**Suspected Cancer Non Specific Symptoms (NSS); and Cancer of Unknown Primary (CUP) Pathways**

Frimley Health NHS Foundation Trust recently launched a diagnostic pathway for vague but concerning symptoms that could indicate cancer but do not fit with NG12 guidance for site specific 2WW referral. The pathway has recently been renamed as the **Suspected Cancer Non Specific Symptoms (NSS)** – formerly the Suspected Cancer Vague Symptoms Multidisciplinary Diagnostic Clinic (MDC).

At the same time, the existing **Cancer of Unknown Primary (CUP)** pathway for patients who present with metastatic malignancy without an identified primary source, has been added to e-RS in order to streamline the referral process. This is not a new pathway but rather aligns service delivery at both hospitals.

Further detailed information regarding both NSS and CUP eligibility criteria and prerequisite tests can be found at:

* Referral forms and guidelines <https://www.fhft.nhs.uk/gps/gp-centre/referrals/>
* Dedicated NSS page <https://www.fhft.nhs.uk/services/diagnostic-clinic/>

**Frequently Asked Questions (FAQs):**

1. **What are the benefits of an NSS pathway?**

Cancer patients with non-specific but concerning symptoms often present to emergency departments and are diagnosed late, leading to poor outcomes. The NSS pathway provides a better route to diagnosis, improves patient experience, and provides a single point of access for support and advice for these patients. For GPs, it aids earlier diagnosis and improves communication between primary and secondary care, preventing numerous referrals. The NSS also meets the standard of giving a diagnosis of cancer, or clear alternative management plan, within 28 days.

1. **What are benefits of a CUP pathway?**

Metastatic CUP represents ~3-5% of all malignancies and is the fourth most common cause of cancer-related death. Cancers are often too small to be picked up on scans, are hidden beside larger secondary cancer or have disappeared/passed out of the body. CUP pathways identify patients who may benefit from radical (potentially curative) treatment and those with a poor prognosis who may benefit from supportive and/or palliative care. Survival rates for CUP are also higher when patients do not present late as an emergency.

1. **Who should I refer to the NSS pathway?**

NSS patients should be 18+, not pregnant and suitable for a CT Chest Abdomen Pelvis (CT CAP) and experiencing vague but concerning unexplained symptoms including weight loss, persistent nausea, malaise, bloating, progressive pain or there is strong GP gut feeling of cancer/serious disease. All prerequisite investigations must be completed prior to referral.

1. **Who should I refer to the CUP pathway?**

CUP patients will have had imaging which is suggestive of metastatic cancer, without clinical or radiological evidence to indicate a likely primary tumour and no primary organ-specific symptoms. Otherwise, patients may still be considered on a case-by-case basis if there is strong clinical concern about possible metastatic cancer. All prerequisite investigations must be completed prior to referral.

1. **Who shouldn’t be referred to the NSS and CUP pathways?**

Please avoid sending patients who have long-standing unchanging symptoms to the NSS, i.e. non-serious short-term problems that are likely to self-resolve or those that have already been investigated. If any of the prerequisite tests are abnormal, then please refer the patient to the relevant site-specific 2WW Suspected Cancer Pathway, for example, an abnormal chest x-ray to the Lung 2WW Suspected Cancer Pathway and iron deficient anaemia to the Lower GI 2WW Suspected Cancer Pathway.

For NSS and CUP pathways, if the patient has a history of cancer within the last 5 years, please consider if this may be recurrence rather than a true unknown primary cancer. Patients with suspected recurrence or underactive surveillance should be referred back to the site-specific team. Additionally, please ensure that ALL patients are fit enough to go straight to investigation.

1. **How do I refer to the NSS or CUP pathway?**

Please complete referral via the online NHS e-Referral system (eRS) using the NSS or CUP proforma available on DXS, ensuring you choose the correct clinic/hospital/service according to patient location (Frimley Park Hospital OR Wexham Park Hospital). Please include current medication, past medical history and ensure all prerequisite tests have been completed prior to referral as incomplete referrals will be redirected back to GP. Please refer to the dedicated NSS page on ICE to view and order tests (as available).

1. **What information should I give to my patient?**

Please ensure that patients who are referred to both NSS and CUP pathways are aware that they are being investigated for suspected cancer and understand what the next steps will be. Where available, please provide your patient with the relevant Patient Information Leaflet as evidence suggests providing written information Leaflet as evidence suggests providing written information improves attendance rate.

1. **What happens after NSS referral is received?**

The referral will be triage and if accepted, the patient will be offered a fast track CT CAP. CT results will be reviewed, and an appropriate management plan determined. Please refer to the GP referral guidelines at URL above for full details.

1. **What happens after CUP referral is received?**

Eligible patients who have not already had a CT scan, will be booked in for a CT CAP within 2 weeks of referral, if appropriate. The patient will be seen by the CUP team under the 2 week wait rule if a CT CAP scan shows metastatic disease with no primary tumour. Ineligible patients or referrals missing prerequisite tests will be redirected back to GP via e-RS with comments.

1. **What should I do if I am uncertain whether my patient meets the criteria for the NSS or CUP pathways, but I still have strong clinical suspicion of cancer?**

Please contact the following teams for further guidance:

**NSS WEXHAM PARK AND FRIMLEY PARK HOSPITAL:** Email f[hft.nss@nhs.net](mailto:hft.nss@nhs.net%20)  or call 0300 613 3535 **CUP c/o Acute Oncology Service: FRIMLEY PARK HOSPITAL**: Call 0300 6134752 or **WEXHAM PARK HOSPITAL**: Call 0300 615 3445**NSS and CUP referrals at a glance**

|  |  |  |
| --- | --- | --- |
| Eligibility Criteria | NSS | CUP |
| New unexplained vague symptoms that do not fit an alternative designated pathway for urgent investigation or referral |  |  |
| Prerequisite tests including imaging do not suggest definitive diagnosis or alternative symptom-specific pathway |  |  |
| Prerequisite tests including imaging indicate metastatic cancer without clinical or radiological evidence |  |  |
| Patient understands they are being investigated for suspected cancer, are fit to go straight to test and have a WHO Performance Status of 2 or less |  |  |
| Referrals triaged and eligible patients booked in for CT CAP. Incomplete referrals or missing investigations redirected back to GP. |  |  |

|  |  |
| --- | --- |
| Review Date: | May 2023 |
| Date Updated: | December 2023 |
| New Review Date: | December 2025 |

|  |  |
| --- | --- |
| Contact: | Dr Laura Jones and Lara Roskelly |
| Contact Title: | NSS team |
| Contact Email: | f[hft.nss@nhs.net](mailto:hft.nss@nhs.net%20) |
| Date First Updated: | April 2021 |

Feedback Contact: [DXSfrimleyICS@nhs.net](mailto:DXSfrimleyICS@nhs.net)

(Note, patient information is not to be sent to this address)