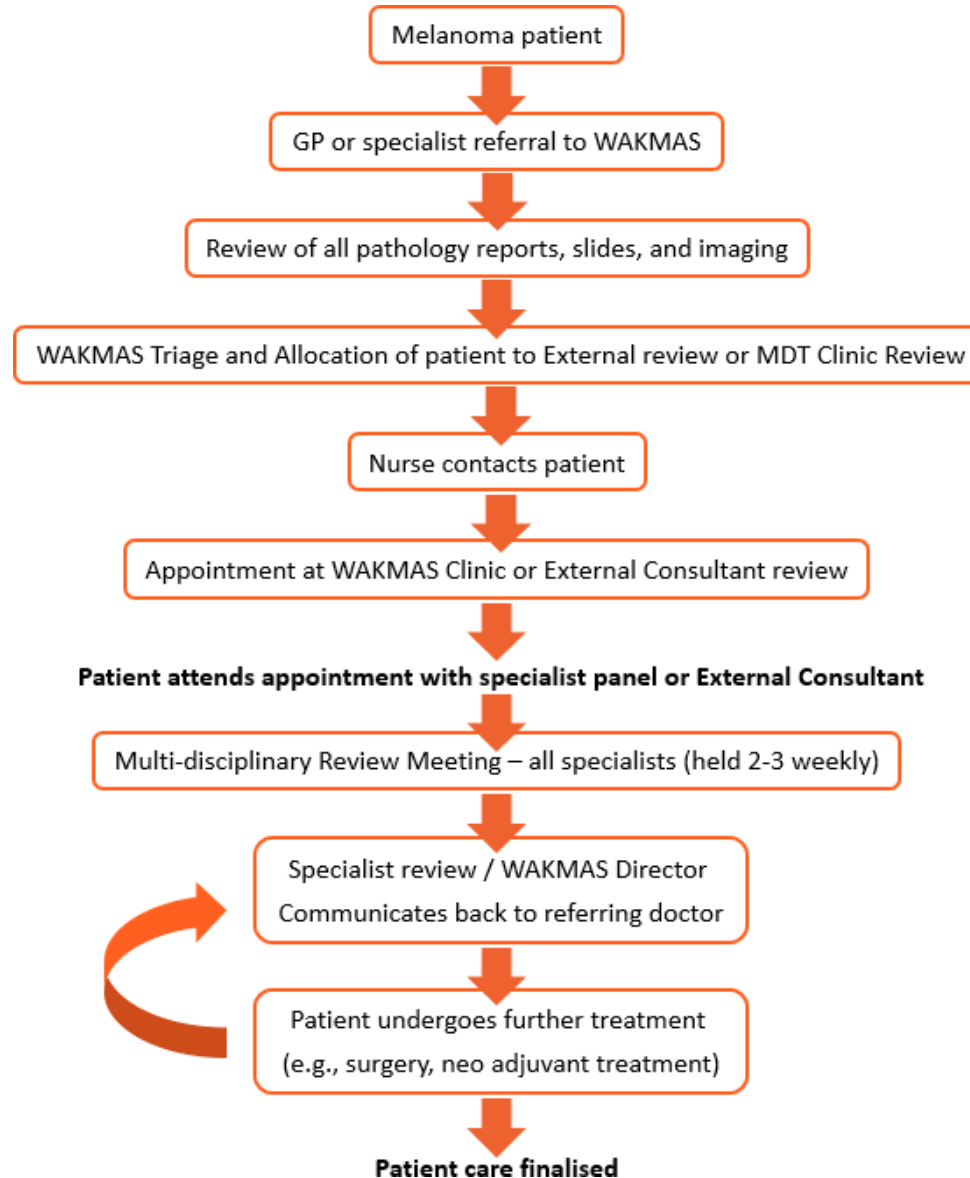


# PATIENTS JOURNEY THROUGH WAKMAS

PATIENT FEEDBACK

# Flow path for patients referred to WAKMAS



# TRIAGING REFERRALS

**PATHOLOGY** - To ascertain if a referral is suitable for WAKMAS and MDT involvement we first look at Breslow thickness and the nomogram risk.

- - Other things we look at include tumour characteristics such as ulceration, lymphovascular invasion, Tumour infiltrating lymphocytes, mitotic rate and regression.

**2. NOMOGRAM RISK** – Calculated using the MIA calculator.

**3. PATIENT AND PATIENT HISTORY**– This may include Age, prior melanomas, ECOG status(if known), Site of the melanoma and other medical history.



# TRIAGING REFERRALS

With all of the information we have gathered we either accept the referral for WAKMAS discussion and /or management and we contact the patient and prepare as much information as we can for the MDT.

Or if the melanoma does not meet the guidelines for WAKMAS discussion – Which as a general rule would apply to tumours with a Breslow thickness less than 0.8mm or a nomogram risk less than 5% with no other concerning features. The treating specialist is notified, and a letter is provided with the recommendations and guidelines from WAKMAS.

# Contacting the patient

- An experienced WAKMAS nurse first contacts the patient to discuss the referral and explain our role.
- Patients often feel relieved and reassured knowing that a team of specialists collaborates to review their case and agree on the best treatment plan.
- Depending on their needs, patients are referred publicly or privately to a plastic surgeon or in some cases a medical oncologist.
- WAKMAS also offers a pre-MDT clinic where patients can see a dermatologist, oncologist and plastic surgeon in a single appointment.
- All the information collected from patient appointments, nurse assessments and patient input is brought together and presented at the MDT.

# WAKMAS PANEL

5 pathologists

8 medical oncologists

4 Dermatologists

17 Plastic surgeons and 1 general surgeon

3 Nuclear Physicians

MDT clinic on site every 2-3 weeks (coordinated with MDT dates)

External Clinic review

MDT every 2-3 weeks on Monday evenings (approx 20 per year)



# AFTER THE MDT – COMMUNICATION!

COMMUNICATION WITH PATIENTS–  
Probably the most important! Many patients are anxious about what happened at the MDT. This communication provides them with some reassurance, some answers and some information about the plan and management of their melanoma.

COMMUNICATION WITH SPECIALISTS – COORDINATING CARE AFTER THE MDT. Every patient discussed at the MDT will have a letter +/- onward referrals created after the MDT. The letters explaining the treatment recommendations are reviewed by the wakmas medical director and then forwarded to the patients treating specialists. Any onward referrals are also completed in the days after the MDT

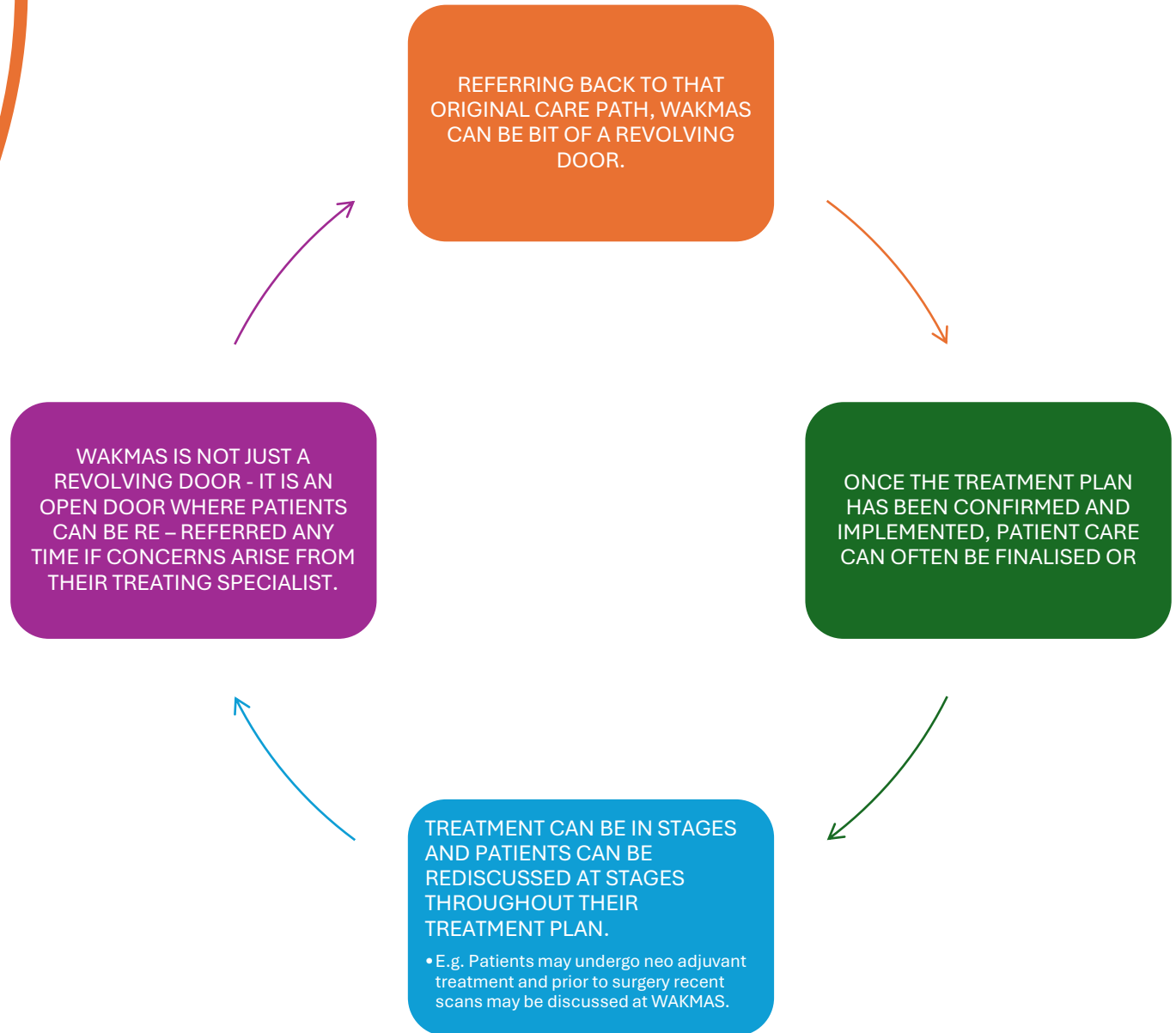
# FURTHER TREATMENT – WHAT ARE THE OPTIONS

SOME OF THE RECOMMENDATIONS FROM  
THE MDT MAY INCLUDE

- WLE
- WLE & SLNB
- NEOADJUVANT TREATMENT
- FURTHER SURGERY
- ADJUVANT TREATMENT
- CLINICAL TRIALS



# FINALISING CARE AT WAKMAS



# Patient Feedback

- This feedback and story was from a lovely gentleman who was actually seen in 2021 but sent through an email in August this year to express his gratitude and thanks.
- Mr Kw had a lump removed by a local GP which was a presumed cyst only to learn it was metastatic deposit and he was diagnosed with stage 4 melanoma with numerous lung metastases. Mr KW describes searching Dr Google where he learned and believed he had 2-4 months to live.
- This was during covid, so difficult times in any healthcare setting.
- He was located in QLD and was trying to get back to Perth but was directed through Darwin for two weeks because of our lockdown.
- He contacted WAKAMS and was booked into WAKMAS clinics on the day of his return. The WAKMAS team endeavoured to fast track his return to Perth.
- As per our clinics he was seen by a dermatologist, Plastic surgeon and oncologist.
- Mr KW went on to have further surgery and 12 months of immunotherapy and reports as of August 2025 he is feeling fit and well.



# Patient feedback 2024/2025

“ Very Professional” (July 2025)

“The people here are all lovely, it has been a pleasant visit”

“Clear and Concise advice” (Feb 2025)

“ I feel like I’m in safe hands” (Nov 2024)