year:** 2001 **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** Brain & CNS, Breast, Children's, GI lower; GI upper, Gynaecological, Haematological, Head & Neck, Lung, Opthalmological, Sarcoma, Skin (melanoma, squamous cell), Urological, Other **Audit type:** 2WWR **Design:** Prospective **Recruitment time frame (follow-up, where reported):** 1.04.02 to 31.3.03	**Aims:** The authors did not state their aims but these appear to have been to assess the two week wait system in a district general hospital. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** Not stated **Extra outcomes (audit criterion not relating to the 2 week wait policy** None stated **Extra outcomes (non-criterion based):** The hospital consultant graded whether a referral should have been made (irrespective of the national guidelines concerning what type of referral was most appropriate). No criteria were given as to how consultants reached their decision.	**Sample type** Consecutive series **Sample size:** 2383 **Patient population:** The sample included all patients referred to a DGH from one PCT. GI lower - 474 Breast - 494 Skin - 312 Gynaecological - 238 Head and neck - 99 GI upper - 252 Lung - 103 Urological - 333 Children's - 11 Hematological - 20 Brain - 13 Sarcoma - 8 Other - 26 **Population source:** Clinicians were provided with a form to record all patients they saw in their clinics during the relevant period.	**Data source:** A proforma was provided for consultant staff to provide details of patients they saw. **How collected:** Proformas were returned to a two-week wait co-ordinator. **How validated:** Not stated **Process of applying audit criteria:** Consultant staff applied the criteria when they saw the patient in their clinic. **Statistical method (before and after studies only):** Data were presented in tabular format with a brief overview.	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Unclear **Analysis:** No **Attrition:** Yes **Re-audit:** Unclear

Results	Comments
Results relating to meeting the 2WW criterion: All 2ww referrals were seen within two weeks. **Results relating to conformity of GP referral with guidelines:** GI lower – 69% Breast – 93% Skin – 85% Gynaecological – 92%	**Comments:** No information as to the demography of the patients referred was provided. Details of the methods used and examples of the forms used were given in an attached document.(WTA 243) This gave some details but important information on the process of the audit was omitted. Information was also presented for each individual General Practice, but these are not reproduced here. This audit appears, in part, to be a re-audit of the practices examined in two previous reports before the

Head and neck – 78% GI upper – 96% Lung – 94% Urological – 91% Children's – 91% Haematological – 85% Brain – 31% Sarcoma – 75% Other – 92% **Other results** Proportion of referrals which the clinician assessed as appropriate: Breast: 96% Upper GI: 96% Lower GI: 74% Lung: 92% Urology: 90% Gynaecology: 92% Skin: 84% Head and neck: 66% Paediatric: 91% Haematology: 75% Sarcoma: 75% Brain: 23% Other: 85% Outcome after 1st visit: % diagnosed with cancer: Breast: 11% Upper GI: 11% Lower GI: 5% Lung: 14% Urology: 15% Gynaecology: 5% Skin: 25% Head and neck: 12% Paediatric: not reported Haematology: 30% Sarcoma: not reported Brain: not reported Other: 8%	merger of two neighbouring PCGs to form one PCT.(WTA 231, 232) **Dissemination:** Information was fed back to the involved consultants and the GPs who had referred patients.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 235) **Year:** ?? **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** GI Lower, GI Upper **Audit type:** Mixed **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** Not stated	**Aims:** To investigate the method of referral of urgent gastrointestinal (GI) problems (upper and lower) and the response to those referrals with a view to streamlining the process. The audit also aimed to investigate the referral process of those diagnosed with GI cancer of any kind. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 120 **Patient population:** Patients with some degree of urgency documented ('urgent' and/or 'cancer' and/or 'see within 2 weeks') in their referral, or those that the consultant graded the referral as urgent (n=39/104 screened referrals; referrals source 1). Regionally reported urgent referrals were also included (n=51, referrals source 2). Referrals that reported 'soon' or 'early' appointment were not included. 31 were referred with suspected upper GI cancer, 54 lower GI, 2 upper and/or lower GI, and 2 were not reported. (1 person was not accounted for. Method of referral included GP letter (n=20), GP's own proforma (n=20), Trust's proforma (n=36), open access (gastroscopy, upper GI) clinic proforma (n=13), and not recorded (n=1). 2 patients had suspected Upper and Lower GI malignancies. The site of suspected cancer was not recorded in 2 cases. 29/45 additional referrals of patients coded as any type of GI cancer were also investigated separately (referrals source 3). Source of referral included GP (n=15), via A&E (n=11), ca found in operating theatre (n=1), stent for cancer diagnosed 2 years previously (n=1) (referrals source 3). As such, the total number of patients included in the audit are: Lower GI only - 62 Upper GI only - 54 Upper and Lower GI - 2 Not known - 2	**Data source:** Not stated **How collected:** Data were collected using a re-designed form. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Yes **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** Unclear **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** No **Analysis:** No **Attrition:** No **Re-audit:** Not stated

		Population source: Three sources of referrals were screened: 1) Referrals to one of 3 consultants who performed gastroscopy, sigmoidoscopy, or colonoscopy during September 2001 (n=104); 2) 'urgent', 'cancer' or '2 week' referrals noted by secretarial staff of regional reporting during a three month period (September to November 2001) (n=51); 3) patients coded for GI cancer of any kind and referred to one of three consultants during a two month period (September to October 2001). To increase the numbers 12 referrals to one consultant, from April 2001 to date, were also screened (n=45; 29 investigated in audit).		

Results	**Comments**
Results relating to meeting the 2WW criterion: Seen within 14 days (referrals from source 1 and 2): 54/90 Seen within 14 days (referrals from source 3; 15/28 referred by GP): 9/15 Time between referral to 1st appointment (n=90): 0 to 7 days = 17 8 to 14 days = 37 15 to 21 days = 14 22 to 28 days = 6 29+ = 16 29/39 from referral source 1 and 10/51 from referral source 2 did not mention 'urgent' and 'cancer' or 'treat under the 2 week standard'. Time between referral to 1st appointment (n=15): 0 to 7 days = 2 8 to 14 days = 7 15 to 21 days = 2 22 to 28 days = 0 29+ = 3 Only 11 referrals were marked with some degree of urgency. For those that waited >29 days, 1 had the word 'urgent' written on it, and 1 had the word 'cancer'. **Results relating to conformity of GP referral with guidelines:** **Other results**	**Comments:** This was a very poorly reported audit. The target population of interest was not clearly reported, but appears to be referrals considered as 'urgent' (using a broad definition). The actual time frame for the audit was not reported. The time period screened for the three referral sources differed. Data on patients identified from the first two sources (Trust and regional data) were considered together. The two sources will not have been mutually exclusive, but the data was reported as if they were. In fact, the referrals from both sources, when considering the same time period, should have been the same. The authors noted that the two sources may have differed because of a variation in the use of the definition for 'urgent' referrals (the DoH guidelines reports a narrower definition). The authors do not report how many patients were identified in both sources or give assurances that the same patients were not considered twice. The purpose of including patients from source 3 was unclear (especially as the same time frame was not used), and no information was provided on how these patients link to those from source 1 and 2, e.g. were some included in both parts of the audit. In the methodology section the authors note that 29 patients identified from source 3 were investigated, but only 28 are reported in the results section. Other outcomes that were reported by the authors (within the results section but not the methodology section) but not given here: Type and duration of symptoms (for source 1 and 2), also reported according to upper and lower GI. **Dissemination:** Not stated

For referrals from source 1 and 2 52/90 were faxed (time between decision to refer and receipt not stated) 38/90 were posted (time between decision and receipt ranged from 1 to 7 days). 8/90 patients had a diagnosis of cancer. For referrals from source 3 (n=28) 9/11 (that included some degree of urgency) were faxed and 2 posted (time between decision to refer and receipt not stated).	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 236) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** GI Lower, GI Upper **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 1.2.01 to 30.4.01	**Aims:** To feed back the findings of a review of the monitoring and auditing of the standard, set in the context of GI Services, 1 year after implementation. To compare current practice against the 2WW standard and identify areas of practice to address, using audit and process mapping methodologies. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** To identify: 1. 2WW standard 2. Locally agreed standard 3. Current 2WW implementation and monitoring 4. % urgent GP referrals using agreed proforma (to arrive =< 24 h) 5. % patients seen within 14 calendar d of referral 6. Breaches 7. Type of info attached to proforma 8. % proforma referrals dx cancer 9. Compliant and noncompliant GPs **Extra outcomes (audit criterion not relating to the 2 week wait policy** Referrals received within 24 hours of the GP's decision to refer, using pre-specified criteria based on government policy. **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 212 **Patient population:** Patients referred to 5 hospitals by lower GI 2WW proforma and upper GI 2WW pro forma during the time period of the audit. Lower GI - 142 Upper GI - 70 **Population source:** Not stated	**Data source:** 2WW proformas and 2WW cancer monitoring forms. Pathology results were supplied by hospital pathology systems. Clinic letters were used to identify health status up to 7.9.01. **How collected:** As part of monthly monitoring, dates patients attended are checked on PAS and added to Cancer Waiting Times Returns. Data checked for accuracy and completeness before submission for analysis against standard of 100% compliance. **How validated:** 2WWR breaches checked on PAS, but validity of audit data not stated. **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptively.	**Involvement:** Unclear **Motive:** Yes **Project plan:** No **Source integrity:** Yes **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Yes **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Upper GI proforma (n=70) 55 (79%) seen within 14 days 15 (21%) not seen within 14 days (10 not counted in 2 week wait because of pre-specified locally agreed criteria; 5 breaches) Lower GI proforma (n=142) 109 (78%) seen within 14 d 33 (22%) not seen within 14 d (14 breaches, 19 not counted) **Results relating to conformity of GP referral with guidelines:**	**Comments:** Action plan included recommendations only, without a timescale or individual responsibility for each change. 494 pathology results were identified from 1.2.01 to 8.01, confirming a diagnosis of upper or lower GI cancer, but unfeasible to identify the route of referral for each patient. **Dissemination:** Not stated

Not reported **Other results** (n= 212) 32 (15%) confirmed cancer 100 (47%) did not have cancer 50 (24%) unconfirmed, awaiting results 11 (5%) did not attend 9 (4%) unknown (unable to obtain clinic letter) 10 (5%) anomalies	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 237) **Year:** 2003 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** GI Lower, GI Upper **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.00 to 31.03.01	**Aims:** To report the unit's experience from the first year of the 2WW scheme. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 701 **Patient population:** Patients referred to the unit via the 2ww scheme within the first year of the introduction of the guidelines. Lower GI - 405 Upper GI - 280 Hepato-biliary - 26 **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** During the initial clinic visit, the appropriateness of the referral according to current guidelines was documented. **Statistical method (before and after studies only):** Descriptive statistics and graphical presentation.	**Involvement:** Yes **Motive:** Unclear **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** Yes **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: 96% patients were seen within two weeks and in 3% the delay was at the patient's request. Routine outpatients waiting times rose from a median of 9.3 weeks in April 2000 to 15.6 weeks in March 2001, despite running 14 extra ad hoc clinics to meet the extra demand. **Results relating to conformity of GP referral with guidelines:** 63/280 upper GI and 114/405 colorectal referrals were deemed to be inappropriate; cancer was detected in 5/63 and 3/114 patients respectively.	**Comments:** This audit was presented in the form of a published letter, with very few methodological data presented, therefore, it is not possible to assess the validity of the results. The authors report results relating to routine outpatients, however their stated population only included patients referred via the 2WW scheme. When the authors refer to referrals 'outwith guidelines but which were appropriate suspected cancer referrals' it is unclear whether they mean patients referred routinely (i.e. non-2WW referrals) with appropriate symptoms listed in the guidelines, or whether the patient was deemed to have appropriate

A further 28 upper GI and 33 colorectal referrals were outwith guidelines but were appropriate suspected cancer referrals; cancer was detected in 10/28 and 7/33 respectively. **Other results** Malignancy was detected in 48/280 upper gastrointestinal referrals and 64/405 colorectal referrals. The pick-up rate for malignancy varied widely by referral indication. Malignancy was found in 20/79 patients with dysphagia but only 1/33 patients with less than 12 months of dyspepsia aged over 55. 23/33 patients with a palpable rectal or abdominal mass had cancer compared to 2/32 patients with persistent rectal bleeding without anal symptoms aged over 60. During the year, 77 upper GI cancers were diagnosed, of whom 49 presented outwith the scheme and 124 colorectal cancers were diagnosed, of whom 77 presented outwith the scheme.	symptoms as assessed at the clinical appointment that warranted referral under the 2WW rule. The number of patients reported as having been referred as suspected of having Upper and Lower GI or hepato-biliary cancers was greater than the total number of patients reported. This may have been owing to a number of patients being referred for suspected cancer at more than one site but this is not clarified in the report. **Dissemination:** The audit was published in the form of a letter in the journal Clinical Medicine.

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 238) **Year:** 2001 **Institution type:** General hospital **Study type:** audit (non c-b) **Cancer site:** GI Lower, GI Upper, Gynaecological **Audit type:** Dx cancer **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.04.01 to 30.06.01	**Aims:** Not stated **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 76 **Patient population:** Patients with upper GI, lower GI or gynaecological cancer during the audit period (n=76, 57 casenotes obtained). Notes reviewed: Upper GI - 10 Lower GI - 28 Gynaecology - 19 **Population source:** List of patients with cancer obtained from the Histopathology Department.	**Data source:** Case notes. **How collected:** Not stated **How validated:** **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** No **Project plan:** No **Source integrity:** Not stated **Appropriateness:** Unclear **Inclusion criteria:** No **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** No **Analysis:** Yes **Attrition:** No **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Time from GP referral to first appointment (for all 41 GP referred patients): 0 - 2 weeks = 14 2 - 3 weeks = 4 3 - 4 weeks = 3 4 - 5 weeks = 6 5 - 6 weeks = 4 7 - 8 weeks = 2 8 - 9 weeks = 1 9 - 10 weeks = 1	**Comments:** This audit was reported as a Powerpoint presentation, therefore, very little detail was given. The two week rule was not mentioned, no aims or objectives were stated and very little information on methodology was reported. A high proportion of eligible patients' notes were not found. The results unrelated to the 2WW which were presented, but not reported here relate to first investigation, confirmatory test, time from first appointment to cancer confirmation, oncology referral outcomes, time from oncology referral to oncologist's appointment date, time from first appointment to surgery, and follow-up. Results relating to the time from GP referral to first appointment were not reported separately for the

10 - 11 weeks = 3 14 weeks = 2 33 weeks = 1 Median 25 days. **Results relating to conformity of GP referral with guidelines:** **Other results** Number of patients referred via fast track faxed referral: Lower GI cancer: 13/28 Upper GI cancer: 4/10 Gynae: 0/19 (11/12 cervical referrals were using protocol for smear abnormalities) Referral sources: GP x 41, GP admission x 7, A&E admission x 5, colorectal sc. Pilot x 2, A&E x 1, private referral x 1.	different types of referral (2WW vs routine). **Dissemination:** Not stated

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 239) **Year:** * **Institution type:** General hospital **Study type:** clinical audit **Cancer site:** GI Lower, GI Upper, Gynaecological, Head & Neck, Lung, Skin, Urological **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** 01.01.01 to 31.03.01	**Aims:** To assess the compliance rate of referrals made under the two-week referral rule for suspected cancer. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** The referral guidelines as set out in 'Referral Guidelines for Suspected Cancer' produced by the NHS executive. Where local standards applied are 'better' in terms of shorter timescales or younger age limits these have been used. Specific questions asked: $ Was the yellow form completed? $ How many were considered appropriate and not appropriate by the consultants? $ Did the consultant assessment meet the guidelines? $ Did the GP referral meet the guidelines? $ Did the Consultant assessment and GP referral meet the guidelines? $ If no, how many were in agreement with each other? **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):**	**Sample type** Consecutive series **Sample size:** 197 **Patient population:** All GP referrals made under the two-week rule during January, February and March 2001 inclusive. Lung - 27 Upper GI - 43 Lower GI - 40 Gynaecology - 9 Skin - 22 Urology - 21 Head and Neck - 22 Other - 13 **Population source:** Not stated	**Data source:** Not stated **How collected:** Not stated **How validated:** **Process of applying audit criteria:** All GP referrals made under the two-week rule were audited against the above guidelines for compliance. The Consultants' appropriate/not appropriate decision was also audited against the guidelines. **Statistical method (before and after studies only):** Descriptive statistics.	**Involvement:** Not stated **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Unclear **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** No

Results	Comments
Results relating to meeting the 2WW criterion: Not reported **Results relating to conformity of GP referral with guidelines:** 29 of 188 patients who did not match the guideline; 18 had been deemed inappropriate referrals and 11 had been deemed appropriate referrals. $ Did the consultant assessment meet the guideline? Yes = 153, No = 29. Of the 29 that did not match the guideline, 18 were considered not appropriate and 11 were considered appropriate.	**Comments:** This audit collects relevant information, assessing the appropriateness of referrals under the 2WW guideline. However, many important details are omitted such as the source of the data, the source used for identifying patients and data collection methods. Therefore, the validity of the audit's findings cannot be verified. **Dissemination:** Not stated

$ Did the GP referral meet the guidelines? Yes = 153, No = 41 (2 = no letter in file, 1 = 2nd referral letter no details). Of the 41 that did not meet the guidelines 4 did not have a suitable guideline, 2 did not match guidelines as there was no mention in guidelines of possible recurrence. $ Did the consultant assessment and GP referral meet the guidelines? Yes = 129, No = 65 (2 = no letter in file, 1 = 2nd referral letter no details). $ If no, how many were in agreement with each other? 23 **Other results** $ Was the yellow form completed? Yes = 189, No = 8. $ How many were considered appropriate and not appropriate by the consultants? Appropriate = 140, Not appropriate = 44 (2 patients deceased, 2 patients admitted, 4 not have suitable guideline, 4 yellow form not completed, 1 patient cancelled appointment). Local guidelines: 8 out of 22 (skin) referrals appeared to have completed the proforma correctly: 4 melanoma (1 appropriate, 3 inappropriate), 4 squamous cell carcinoma (3 appropriate, 1 inappropriate). 1 immunosuppressed patient referred by letter - considered inappropriate. 8 out of 24 (urology) referrals appeared to have completed the proforma correctly: 5 were considered appropriate, 3 not appropriate. 8 out of 22 (head and neck) referrals appeared to have completed the proforma correctly, all were considered appropriate. 2 dysphagia proforma referrals were appropriate. Of the 197 referrals included in the study: 41 were positive cancer outcome, 131 were not cancer, 6 were probable cancer, 1 probably not cancer, 6 not known, 5 no unit number, 1 refused 3 appointments, 1 admitted and died, 1 further tests, 1 existing ca breast, negative for upper GI referral, 1 keratoacanthoma, 1 DNA, 1 no referral letter in file.	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 240) **Year:** 2003 **Institution type:** Network **Study type:** clinical audit **Cancer site:** GI Lower, Gynaecological, Lung **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** sampled from calendar year 2002	**Aims:** $ To assess the effectiveness of guidelines for referral of patients with suspected cancer. $ To determine whether target waiting times for urgent referrals are being met. $ To determine whether conversion rates show the guidelines are being used appropriately. **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** $ All 2WWR patients seen =< 2 w **Extra outcomes (audit criterion not relating to the 2 week wait policy** Primary care standards $ All referrals to be on suspected cancer referral form $ All urgent referrals to be received =< 24 h of GP decision to refer 9 other criteria on filling in referral form correctly Secondary care standards $ All clinic letters returned to GP =< 7 d of 1st appointment attendance $ All confirmed malignancies faxed to GP =< 24 h of patient being informed of dx **Extra outcomes (non-criterion based):**	**Sample type** Random sample **Sample size:** 313 **Patient population:** Colorectal, gynaecological and lung referrals randomly selected from referral letters and case notes in the proportion 2:1:1 until predefined sample size reached. Lower GI - 160 Gynaecological - 74 Lung - 79 **Population source:** Referral list	**Data source:** Referral letters, case notes **How collected:** By hospital clinical audit staff **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics; bar graphs	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** Not stated **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Not stated **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** Not stated **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Yes

Results	Comments
Results relating to meeting the 2WW criterion: Seen =< 2 w: Colorectal: 155/160 (97%) Gynae: 72/74 (97%) Lung: 78/79 (99%) All patients were offered appointments =< 2 w **Results relating to conformity of GP referral with guidelines:** Referrals not meeting any 2WWR criteria:	**Comments:** Appraisal is hampered by the absence of details on, e.g., data source checking, data form validation, data collection, criteria application. **Dissemination:** Joint feedback session for Primary and Secondary Care, 11 Jun 2003.

Colorectal = 56/160, Gynae = 28/74, Lung = 10/79 **Other results** $ Referrals on correct form: 247/313 (letter = 66) $ Received =< 24 h: 282/305 (8 excluded because dates unclear)	

Study identification	Aims, objectives and additional process outcomes/audit criteria being evaluated	Details of sample population	Data collection and assessment	Quality assessment
Audit ID no.: (WTA 241) **Year:** 2001 **Institution type:** Teaching hospital **Study type:** clinical audit **Cancer site:** Not stated **Audit type:** 2WWR **Design:** Retrospective **Recruitment time frame (follow-up, where reported):** May 2000 to not stated (published September 2001)	**Aims:** 1. To review the quality of referral letters received in the Cancer Referral Office. 2. To assess whether patients were seen by a specialist in =< 2 w from referral (DoH) **Objectives (including pre-specified audit criteria/standards and other outcome measures relating to the 2 week wait policy):** **Extra outcomes (audit criterion not relating to the 2 week wait policy** **Extra outcomes (non-criterion based):** $ To report subsequent cancer diagnoses in urgent referrals $ To assess the quality of referral letters received	**Sample type** Random sample **Sample size:** 61 **Patient population:** 61 urgent referrals from 114 referrals with suspected cancer (~ 10% of Cancer Referral Office database) **Population source:** Hospital Cancer Referral Office database	**Data source:** 61 urgent referral letters received via fax (n = 40) or to consultants (n = 21) **How collected:** Data were retrospectively entered into a tool designed for the audit. **How validated:** Not stated **Process of applying audit criteria:** Not stated **Statistical method (before and after studies only):** Descriptive statistics	**Involvement:** Yes **Motive:** Yes **Project plan:** Yes **Source integrity:** No **Appropriateness:** Yes **Inclusion criteria:** Yes **Source check:** Yes **Tool design:** Not stated **Collection validity:** Not stated **TF justified:** No **Process conduct:** N/a **Reporting:** Yes **Analysis:** Yes **Attrition:** Yes **Re-audit:** Not stated

Results	Comments
Results relating to meeting the 2WW criterion: Urgent appointments =< 14 d: 48/61 (78.7%) via fax: 31/40 (78%) via consultant: 17/21 (81%) Consultant annual leave was given as the main reason for breaches **Results relating to conformity of GP referral with guidelines:** Not reported	**Comments:** The audit focused primarily on the quality of GP referral letters, and no source is given for appointment data. **Dissemination:** Report sent for discussion to Referral Advisor for the relevant PCT.

Other results Malignancies confirmed in 3/61 (5%) urgent GP referrals	