

**Patient
Information**

Rapid Access Prostate Imaging and Diagnosis (RAPID)

Introduction

This leaflet aims to give you, your relatives and carers information about the Rapid Access Prostate Imaging and Diagnosis (RAPID) Service. RAPID is for men who need investigation for suspected cancer of the prostate.

We hope this leaflet will answer some of the questions that you or those who care for you may have at this time. This leaflet is not meant to replace the consultation between you and the urology team, but aims to help you understand more about what is discussed.

Why have I been referred to RAPID?

You have been referred by your GP because the result of your prostate-specific antigen (PSA) blood test is high or your prostate does not feel entirely normal to your GP. This could possibly mean that you have prostate cancer. However, there are several other common conditions apart from cancer that can cause a high PSA, so further tests may be needed.

We understand that this may be a worrying time but by being able to speed up the tests, we will be able to determine more quickly whether or not you have cancer of the prostate.

What is a PSA blood test?

A PSA test measures a chemical in the blood, which is released by the prostate. Your PSA level usually increases with age – so the older you are, the higher your normal level of PSA. Your GP has referred you because your PSA level is higher than normal for you, based on your age.

Reference No.

GHP11603_08_20

Department

Urology

Review due

August 2023

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Information****Conditions that can cause a high PSA level are:**

- a prostate or urine infection.
- prostate inflammation.
- benign (non-cancerous) prostate enlargement.
- prostate cancer.

Other things that may affect your PSA levels are:

- not completely emptying your bladder, that has been an issue for some time.
- having had an instrument put into the urethra within 4 to 6 weeks.
- sexual activity or bike-riding a few hours before having a PSA test.

What is the RAPID pathway?

- The RAPID service has been designed to reduce the time taken to investigate and diagnose why you have urinary symptoms, a high PSA and/or an abnormal feeling prostate.
- The referral sent by your GP will be reviewed by a consultant urologist and Senior Nurse Specialist. You will then receive either a telephone consultation appointment or an appointment for a face to face consultation in clinic.
- The consultation will allow us to assess you for the appropriate investigations.
- The telephone consultation will be with a senior urology specialist nurse who will ask many questions to gather information about your previous or current health problems. There will also be questions asked that will be specific to your waterworks.
- Questions will also be asked to assess whether it is safe and also suitable for you to have a magnetic resonance imaging (MRI scan).
- During this consultation the specialist nurse will give you information about what to expect over the next few weeks.

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- If a MRI scan is recommended this will be performed before we see you in clinic. You will receive an appointment by telephone call and or letter from the Imaging Department to confirm the date and time. It is hoped that you will have the scan within 2 weeks of us requesting it.
- If the scan looks normal, there is a high chance that your prostate does not contain any concerning cancer cells. If this is the case, we will arrange to see you face to face in clinic to discuss the findings, we will normally not advise a biopsy.
- If there is anything suspicious or of concern, we will then advise that you have a targeted biopsy.
- We aim to carry out all of the tests and discussions within about 5 weeks.

What happens when you are on the RAPID pathway?

You may have up to 4 separate appointments. The appointments will take place in the following order:

1. Telephone or face to face clinic review by a Senior Urology Specialist Nurse or a Consultant Urologist.
2. Prostate MRI scan (if needed).
3. Prostate biopsy (if needed).
4. Clinic review with the consultant and/or nurse with the result of the MRI and biopsy.

Clinic reviews and biopsies will take place at Cheltenham General Hospital. MRI scans may be at either Cheltenham General or Gloucestershire Royal Hospital. It will be made clear to you which department you need to attend for each appointment. There are maps at the end of this information leaflet showing each location.

Review by a specialist urology doctor or nurse

When you have your telephone clinic or your first face to face clinic review with the urology team, please feel free to bring a relative or friend.

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You will be asked questions about your symptoms, medical history, medical background and medications. PSA testing and results will also be explained in more detail. Please bring with you a list of all your current medications.

What is a prostate MRI scan?

A magnetic resonance imaging (MRI) scan uses magnetic waves to produce images of the body. It does not use X-rays or radiation. A prostate MRI takes images that are able to show us any suspicious areas of the prostate that might be cancerous. The MRI scan appointment will take up to about an hour to perform. You will also receive a separate MRI information leaflet explaining some of the risks of the test. So that the MRI images are clear you may have an injection of a contrast dye called gadolinium. You will be asked to lie very still on your back on a couch for about 30 to 40 minutes while the scan takes place.

MRI Results

The MRI results are usually be sent to the specialist urology doctor or nurse about 1 week after your appointment. The images will be reviewed by the consultant urologist and specialist nurse. The decision to proceed with a prostate biopsy will depend on the findings from the MRI and your own choice. If there is a suspicious area we will normally recommend a prostate biopsy as that is the only way to confirm whether the suspicious area is cancerous or not.

If you have a prostate biopsy

This is a very accurate form of biopsy (called a transperineal targeted biopsy) which takes about 20 minutes. You will be asked to lie on your back on a couch during this test and your legs will be held up in supports. Very small samples of tissue will be taken from your prostate using a fine needle following local anaesthetic injection to numb the area. You will be awake throughout this procedure.

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You will also receive a separate information leaflet explaining the biopsy procedure, the common and rare side effects and the problems that can happen after the procedure. On the day of the biopsy the specialist urology doctor will explain exactly what will happen and answer any questions that you may have before asking you to sign a consent form.

You will usually be at the hospital for 1 hour on the day of the biopsy.

What happens next?

The results of the biopsies and MRI will be reviewed in a multidisciplinary team meeting (MDT). A follow-up appointment will be arranged for you at the prostate clinic where the results, possible treatment options, if necessary, or further care and investigations will be discussed.

Key points to remember

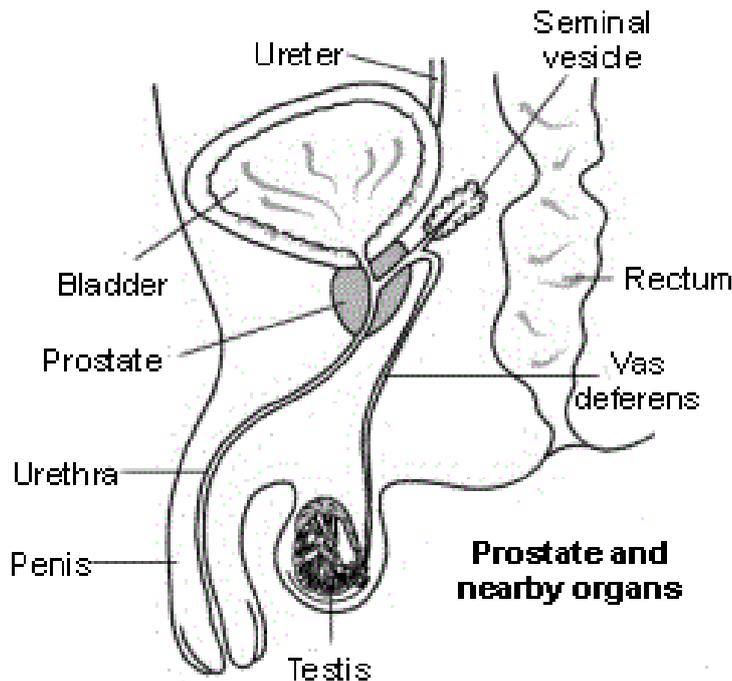
- You can bring a relative or friend along to support you.
- Bring a list of your current medications.
- Eat and drink as normal on the day of your appointments, unless you are advised otherwise.
- Take your medication as usual apart from blood thinning medications (please see below).

Before a biopsy it will be necessary for you to stop taking any blood-thinning medication such as clopidogrel, warfarin, heparin (or heparin-like substances), apixaban (Eliquis®), dabigatran (Pradaxa®), or rivaroxaban (Xarelto®) for 7 days before your appointment unless otherwise instructed. This should have been discussed with you over the phone at the time your appointment was made. If you have any questions please call your consultant's secretary. They will speak to the consultant or senior specialist urology nurses who will call you back if required. Continue to take aspirin as normal.

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What is the prostate?

The prostate is a small gland near the bladder. It is present only in men. The prostate produces fluid that forms part of the semen and helps nourish sperm. When you empty your bladder, urine flows through a tube called the urethra. The urethra passes through the prostate before reaching the penis (see diagram below).



Who should I contact for help or information?

If you have any questions or concerns, please ask a member of staff. It may help to write down your questions and concerns as you think of them so that you have them ready. Please do not hesitate to ask if you think you have been forgotten or have waited too long to be seen.

Lisa Richardson, Pathway Co-ordinator

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Monday to Friday 8:30am to 4:40pm

Acknowledgement

Diagram used with the kind permission of Patient website, <http://patient.info/health/prostate-cancer-leaflet> ©2015, Egton Medical Information Systems Limited. All Rights Reserved.

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