

# “Getting FIT”

A 2WW clock DOES NOT start on receipt of a FIT referral

Patients with rectal bleeding will be declined

Patients over 60yo should be referred to BCSP hub for “self request FOBT”

Patients with Fe deficiency anaemia at any age should be referred on 2WW form

New form will sit alongside 2WW Form

Referral received at Nottingham Cancer Centre

2WW referral

FIT referral on New form

Straight to Test Vetting

Patients with active rectal bleeding (>1 episode per week) excluded.

Patients are investigated on clinical basis as normal but demographic and outcome data collected prospectively.

DTT

FIT test posted to patient if appropriate

OPA

FIT test posted to patient in OPA if appropriate

FIT test posted to patient if appropriate

FIT result used to prioritise investigation (>150)

FIT result can be used to determine additional investigation if whole colon not imaged initially

FIT results compared to investigation outcomes

FIT result notified to GP with template letters

Initial cut-offs shall mirror gFOBT equivalents.

>150  $\mu\text{g}$  Hb/g faeces will be considered positive and GP to send 2WW referral form on receipt of result.

<150  $\mu\text{g}$  Hb/g faeces will be considered equivalent to a negative gFOBT. GP will be advised that the test is “negative” but that this does not exclude Colorectal Cancer.

These cut-offs may change as data accrual continues. Template letters will be amended to include advice on intermediate results (1 to 149  $\mu\text{g}$  Hb/g faeces) as data accrual continues.

GP to act on result