SOP- Clinical SOP development

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Standard Operating Procedure

(Version 1.0)

iMATCH: Clinical SOP development (Adapted from iMatch WP2.2)

Revision History		
Number	**Date**	**Reason for Change**
1.0	**18/1/22**	

Prepared By:	**Checked By:**	**Authorised by:**
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Date: **18/1/22**	**Date:**	**Date: 21/2/22**
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Clinical SOP development.

Contents

Patient pathways.

Creating a schema of the patient pathways will identify suitable points at which the patient can be approached to discuss the research. The pathway will vary by tumour site but generally the patient will be referred to an oncology multi-disciplinary team (MDT) meeting where diagnosis and treatment plans will be made. A patient suitable for surgery may require primary surgery (performed prior to any other necessary treatment) or they may have a systemic anti-cancer therapy such as neo-adjunctive chemotherapy (NACT) followed by interval debulking surgery (IDS). Some patients will be offered an appointment at surgery school, to help them prepare physically for their procedure.

Each tumour site will have Macmillan nurses providing specialist nursing care. Their contact details can be found on the MFT website under the speciality. They will be able to assist with mapping out patient pathways. It may also be useful to shadow some clinic appointments, which can be arranged through the Macmillan nurses.

Screening.

Multi-disciplinary Team meeting.

Weekly, or in some cases daily oncology MDTs discuss referrals and plan treatment. It may be useful to sit in the MDT (via MS Teams) to acclimatise to the terminology used. An MDT agenda is sent out

weekly by the MDT coordinator. Minutes are shared across hospital sites via platforms such as Somerset and Christie Clinical Web Portal.

To request access to the MDT and the relevant meeting minutes platform please contact the MDT coordinator for the relevant tumour site. Contact details can be found **LINK.**

When an eligible patient is declared suitable for surgery, they will attend a clinic appointment to discuss their options. Appointments will be listed on the Electronic Patient Record platform for the hospital/Trust. Hospital employees will have automatic access to EPRs.

Recruitment.

Patients attend clinic to discuss treatment with a clinician, with a Macmillan nurse for support. If they consent to surgery, they will require a pre-operative assessment. Clinics will differ by tumour and hospital site. Some patients will have pre-op straight after their clinic, while others will be booked for a separate appointment. Discuss with the Macmillan nurses the most appropriate times to approach the patient and if possible, a PPI group should be consulted.

Biobanking

If a sample is required for basic research or storage, they may be consented via the local biobank. In Greater Manchester there are two biobanks: Manchester University Hospitals Research and Innovation Biospecimen Service (RIBS)and Manchester Cancer Research Centre (MCRC). MCRC collect samples from hospital sites across Greater Manchester. Contact details can be found LINK. The biobank provides information sheets and consent forms. Consent and collection may be performed by the biobank team or they may allow the study team to conduct these tasks.

Sample collection

Having consented to surgery the patient will be listed for theatre. Surgery sites will have a theatre management platform such as ORMIS. Listings may be identified on the management platform. Alternatively, the theatre coordinator may assist. There will also be a theatre list circulated the week prior.

Sample Collection.

Theatre brief.

The theatre team will need to be informed of the patient's consent for sample collection. Prior to each session the theatre team have a briefing to discuss that days' list. The PI will delegate responsibility to a member of the study team to attend the theatre briefing to discuss the needs of the study. The delegated person must take a copy of the consent form to theatre for the team to

confirm consent. If bloods are required, this will be collected by the anaesthetist via the patient's venflon to avoid an additional procedure.

To access theatre…

Pathology

Depending on the tumour type, the sample may be collected directly from theatre or it will need to be cut up by pathology. Therefore, pathology will need to be consulted in developing the sample collection protocol. The pathology lead for different tumour sites can be found LINK.