

Patient information

Bladder Cancer - Your Diagnosis and Treatment Record

Urology Department

Name:

RQ

You have been diagnosed with Bladder Cancer and we are here to guide and support you. You can contact the Urology Cancer Hub on

Tel: 0151 282 6800

Text phone number: 18001 0151 282 6000 if you have any concerns or queries.

This is an answerphone that is checked regularly, so please leave a message including your name and date of birth.

Please note that this line is not for emergencies.

Your nominated

Clinical Nurse Specialist is:.....

Clinical Consultant is:.....

Your Bladder Cancer Stage and Grade at diagnosis

Date of Operation	Tumour Stage	Tumour Grade	Bladder Cancer Risk Group	Treatment Plan

Initial Test for Bladder Cancer

A number of procedures will have been used in the testing and assessment process. You will have had a full medical assessment as well as a full blood screen to assess kidney function, and a Urine test. Along with this you may also have had ultrasound scan of your kidneys, ureter and bladder flexible cystoscopy CT or MRI scan and Transurethral Resection of Bladder Tumour (TURBT).

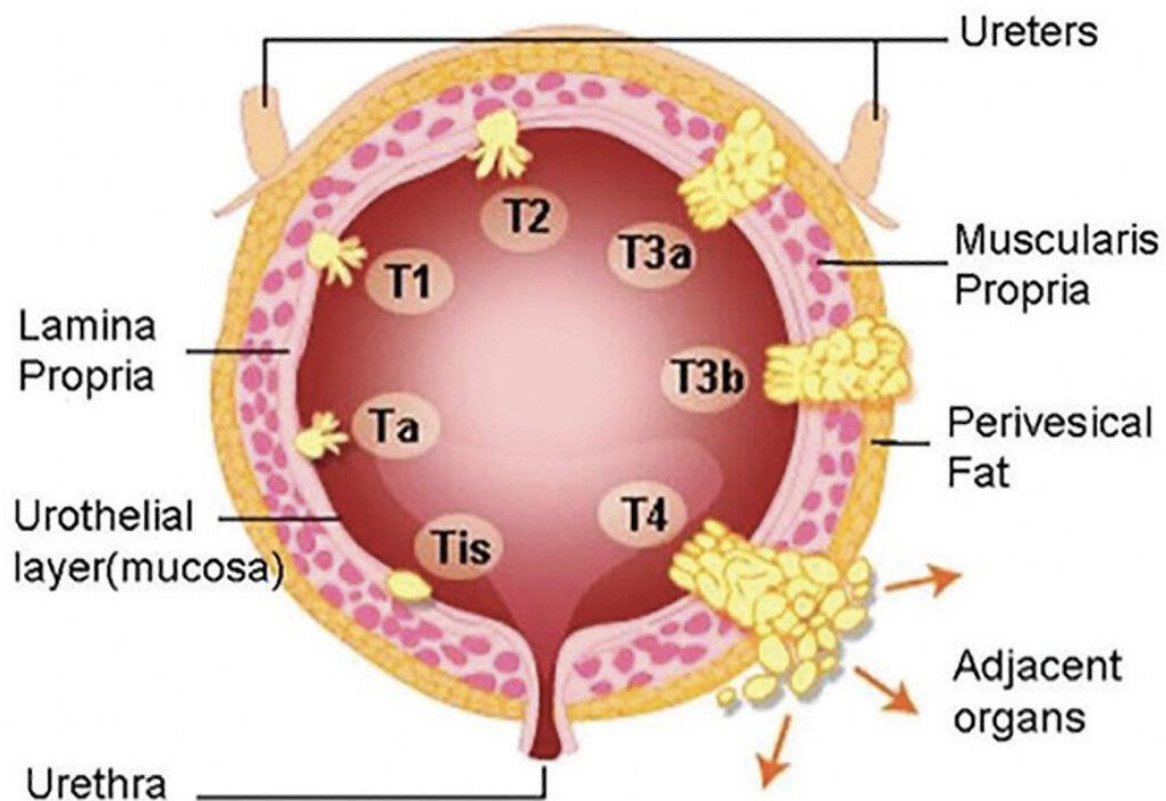
What happens after my tumour has been removed?

Once you have had your operation to remove the bladder tumour, the tissue samples removed will be analysed by a pathologist, who will provide us with information about the tumour **stage** and **grade**. This information, along with the size and number of tumours will help us decide how best to treat you.

The tumour **stage** tells us how deep the cancer goes into the wall of the bladder and tumour **grade** tells us how abnormal the cancer cells look under the microscope. Taken together, these can provide information about how your bladder tumour is likely to behave.

Tumour Stage (T)

Broadly speaking, bladder cancers can be divided into one of three categories according to their stage: **Non-muscle invasive**, **Muscle invasive** and **Metastatic bladder cancer**.



TNM staging for non-muscle-invasive bladder cancer

Non-muscle-invasive bladder cancer means the cancer cells are only in the inner lining of the bladder. This means non-muscle-invasive bladder cancers are always N0 and M0.

- **Carcinoma in situ (CIS)**

This is sometimes described as a flat tumour. The cancer cells are only in the inner layer of the bladder lining (urothelium).

- **Ta**
The tumour is a mushroom-like growth (papillary cancer). It is only in the inner layer of the bladder lining.
- **T1**
The tumour has started to grow into the layer of connective tissue, beneath the bladder lining.

Some people may have both papillary cancer and CIS.

TNM staging for muscle-invasive and advanced bladder cancer

Muscle-invasive and advanced bladder cancer is staged as T2 to T4 . Your doctor or specialist nurse can tell you more about the stage of the bladder cancer you have.

T - tumour

- T2 tumours have grown into the muscle of the bladder wall.
- T3 tumours have grown through the muscle of the bladder and into the fatty tissue around the bladder.
- T4 tumours have spread to other parts of the body [near the bladder](#) or in the pelvis.

N - lymph nodes

- N0 means there is no cancer in the [lymph nodes](#).
- N1 means the cancer is in one of the lymph nodes in the pelvis, near the bladder.
- N2 means the cancer is in more than one lymph node in the pelvis.
- N3 means there is cancer in one or more of the lymph nodes further away from the bladder but in the tummy (abdomen).

M - Metastasis

- M0 means the cancer has not spread to other parts of the body.
- M1 means the cancer has spread to other parts of the body, such as the bones, lungs, liver, or lymph nodes outside the tummy.

Tumour Grade (G)

In addition to stage, bladder cancers can be graded into one of 3 grades, according to how abnormal the cancer cells look under a microscope:

- **Grade 1** - The cancer cells look very like normal cells, tend to grow slowly and generally stay in the lining of the bladder. They are also referred to as low-grade or well-differentiated tumours.
- **Grade 2** - The cancer cells look a little more abnormal and are more likely to spread into the deeper (muscle) layer of the bladder or come back after treatment. They are known as moderately differentiated tumours.

- **Grade 3** - The cancer cells look very abnormal and are more likely to come back after treatment and spread into the deeper (muscle) layer of the bladder. They grow more quickly and are also referred to as high-grade or poorly differentiated tumours.

<https://www.cancerresearchuk.org/about-cancer/bladder-cancer/types-stages-grades/grades>

Risk Groups for Non-Muscle Invasive Bladder Cancer

By combining information about the tumour grade and stage alongside the size and number of tumours, non-muscle invasive bladder tumours can be divided into **low**, **intermediate** and **high-risk** groups. These risk groups are important as they help determine how long and frequently your bladder needs to be inspected in the future and they help guide what treatments you should receive. In General

- **low-risk** tumours are unlikely to recur or progress,
- **Intermediate risk** tumours are at risk of recurrence, they tend not to progress.
- **high-risk** tumours are at high risk of doing both.

Your Treatment Pathway

There are national standards, treatment pathways and guidelines for every cancer type and these are adapted by healthcare providers to best suit the needs of the local population.

The healthcare team looking after you need as much information about your bladder cancer as possible, so they can recommend the best treatment. This may mean that you require further tests before your treatment pathway is finalised.

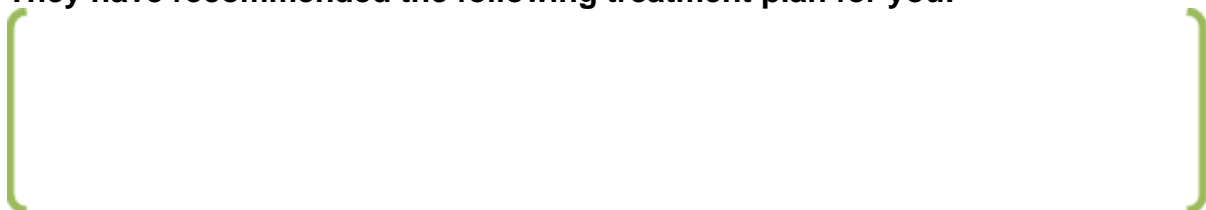
You can ask your clinical team for a copy of the treatment pathway for your type of bladder cancer and can also refer to the NICE guidelines regarding these treatment pathways: <https://www.nice.org.uk/guidance/ng2/ifp/chapter/About-this-information>

You have been discussed at a Multi-Disciplinary Team (MDT) Meeting

The multidisciplinary team consists of a team of doctors and nurses who treat bladder cancer and are there to ensure you receive the best treatment, including consideration for any clinical trials that may be suitable for you.

Whilst this team will include many people involved in your care, the core members will include a Clinical Nurse Specialist (CNS), a Urology Consultant and an oncologist, pathologist and radiologist.

They have recommended the following treatment plan for you:



You will be given additional information about your treatment

Clinical Trials in Bladder Cancer

You can ask your consultant if they know of any clinical trials that you may be eligible to join. Whilst taking part in a clinical trial may not benefit you directly, it may help future patients by testing treatments to see if they improve life expectancy and/or quality of life. Trials aim to find out if new treatments or procedures are safe and better than the current treatments available.

If you are interested in taking part in a clinical trial, please read more at:

<http://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial>

You can also search for information and register your interest in taking part in research via the website: <https://bepartofresearch.nihr.ac.uk/>

‘Be Part of Research’ is a website run by the National Institute of Health and Research to help people find and contact *research* studies taking place across the *UK*.

My Questions

You may find it useful to use this space to write down any questions that you have:

Feedback

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

Further information

For queries about your appointment, contact the hospital you have been referred to;

**Royal Liverpool Hospital Urology Department
Tel: 0151 282 6877/6788
Text phone number: 18001 0151 282 6877/6788**

**Aintree Hospital Patient Appointment Centre
Tel: 0151 529 4550
Text phone number: 18001 529 4550**

Urology Specialist Nurses

**Royal Liverpool Hospital Urology Specialist Nurses
Tel: 0151 282 6800
Text phone number: 18001 0151 282 6800**

**Aintree Hospital Urology Specialist Nurses
Tel: 0151 529 3484
Text phone Number; 18001 0151 529 3484**

**Cancer Hub Royal Liverpool Hospital
Tel: 0151 282 6818
Text phone Number: 18001 0151 282 6818**

Bladder Cancer Support and National Bladder Cancer Charities

Action Bladder Cancer

Action Bladder Cancer UK (previously Action on Bladder Cancer) was set up in 2009 by a group of urologists and patients who were committed to improving outcomes for bladder cancer patients

Patient trustees provide the insight of direct personal experience

They are also active and leading members of advisory panels, patient support groups and regional cancer networks.

How to contact Action Bladder Cancer

**Website <https://actionbladdercanceruk.org/contact/>
Email info@actionbladdercacneruk.org
Telephone 0300 302 0085**

Fight Bladder Cancer

Is a patient and carer led charity set up to Support people affected by bladder cancer; Raise awareness about the causes and treatments of bladder cancer, so it can be caught early

How to contact Fight Bladder Cancer

Website: <http://fightbladdercancer.co.uk>

Email: support@fightbladdercancer.co.uk

Tel: 01844 351621

MacMillan Cancer Support

There to help everyone with cancer live life as fully as they can, by providing physical, financial and emotional support.

How to Contact Macmillan

Website <https://www.macmillan.org.uk/cancer-information-and-support>

Email: contact@macmillan.org.uk

Tele: 0808 808 00 00 00

The Urostomy Association

Has been in existence for over 45 years, and has local branches around the UK,

They:

- Specialise in support for people with a urinary diversion and cover urostomies, continent diversions and neo-bladder / bladder reconstructions.
- Offer support via a regular magazine, leaflets, trained volunteers, closed Facebook group, website and telephone helpline.

How to contact The Urostomy Association

Website: <https://urostomyassociation.org.uk/information/>

Tel: 01889 563191 between 8.30am to 5pm Monday to Friday
with answerphone at other times.

Author: Urology Department

Review date: November 2026

All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

يمكن توفير جميع المعلومات المتعلقة بالمرضى الموافق عليهم من قبل ائتمان المستشفى عند الطلب بصيغ أخرى، بما في ذلك لغات أخرى وبطرق تسهل قراءتها وبالحروف الطباعية الكبيرة وبالصوت وبطريقة برايل للمكفوفين وبطريقة مون والإلكترونية.

所有經信托基金批准的患者資訊均可以其它格式提供，包括其它語言、易讀閱讀軟件、大字

體、音頻、盲文、穆恩體 (Moon) 盲文和電子格式，敬請索取。

در صورت تمایل می‌توانید کلیه اطلاعات تصویب شده توسط اتحادیه در رابطه با بیماران را به اشکال مختلف در دسترس داشته باشید، از جمله به زبانهای دیگر، به زبان ساده، چاپ درشت، صوت، خط مخصوص کوران، مون و بصورت روی خطی موجود است.

زانیاری پیوندیدار بهو نه‌خوشانه‌ی له‌لایمن تراسته‌وه په‌سمند کراون، نه‌گهر داوا بکرنیت له فورماته‌کانی تردا بریتی له زمانه‌کانی تر، نیزی رید (هاسان خونندنه‌وه)، چاپی گموره، شریتی دهنگ، هیللی موون و نه‌لیکترونیکی هه‌یه.

所有经信托基金批准的患者信息均可以其它格式提供，包括其它语言、易读阅读软件、大字
体、音频、盲文、穆恩体 (Moon) 盲文和电子格式，敬请索取。

Dhammaan warbixinta bukaanleyda ee Ururka ee la oggol yahay waxaa marka la codsado lagu heli karaa nuskhado kale, sida luqado kale, akhris fudud, far waaweyn, dhegeysi, farta braille ee dadka indhaha la', Moon iyo nidaam eletaroonig ah.