

## Responding to a growing demand for Second Opinions

## **Background**

Seeking second opinions has always been an understandable response by both patients and clinicians to challenging and difficult clinical circumstances. Recommending patients to seek a second opinion, sometimes at the earliest stage of diagnosis even before a treatment plan has been formulated and explained by the treating hospital, is increasingly common and indeed is recommended by many information sources for patients.

However giving a second opinion is resource intensive, generally requiring collating and examining clinical information, discussion in multi-disciplinary meetings and often lengthy consultations. This process requires the support across a service including administrative support and multiple disciplines.

The policy below has been agreed and approved by the LSESN Sarcoma Advisory Group. It has been disseminated within the sarcoma services and is publicly available on websites including those of individual Trusts and the LSESN.

## **Policy**

The Royal Marsden Sarcoma Unit and the London Sarcoma Service (UCLH and RNOH) work closely together. We meet regularly, plan research together and use the same treatment and clinical guidelines. We are not identical services; both treat soft tissue sarcoma and gastrointestinal stromal tumours while all bone sarcomas are treated in the London Sarcoma Service. Together we manage about 1000 new patients with sarcoma per year.

Both services regularly see patients with sarcoma for second opinions who are being looked after elsewhere in the country. Due to capacity considerations, we are unable to routinely see patients who are currently undergoing standard management in one of our two services for a second opinion in the other service.

Patients and families will be informed about the availability of the Sarcoma UK Support Line as an independent resource which can provide information and guidance about the process for seeking a second opinion from the network of sarcoma specialist centres throughout England, Scotland, Wales, and Northern Ireland. The service does not provide second opinions itself or make direct referrals to sarcoma specialist centres on behalf of patients, but has a wealth of information and experience to guide patients and their families, drawing on best practice guidelines on the management and treatment of sarcoma in the British Sarcoma Group guidelines. The Support Line recognises this agreement between the sarcoma services in London and is committed to supporting patients who wish to seek a second opinion outside of these services.

File	LSESN 2 <sup>nd</sup> Opinion Policy	Date:	February 2018	Issue	1	Written and	LSESN SAG
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We will continue to refer patients to each other's service in the following situations

- For review in a multidisciplinary team meeting on request by the treating sarcoma clinician. This is anticipated to be after consultation with the patient or family. Feedback of this review will be to clinician and/or patient according to individually determined wishes
- Where expertise exists in the other service only
- > Where treatments are only available in one service, almost always through a clinical trial that may only be open in one centre

Second opinions in each other's service outside of these circumstances will be available when

> Direct request is made by the treating sarcoma clinician to a named other clinician

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