

## OP30.5

### **Diagnostic fast track for patients referred from general practice for non-specific, serious symptoms: overview and GP questionnaire**

*Emelie Stenman, K Palmér, J Sundquist*

*Center for primary health care research, Region Skåne, Lund University, Malmö Sweden*

*Corresponding author: PhD Fellow Emelie Stenman, Center For Primary Health Care Research, Region Skåne/Lund University, Malmö, Sweden. E-mail: emelie.stenman@med.lu.se*

**Background and Aim:** The Diagnostic Center (DC), a unit at Kristianstad Hospital, was Sweden's first fast track for adult primary care patients with non-specific symptoms suggesting possible cancer. Patients are referred to the DC after an initial investigation in primary care. At the DC, a thorough investigation taking  $\leq 22$  days is performed until cancer is diagnosed or eliminated. The DC project started in October 2012 and an evaluation of the first 3 years is ongoing.

**Method:** Criteria for referral were one or more of the following: fatigue, weight loss  $>5$  kg, pain, fever, unexplained pathological lab values or suspected metastasis. Data on blood tests, examinations, lead times and diagnoses were collected. A questionnaire was sent to all GPs in the catchment area (25 primary health care units, 211 GPs).

**Results:** 290 patients were included (51% women; mean age 66.6 years (SD 13.6)). Of these, 64 (22%) were diagnosed with cancer, 185 (64%) had other diseases and 41 (14%) were considered healthy. 78% were diagnosed within 22 days. Common diagnoses other than cancer were gastro-intestinal, rheumatic, infectious and psychiatric diseases. Pathological lab values were the commonest reason for referral, followed by weight loss (all patients) or pain (cancer). 90 GPs (43%) completed the questionnaire. 88% of the responders considered the referral criteria to be adequate and 94% thought it was advantageous for patients to be referred to the DC. 92% described personal advantages, e.g. when their own investigation stalled. Targeted information to GPs and a review of the blood test routines were mentioned as possible improvements.

**Conclusions:**  $\leq 22$  days for investigations is ambitious and 100% attainment of this goal cannot be expected. We consider 78% to be acceptable. Most responding GPs appreciate the DC, which will now be made permanent and implemented in all three administrative regions of Skåne.