**Haematology audit template**

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| **Date of completion** | (To be inserted when completed) |
| **Name of lead author/ participants** | (To be inserted) |
| **Specialty** | Haematology |
| **Title** | **An audit of compliance with the British Society for Haematology guideline on the management of mature T-cell and NK-cell lymphomas (excluding cutaneous T-cell lymphoma)** |
| **Background** | The British Society for Haematology (BSH) has published guidance on the management of mature T-cell and NK-cell lymphomas. This audit will review compliance with some of the level 1 recommendations made. |
| **Aim & objectives** | To review whether patients with a T-cell or NK-cell lymphoma are:   1. being correctly diagnosed 2. appropriately managed. |
| **Standards and criteria** | 100%, or if not achieved there is documentation in the case notes that explains the variance (most standards relate to subgroups of patients only).   1. All patients with peripheral T-cell lymphoma (PTCL) should be discussed at a regional lymphoma multidisciplinary team (MDT) to include expert pathology review and clinical management recommendations. 2. All PTCL cases aged under 25 years should be discussed with a teenage and young adult (TYA) specialist. 3. All PTCL patients should be offered human T-lymphotropic virus (HTLV) screening at diagnosis regardless of subtype. 4. HTLV-positive PTCL cases should be discussed with the national HTLV service. 5. Patients with T-cell prolymphocytic leukaemia (T-PLL) treated with alemtuzumab should have regular cytomegalovirus quantitative PCR (CMV qPCR) monitoring and receive herpes zoster and *pneumocytis jirovecii* prophylaxis. 6. All patients with systemic anaplastic large cell lymphoma (ALCL) should be offered six cycles of cyclophosphamide, doxorubicin, and prednisone and brentuximab vedotin (CHP-BV) as first-line therapy. |
| **Method** | **Sample selection**   * All patients diagnosed with a T-cell or NK-cell lymphoma in the preceding 36 months, up to a maximum of 12 consecutive patients   **Data to be collected on proforma (see below).** |
| **Results** | (To be completed by the author)  The results of this audit show the following compliance with the standards:   |  |  | | --- | --- | | **Investigation** | **% compliance** | | All patients with PTCL were discussed at a regional lymphoma MDT |  | | All PTCL cases aged under 25 years were discussed with a TYA specialist |  | | All PTCL patients were offered HTLV-1 screening at diagnosis regardless of subtype |  | | HTLV-1 positive PTCL cases were discussed with the national HTLV-1 service |  | | Patients with T-PLL treated with alemtuzumab had regular CMV qPCR monitoring and received herpes zoster and *p. jirovecii* prophylaxis |  | | All patients with systemic ALCL were offered six cycles of CHP-BV as first-line therapy unless contraindicated |  | |
| **Conclusion** | (To be completed by the author) |
| **Recommend-ations for improvement** | Present the result with recommendations, actions, and responsibilities for action and a timescale for implementation. Assign a person(s) responsible to do the work within a time frame.  **Some suggestions:**   * highlight areas of practice that are different   present findings. |
| **Action plan** | (To be completed by the author – see attached action plan proforma) |
| **Re-audit date** | (To be completed by the author) |
| **Reference** | Fox CP, Ahearne MH, Pettengell R, Dearden C, El-Sharkawi D, Kassam S *et al.* Guidelines for the management of mature T-cell and NK-cell lymphomas (excluding cutaneous T-cell lymphoma): A British Society for Haematology Guideline. *Br J Haematol* 2022;196:507–522.  <https://onlinelibrary.wiley.com/doi/10.1111/bjh.16221> |

**Data collection proforma for patients with or at risk of a mature T-cell or NK-cell lymphoma**

**Audit reviewing practice**

Patient Name:

Hospital Number:

Date of Birth:

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|  | **1**  **Yes** | **2**  **No** | **3** If box 1 not ticked, was there documentation to explain the variance? **Yes/No** plus free-text comment | **4** Compliant with guideline if box 1 ticked or an appropriate explanation from column 3. **Yes/No** (Record if standard not applicable) |
| **For patients with PTCL** | | | | |
| **1**  Was discussed at a regional lymphoma MDT |  |  |  |  |
| **2**  Patients aged under 25 years were discussed with a TYA specialist |  |  |  |  |
| **3**  Were offered HTLV-1 screening at diagnosis regardless of subtype |  |  |  |  |
| **For patients with HTLV-1+ PTCL** | | | | |
| **4**  Were discussed with the national HTLV-1 service |  |  |  |  |
| **For patients with T-PLL** | | | | |
| **5**  Patients receiving alemtuzumabwere offered antimicrobial prophylaxis active against herpes zoster and *p. jirovecii*, along with regular CMV qPCR |  |  |  |  |
| **For patients with systemic ALCL** | | | | |
| **6**Were offered six cycles of CHP-BV as first-line therapy unless contraindicated |  |  |  |  |

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| **Audit action plan**  An audit of compliance with the British Society for Haematology guideline on the management of mature T-cell and NK-cell lymphomas (excluding cutaneous T-cell lymphoma) | | | | | | |
| **Audit recommendation** | **Objective** | **Action** | **Time scale** | **Barriers and constraints** | **Outcome** | **Monitoring** |
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