

## Gynaecological Cancer Research Study - Part 2

### YOUR FIRST FOLLOW UP APPOINTMENT AFTER SURGERY

Questions 1-3 are to be completed by those patients that were transferred to a different hospital for their surgery. All patients that were not transferred are requested to start at question 4

**Q1** If you were referred to a different hospital for your surgery, other than the one you attended for your diagnosis, were you given the choice of where you would like to receive your follow up care?

Yes.....  Go to Q2  
 No .....  Go to Q3

**Q2** Where did you have your first follow up appointment?

at the hospital where I had my surgery (go to question 4) .....   
 at the hospital where I received my diagnosis (go to question 4).....

**Q3** If you hadn't been given a choice where would you prefer to have your follow up care?

at the hospital where I had my surgery   
 at the hospital where I received my diagnosis .....

**Q4** Before you attended your first follow up appointment, did you know what would happen to you during your appointment?

Yes, definitely .....   
 Yes, to some extent.....   
 No.....

**Q5** When were you given the full details of your surgery?

Before I went home following my surgery .....   
 At this follow up appointment.....   
 No.....

**Q6** Who gave you the results of your surgery?

Consultant Surgeon.....   
 Registrar.....   
 Clinical Nurse Specialist .....   
 Other .....   
 Please state

**Q7** If you needed further treatment were you told at this appointment?

Yes .....  Go to Q9

No further treatment required.....  Go to Q10

**Q8** Were you given written information about your further treatment?

Yes.....

No.....

**Q9** Did the different people treating and caring for you (Clinical Nurse Specialists, Surgeons, Oncologists, hospital doctors, hospital nurses, Consultants) work well together to give you the best possible care?

Yes, always.....

Yes, most of the time .....

Yes, some of the time .....

No, never .....

Don't know .....

If no could you tell us why? Please describe

**ANY OTHER COMMENTS**

**Q10** If you would like to tell us more about your experiences of the NHS Gynaecological Cancer Care please do so in the space below (if the space provided is not enough, please feel free to send any accompanying pages)



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**Q11** In particular if there was anything exceptionally good about your cancer care we would like to know

**Q12** We would also like to know of aspects of care you received that you think could be improved

**Thank you for taking the time to complete this questionnaire. Your participation is important to us**



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If you would like to receive a copy of the results from this study upon completion please tick here