

**Bowel Cancer Screening Programme**  
 Standard Operating Procedure

**Management of repeat screening procedures for Poly Site Check**

<b>Key Document code:</b>	WAHT-KD-021	
<b>Key Documents Owner:</b>	Emma Duggan/Felicity Eykyn	Bowel Cancer & Bowel Scope Screening Manager/Bowel Cancer Lead Nurse Specialist Screening Practitioner
<b>Approved by:</b>	Bowel Screening Operational Meeting	
<b>Date of Approval:</b>	24 <sup>th</sup> April 2017	
<b>Date of review:</b>	11 <sup>th</sup> February 2022	

**Key Amendments**

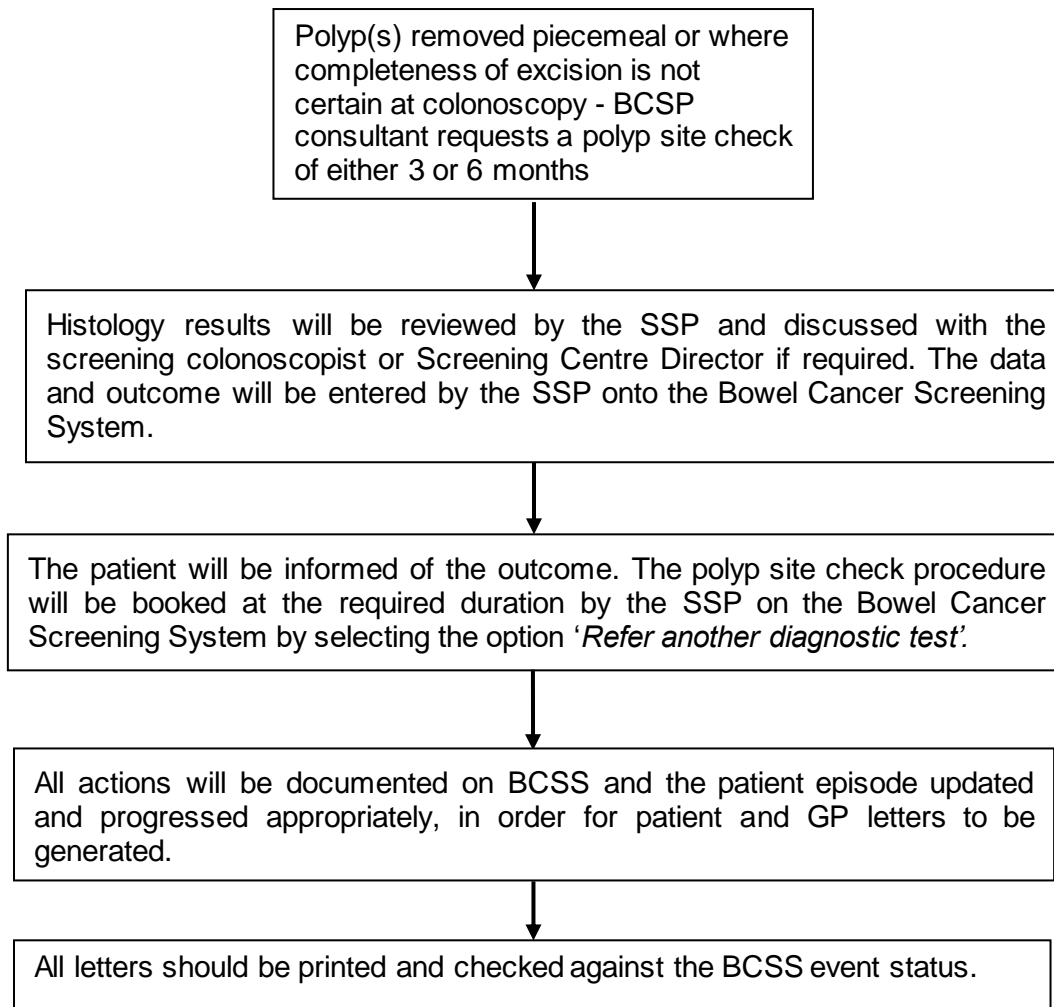
<b>Date</b>	<b>Amendment</b>	<b>Approved by</b>
19 <sup>th</sup> June 2019	Documents extended for 6 months whilst reviewed	Emma Duggan
11 <sup>th</sup> Feb 2020	Documents extended for 6 months whilst review and approval is processed	Emma Duggan
27 <sup>th</sup> July 2020	Documents extended for 6 months during COVID-19 period	QGC/Gold Meeting
1 <sup>st</sup> March 2021	Document extended for 6 months as per Trust agreement 11/02/2021	
16 <sup>th</sup> July 2021	Documents extended for 6 months whilst review and approval is processed	Emma Duggan/ Mr Stephen Lake

**Introduction**

The British Society of Gastroenterology (BSG) recommends that the site of large sessile adenomas removed piecemeal should be re-examined at 2 to 3 months. The BCSP Bowel Cancer Screening pathway allows 3 and 6 month polyp site checks only.

Please note that the key documents are not designed to be printed, but to be used on-line. This is to ensure that the correct and most up-to-date version is being used. If, in exceptional circumstances, you need to print a copy, please note that the information will only be valid for 24 hours and should be read in conjunction with the key document supporting information and/or Key Document intranet page, which will provide approval and review information.

## Method



If a BCSP colonoscopist has indicated on the endoscopy report that they would like the patient to undergo a colonoscopy or flexible sigmoidoscopy outside the recommended surveillance period, it must be carried out under the symptomatic service. If this is the case, the SSP must record this information on the BCSS episode notes and email the Consultant, Consultants Secretary and Endoscopy coordinator with the relevant referral details. Advance and close episode on the BCSS. A copy of all emails must be printed to be scanned in to the patients notes. This will not affect the patients follow up on BCSP.

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