

Guidance for the management of clinical investigation results arising from internal referrals between gynaecology services



TARGET AUDIENCE	All clinicians and administration teams working within gynaecology services including; Consultants, Associate Specialists, Specialist Trainees, Foundation year 2 doctors, GP Specialist Trainees, Administration team
PATIENT GROUP	Patients who have undergone investigations revealing gynaecology pathology while in outpatient gynaecology services.

Clinical Guidelines Summary

Guidance on management of chain of responsibility for managing gynaecological investigation results through outpatient settings

- Covers internal referrals where the receiving specialist clinic manages test results.
- Not applicable to external referrals or second opinions.

Responsibilities

- **Referring Clinic:**
 - Ensure referral appropriateness.
 - Provide complete patient information and relevant history.
- **Specialist Consultant:**
 - Review and act on all test results.
 - Document findings and next steps.
 - Communicate with patient and referring clinic as needed.

Procedure Overview

1. **Referral Submission:**
 - Sent via Trakcare with full patient details.
 - Vetted before reaching specialist clinic.
2. **Consultant Review:**
 - Manage additional investigations.
 - Record results and plan follow-up.
3. **Follow-Up:**
 - Notify patient of critical results.
 - Organize further tests or referrals.
 - Coordinate with referring clinic if needed.
4. **Communication & Documentation:**
 - Update referring clinic on significant findings.
 - Notify patient via appointment, call, or letter.

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Guideline Body

1. Purpose

The purpose of this guidance is to define the responsibilities and procedures for managing test results and investigations for patients referred internally between clinics within the Gynaecology Department at NHS Lanarkshire. It ensures a streamlined process whereby the specialist clinic consultant takes full responsibility for the results and follow-up actions, ensuring timely, accurate, and appropriate patient care. **This guidance does not apply to referrals for second opinions or patients referred to outpatient treatment clinics.**

2. Scope

This guidance applies to all internal referrals made between clinics within the Gynaecology Department at NHS Lanarkshire, particularly those where the responsibility for managing and reviewing test results lies with the receiving specialist clinic. **Referrals for second opinions or to outpatient treatment clinics are not covered by this SOP.**

3. Definitions

- **Internal Referral:** The process where a patient is referred from one clinic (primary or generalist) to a specialist clinic within the same organization.
- **Specialist Clinic Consultant:** The physician or healthcare provider responsible for managing the patient's care in the specialist clinic.
- **Test Results:** Any diagnostic tests or investigations conducted after the referral, including but not limited to laboratory tests, imaging, or waiting list entries.
- **Investigation Reports:** Reports produced as a result of the tests, including diagnostic results, imaging reports, and waiting list entries.

4. Responsibilities

- **Referring Clinic:**
 - Follow referral guidelines to ensure appropriateness of the referral.
 - Complete the referral form with relevant patient information and reason for referral.
 - Ensure all relevant test results and medical history are provided to the specialist clinic.
- **Specialist Clinic Consultant:**
 - Take responsibility for the review, interpretation, and follow-up of all test results and investigations for patients referred to the specialist clinic.
 - Ensure results are recorded in the patient's file and that necessary action is taken, such as further investigations, treatment adjustments, or consultations.
 - Ensure timely communication with the patient regarding results and any further action required.
 - Inform the referring clinic of any critical results or changes to the patient's management plan that may require their involvement.

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5. Procedure

1) Referral:

- The referring clinician will send the referral form via **Trakcare** with all necessary patient details, including current test results, previous medical history, and any relevant clinical notes.
- The referral will be vetted by the vetting team before being forwarded to the specialist clinic.

2) Consultant Review and Managing Test Results¹:

- Once the patient attends the specialist clinic, the consultant is responsible for managing any additional tests or investigations ordered as part of their evaluation.
- The results will be documented in the patient's medical record, and any further actions required (such as follow-up tests, referrals, or treatments) will be clearly noted.

3) Follow-up on Test Results:

- The specialist clinic consultant will communicate any critical or urgent results to the patient promptly.
- If further action (which might include further tests or surgery) or referrals are needed, the consultant will take responsibility to organise the necessary steps.
- If the results require collaboration with the referring clinic, the specialist will communicate findings and coordinate any required interventions.

4) Communication and Documentation^{2,3}:

1. Communication with Referring Clinic:

- The specialist consultant will update the referring clinic with any significant findings or changes to the management plan.
- This may include communication of normal results or results requiring joint management.
- Referring clinics will be notified immediately of critical results that may impact patient care.

2. Patient Notification^{4,5}:

- The patient will be informed of their test results in a timely manner, either during a follow-up appointment or via phone call/letter if appropriate by the specialist consultant.
- The patient will be informed of any necessary further investigations or treatment recommendations.

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5) Monitoring and Quality Assurance:

- **Regular Audits:** Periodic audits of test result management will be conducted to ensure adherence to this SOP and to identify any areas of improvement.
- **Feedback:** Feedback from both specialists and referring clinicians will be gathered regularly to improve the internal referral and test result management process.

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References/Evidence

This SOP is aligned with the principles of **Good Medical Practice** as outlined by the **General Medical Council (GMC)**. Key references include:

1. **Good Medical Practice (GMC, 2013)**
 - **Section 1: Knowledge, skills, and performance**
Ensure you are competent and up-to-date, including managing investigations and test results in a timely manner .
2. **Good Medical Practice (GMC, 2013)**
 - **Section 2: Safety and quality**
You must work collaboratively with other professionals and ensure effective communication between clinicians (Para). This includes ensuring all test results are shared, acted upon, and appropriately documented in the patient's medical record.
3. **Good Medical Practice (GMC, 2013)**
 - **Section 3: Communication, partnership, and teamwork**
You must be open and honest with patients about their care, including test results and follow-up plans (Para 32). You are responsible for providing clear and timely communication regarding any critical findings or treatment adjustments.
4. **General Medical Council - Confidentiality: Good Practice in Handling Patient Information (2009)**
 - Ensure that patient information, including test results, is handled with confidentiality and shared only with those who need to know in line with best practice .
5. **General Medical Council - Consent: Good Practice in Consent (2008)**
 - Ensure that the patient is fully informed of test results and is actively involved in decisions about their care .

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Appendices

1. Governance information for Guidance document

Lead Author(s):	Anna Pandravada
Endorsing Body:	Gynaecology Clinical Effectivness Group
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Approval date	09/05/2025
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Responsible Person (if different from lead author)	

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CHANGE RECORD			
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