

# } Acute Diagnostic Oncology Clinic (ADOC)

Acute Oncology Service

GP name:	
GP address:	
Date:	

## Patient information

First name:		NHS No:	
Surname:		Hospital No:	
Date of birth:			
Date seen in clinic:			

Dear Doctor,

Your patient was seen in the Acute Diagnostic Oncology Clinic. To provide you with the outcome of their visit without delay, please find a brief summary below. A formal letter will follow.

Primary symptoms and findings:	
Secondary symptoms and findings	

## The following investigations have been arranged:

Investigations:	Date	Result
PET scan		
Abdominal US		
Blood tests		
Bone scan		
Chest US		
Chest X-ray		
CT		
CT/US guided biopsies		
Endoscopy		

MRI brain		
MRI whole spine		
Pelvic US		
Any other investigation:		

<b>Diagnosis:</b>	
The patient was informed of:	
The patient was given the following written information:	

Next steps

Action	Date for each	Details
Patient referred back to GP		
Patient admitted to Chelsea & Westminster as an inpatient		
Further investigations on-going		
Patient referred to oncology multi-disciplinary team		

Yours sincerely,