



20 October 2021



Dear [REDACTED]

### Official Information Act Request

You have asked for information about ultrasound wait times.

*We would be grateful if a person responsible for triaging ultrasound referrals would be so kind as to tell us what priority (urgent, semi urgent, routine, declined) and time frame (in days or weeks) your clinicians would put on the following twelve referral scenarios for a trans vaginal ultrasound from a community GP (under a Covid Level 1 scenario)?*

*Premenopausal 36 year old women with new onset bowel habit changes and bloating of*

- A. 1 months duration, normal pelvic exam, negative family history - with CA-125 of 15*
- B. 3 months duration, normal pelvic exam, negative family history - with CA-125 of 15 (stable)*
- C. 3 months duration and new onset urinary frequency, normal pelvic exam, negative family history - with CA-125 of 18 (previously 15)*
- D. 1 months duration, normal pelvic exam, negative family history - with CA-125 of 37*
- E. 1 months duration, normal pelvic exam, negative family history - with CA-125 of 205*
- F. 1 months duration, mass on pelvic exam, negative family history - with CA-125 of 205*

*Post-Menopause 50 year old woman presenting with new bowel habit changes and bloating of*

- A. 1 months duration, normal pelvic exam, negative family history - with CA-125 of 15*
- B. 3 months duration, normal pelvic exam, negative family history - with CA-125 of 15 (stable)*
- C. 3 months duration and new onset urinary frequency, normal pelvic exam, negative family history - with CA-125 of 18 (previously 15)*
- D. 1 months duration, normal pelvic exam, negative family history - with CA-125 of 37*
- E. 1 months duration, normal pelvic exam, negative family history - with CA-125 of 205*
- F. 1 months duration, mass on pelvic exam, negative family history - with CA-125 of 205*

Northland DHB's response is set out in the following table.

<b>Premenopausal 36 year old women with new onset bowel habit changes and bloating of</b>	
<b>A.</b> 1 months duration, normal pelvic exam, negative family history - with CA-125 of 15	No scan
<b>B.</b> 3 months duration, normal pelvic exam, negative family history - with CA-125 of 15 (stable)	No scan
<b>C.</b> 3 months duration and new onset urinary frequency, normal pelvic exam, negative family history - with CA-125 of 18 (previously 15)	No scan, suggest gynae advice
<b>D.</b> 1 months duration, normal pelvic exam, negative family history - with CA-125 of 37	Request repeat Ca125 before scan
<b>E.</b> 1 months duration, normal pelvic exam, negative family history - with CA-125 of 205	Scan in 2-4 weeks
<b>F.</b> 1 months duration, mass on pelvic exam, negative family history - with CA-125 of 205	Scan within 2 weeks

<b>Post Menopause 50 year old woman presenting with new bowel habit changes and bloating of</b>	
<b>A.</b> 1 months duration, normal pelvic exam, negative family history - with CA-125 of 15	No scan
<b>B.</b> 3 months duration, normal pelvic exam, negative family history - with CA-125 of 15 (stable)	No scan
<b>C.</b> 3 months duration and new onset urinary frequency, normal pelvic exam, negative family history - with CA-125 of 18 (previously 15)	No scan, suggest gynae advice
<b>D.</b> 1 months duration, normal pelvic exam, negative family history - with CA-125 of 37	Scan in 2-4 weeks
<b>E.</b> 1 months duration, normal pelvic exam, negative family history - with CA-125 of 205	Scan within 2 weeks
<b>F.</b> 1 months duration, mass on pelvic exam, negative family history - with CA-125 of 205	Scan within 2 weeks

Northland DHB supports the open disclosure of information to assist public understanding of how we deliver our services. This includes proactive publication of anonymised Official Information Act responses on our website from 10 working days after they have been provided to you. Personal or identifying information will be redacted from any response published online. If you consider there are good reasons why this response should not be publicly available we will consider your views.

If you have any queries about Northland DHB's response to your information request please contact the Chief Executive's office in the first instance.

Yours sincerely



**John Wansbone**  
**Acting Chief Executive**