GUIDELINES FOR URGENT REFERRAL OF PATIENTS WITH SUSPECTED CANCER

LUNG CANCER
- Urgent Referral for Chest X-Ray
  - Haemoptysis
  - Unexplained or persistent cough
  - Cough
  - Chest/chest wall pain
  - Weight loss
  - Lymphadenopathy
  - Persistent or recurrent cough

UPPER G.I. CANCER
- Urgent Referral
  - Dysphagia – Food sticking on swallowing (any age)
  - Dysphagia at any age combined with one or more of the following signs:
    - weight loss
    - proven anaemia
    - vomiting
  - Dysphagia in a patient aged 55 years or more with at least one of the following high risk features:
    - onset of dysphagia less than one year ago
    - continuous symptoms since onset
    - Dysphagia combined with at least one of the following known risk factors:
      - Family history of Upper GI cancer in more than 2 first degree relatives
      - Barrett’s oesophagus
      - Peptic ulcer surgery over 20 years ago
      - Known dysplasia, atrophic gastritis, intestinal metaplasia
      - Jaundice
      - Upper abdominal mass
  - Age 50 years is considered to be the maximum age threshold. Local Cancer Networks may elect to set a lower age threshold (e.g. 55 years or 45 years).

LOWER G.I. CANCER
- Urgent Referral
  - Rectal bleeding persistently WITHOUT anal symptoms
  - Change of bowel habit to looser stools and/or increased frequency of defecation for 6 weeks.

BREAST CANCER
- Urgent Referral
  - Patients with a discrete lump in the appropriate age group (e.g. age >30)
  - Signs which are highly suggestive of cancer such as:
    - Ulceration
    - Skin nodule
    - Skin distortion
    -ipple eczema
  - Recent nipple retraction of distortion (>3 months)

Conditions that require referral – but not necessarily urgently
- Lump
  - Discrete lump in a younger women (e.g. age <30 years)
  - Asymmetrical nodularity that persists at review after menstruation
  - Abscess
  - Persistently reffiring or recurring cyst

Nipple Discharge
- Age > 50 with bilateral discharge sufficient to stain clothes
- Age < 50 with bloodstained discharge
- Age > 50 with any nipple discharge

SKIN CANCERS
- Urgent Referral
  - Pigmented lesions on any part of the body which have one or more of the following features:
    - growing in size
    - changing shape
    - irregular outline
    - changing colour
    - mixed colour
  - Ulceration

NECK CANCER
- Urgent Referral
  - Elevation
  - Size > 5 cms
  - Prolonged post-ictal focal deficit
  - Status epilepticus

BRAIN TUMOURS
- Urgent Referral
  - Subacute progressive neurological deficit
  - Weight loss
  - Onset of dysphagia less than one year ago

SARCOMA
- Urgent Referral
  - A soft tissue mass with one or more of the following characteristics:
    - Size < 5 cm
    - Painful
    - Increasing in size
    - Deep to fascia

CHILDMEN CANCEcers
- Urgent Referral
  - Abnormal blood count: if reported as requiring urgent further investigation.
  - Patches/Tinea: These findings are always an indication for recent infections.
  - Fatigue: A previously healthy child when combined with either of the following:
    - generalised lymphadenopathy
    - hepatosplenomegaly
  - Bone Pain: especially if it is:
    - licence or involves the back
    - persistently localized at any site
    - requiring analgesia
    - Limiting activity

LYMPHADENOPATHY: More frequently benign in younger children but referral is advised if one or more of the following characteristics are present, particularly if there is no evidence of previous local infection:
  - tender, firm, or >3 cms in maximum diameter
  - progressively enlarging
  - associated with other signs of general ill health, fever and/or weight loss
  - involves axillary nodes (in the absence of any local infection or dermatitis) or supravacular nodes
  - seen as a mediastinal or hilar mass on chest x-ray

HEADACHE: of recent origin with one or more of the following features:
  - increasing in severity or frequency
  - noted to be worse in the mornings or causing early wakening
  - associated with vomiting
  - associated with neurological signs (e.g. spuit, ataxia)
  - associated with behavioral change or deterioration in school performance

SOFT TISSUE MASS: any mass which occurs in an unusual location should be considered suspicious, particularly if associated with one or more of the following characteristics:
  - shorn rapid or progressive growth
  - size > 3 cm in maximum diameter
  - fixed or deep to fascia
  - associated with regional lymph node enlargement

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UROGENITAL CANCER
- Urgent Referral
  - Neoplasms of cervix or vulva on speculum examination.
  - Suspicious neoplasms of cervical or vulval surface
  - Papillary pelvic mass not obviously fibroid
  - Suspicious pelvic mass on pelvic ultrasound.

HEMATOLOGICAL CANCERS
- Urgent Referral
  - Leucemic crisis or monocytosis
  - Prolymphocytic leukaemia
  - Prolymphocytic leukemia
  - Bone marrow involvement in leukaemia
  - Injection of marrow aspirate
  - Signs of leukaemic meningitis
  - Signs of leukaemic peritoneum

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