

AVAILABLE AT:

- Emersons Green NHS Treatment Centre
- Devizes NHS Treatment Centre
- Cirencester NHS Treatment Centre

SPECIALITY: **GENERAL SURGERY**  
 HRG CODE(S): **F93, F95**  
 PROCEDURE(S): **Anal minor and intermediate procedures**  
 AVERAGE LENGTH OF STAY: **Day Case**

INDICATION FOR REFERRAL:

- **Rectal bleeding due to presence of haemorrhoids**
- **Minor rectal bleeding**
- **Sore haemorrhoids**
- **Fissures**
- **Anal skin tags** (bleeding or causing discomfort)

*N.B Patients that warrant a 2 week wait referral must not be referred*

PRE- REFERRAL TESTS / REQUIREMENTS

Pathology	<b>N/A</b>
Imaging	<b>N/A</b>
Other tests (e.g. EMG)	<b>GP to prescribe lactulose pre-procedure if patient prone to constipation</b>

INFORMATION

Nutrition / Hydration	<b>No food 6 hours prior to the procedure Clear fluids up to 2 hours prior to the procedure</b>
Medication to cease	<b>All patients stop Warfarin 4 days, INR on day before surgery with GP or Nurse, and patient to ring PACU with results</b>

DISCHARGE

Medication (TTOs)	<b>Paracetamol 500mg Co-codamol 30/500mg Ibuprofen 400mg Lactulose 500mls</b>
Follow up	<b>Haemorrhoidectomy and Fissures: 4-6 weeks</b>
Specific Discharge Info	<b>Shower/wash area after bowel movement to keep area clean</b>

## AVAILABLE AT:

- **Emersons Green NHS Treatment Centre**
- **Devizes NHS Treatment Centre (outpatients only)**
- **Cirencester NHS Treatment Centre (outpatients only)**

SPECIALITY: **GENERAL SURGERY**  
 HRG CODE(S): **G13/14**  
 PROCEDURE(S): **Cholecystectomy**  
 AVERAGE LENGTH OF STAY: **1-2 Nights**

## INDICATION FOR REFERRAL:

- **Repeated episodes of biliary pain (colicky)**
- **Biliary pain with mildly or temporarily abnormal LFT and normal MRCP**

N.B. *Patients requiring an MRCP - if LFTs undertaken by UKSH are abnormal the surgeons at UKSH will arrange an MRCP and make a decision based on the results*

## Not appropriate for UKSH:

- **Acute cholecystitis**
- **Acute biliary pancreatitis**
- **Patients with significantly abnormal liver function**
- **Patients requiring an ERCP**

## PRE- REFERRAL TESTS / REQUIREMENTS

Pathology	<b>LFTs preferred as a comparative</b>
Imaging	<b>Ultrasound. Images and report required</b>
Other tests (e.g. EMG)	<b>N/A</b>

## INFORMATION

Nutrition / Hydration	<b>No food 6 hours prior to the procedure</b> <b>Clear fluids up to 2 hours prior to the procedure</b> N.B. <i>Daily medication should be taken on day of surgery with a sip of water</i>
Medication to cease	<b>All patients stop Warfarin 4 days, INR on day before surgery with GP or Nurse, and patient to ring PACU with results</b> <b>Stop aspirin 5 days before</b>

## DISCHARGE

Medication (TTOs)	<b>Naproxen 500mg BD</b> <b>Paracetamol 1-2 tabs QDS</b>
Follow up	<b>Not Routine</b>
Specific Discharge Info	<b>N/A</b>

AVAILABLE AT:

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SPECIALITY: **GENERAL SURGERY**  
 HRG CODE(S): **F35**  
 PROCEDURE(S): **Colonoscopy (direct access)**  
 AVERAGE LENGTH OF STAY: **Day Case 2-4 hours**

**Please complete the referral form on page 34 or download a copy from our website at [www.uk-sh.co.uk](http://www.uk-sh.co.uk), sign it and fax it to us on the number indicated**

INDICATION FOR REFERRAL:

- **New onset rectal bleeding persisting less than 6 weeks with local anal symptoms (Sigmoidoscopy)**
- **Mild iron deficiency anaemia without an obvious cause**  
(If Hb < 11g/dl in men, 10g/dl in post menopausal women -> refer for urgent colonoscopy to hospital)
- **Family history of Colorectal cancer:**  
2 first degree relatives of any age or 1 first degree relative developing CRC under age 45 yrs
- **Evaluation of abnormality found at Barium enema or CT colonogram**
- **Surveillance colonoscopy for previous polyps** (agreed with hospital specialist or patient chooses UKSH)
- **Surveillance colonoscopy for previous colorectal cancer** (agreed with hospital specialist or patient chooses UKSH)
- **Surveillance colonoscopy for long standing, inactive, inflammatory bowel disease**  
(agreed with hospital specialist or patient chooses UKSH)
- **Longstanding abdominal symptoms** (eg chronic rectal bleeding) with patient or clinician concern to exclude significant pathology (where the risk of colorectal cancer is low).

PRE- REFERRAL TESTS / REQUIREMENTS

Pathology **FBC**  
**U&Es in patients at risk of electrolyte imbalance**

Imaging **N/A**

Other tests (e.g. EMG) **Please photocopy the attached Colonoscopy proforma found at the back of this guide or download a copy from our website. Please complete to ensure that your patient is suitable to receive bowel preparation and fax the signed copy to 0117 906 1950**

INFORMATION

Nutrition / Hydration **GP to advise patient regarding regular prescribed medications eg. antiepileptics etc**

Medication to cease **All patients on Warfarin, check INR <1.4 on day before bowel preparation is taken, with GP or Practice Nurse and patient to bring results along to hospital**

DISCHARGE

Medication (TTOs) **N/A**

Follow up **Follow-up advice from endoscopist when histology available**

Specific Discharge Info **Requires escort home and someone at home for 24 hours in accordance with day surgery criteria**

AVAILABLE AT:

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SPECIALITY: **GENERAL SURGERY**  
 HRG CODE(S): **F73/74**  
 PROCEDURE(S): **Hernia repair**  
 AVERAGE LENGTH OF STAY: **Day Case**

INDICATION FOR REFERRAL:

- **Palpable hernia**

N.B. *Extensive incisional Hernias not appropriate for referral*

PRE- REFERRAL TESTS / REQUIREMENTS

Pathology	<b>N/A</b>
Imaging	<b>N/A</b>
Other tests (e.g. EMG)	<b>N/A</b>

INFORMATION

Nutrition / Hydration	<b>No food 6 hours prior to the procedure Clear fluids up to 2 hours prior to the procedure</b>
Medication to cease	<b>All patients stop Warfarin 4 days, INR on day before surgery with GP or Nurse, and patient to ring PACU with results</b>

DISCHARGE

Medication (TTOs)	<b>Naproxen 500mg BD Paracetamol 1-2 QDS</b>
Follow up	<b>Not Routine</b>
Specific Discharge Info	<b>N/A</b>

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SPECIALITY:	<b>GENERAL SURGERY</b>
HRG CODE(S):	<b>Q11</b>
PROCEDURE(S):	<b>Varicose vein excision, ligation, stripping and avulsion</b>
AVERAGE LENGTH OF STAY:	<b>Day Case</b>

INDICATION FOR REFERRAL:

- **Bleeding from a varicosity that has eroded the skin**
- **One bleed from a varicosity that is at risk of bleeding again**
- **Venous ulceration**
- **Skin changes at the ankle**
- **Recurrent superficial thrombophlebitis**
- **Troublesome symptoms from varicose veins where the patient and/or the GP feel that the extent, size and site of the varicose veins are having a severe impact on the patients quality of life**

PRE- REFERRAL TESTS / REQUIREMENTS

Pathology	<b>N/A</b>
Imaging	<b>Duplex Doppler</b>
Other tests (e.g. EMG)	<b>N/A</b>

INFORMATION

Nutrition / Hydration	<b>No food 6 hours prior to the procedure Clear fluids up to 2 hours prior to the procedure</b>
Medication to cease	<b>All patients stop Warfarin 4 days, INR on day before surgery with GP or Nurse, and patient to ring PACU with results</b>

DISCHARGE

Medication (TTOs)	<b>Paracetamol 1-2 QDS</b>
Follow up	<b>N/A</b>
Specific Discharge Info	<b>Clinistretch' bandage for 1 week. The patients wear TED stockings during daytime for 1-3 weeks afterwards depending on the extent of surgery</b>