

# POPS surgical referral pathway

## Is my patient for POPS?

1

### Do they have...

- **Multi-morbidity** (more than 2 co-existing conditions requiring assessment +/- optimisation)
- **Frailty** (reduced ability to adapt to stress of perioperative period)
- **Functional dependency** (requiring support in activities of daily living)
- **Difficult decision making** (difficulties with capacity to consent or uncertainty regarding the most appropriate intervention)

Or

### Are they >65yrs and having...

- Cystectomy
- Major gynaecology surgery
- Oesophagectomy
- Pelvic exenteration
- Major head and neck surgery

If considering POPS for patient under 65yrs please contact a member of the POPS team prior to referral

Refer

2

### Creating the referral

Refer to POPS using EPR

1. Type '**POPS**' into manual entry field form
2. Complete the form

Submit

3

### POPS will...

1. **Prioritise** referral and appointment accordingly (e.g. Cancer pathway patients)
2. **Inform** the patient of appointment via post and phone call (with reminder before appointment)
3. **Document** POPS outcome letter (at least draft) on EPR within 72 hours (in cases when admission for surgery before 72 hrs, email summary will be sent to surgical specialty)
4. **Record** outcome of assessment on PiMS (recorded via the PiMS outcome)
5. **Liase** with admissions, surgeon and anaesthetic lead by email if concerns regarding perioperative management

**Remember – If referred to POPS, no separate preoperative assessment clinic appointment required if surgery within 4 months**

Contact :ageing and health POPS team (email) or x82092 or x88617 if you have any queries.