

**Suspected Cancer in Adults
Malignancy of Unknown Origin
(Fast track)**

Date of referral **Short date letter merged**

Name:	Full Name	DOB:	Date of Birth	NHS No	NHS Number
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Please confirm the following mandatory requirements

- Patient has been informed that this is an urgent referral for suspected cancer
- The patient is available and willing to attend hospital for tests/appointment within 14 days
- The patient has been given the Fast track patient information leaflet

Hyperlinks to: [NICE GUIDANCE](#) [Patient info leaflet including easy read](#)

Guidance	THIS IS <u>NOT</u> A VAGUE/UNEXPLAINED SYMPTOMS PATHWAY		
	REFERRALS MUST MEET ALL THE FOLLOWING CRITERIA:	YES	NO
	Patient has had either MRI, CT or ultrasound showing metastatic malignancy with no apparent primary site	<input type="checkbox"/>	
	There is no clinical indication of a primary site on history/exam	<input type="checkbox"/>	
	A CXR has been done and is normal (unless CT chest already done)	<input type="checkbox"/>	
	Male patients have had a PSA done and it is in the normal range	<input type="checkbox"/>	
	Patients with bone metastases have had a myeloma screen done (serum electrophoresis & serum free light chains) and is normal	<input type="checkbox"/>	
	Female patients with peritoneal disease have had CA125 checked and been considered for urgent gynaecology referral	<input type="checkbox"/>	
	It is expected that:		
	Do not refer Patients with a current known primary cancer to the CUP team, please refer them directly to the primary cancer site team.		
If the patient is unwell, the GP will consider admission to their local hospital.			
If in doubt about the indication for referral or to discuss any tests that may be done in parallel to this referral, please contact the local CUP team.			

Referral	ALL TRUSTS HAVE A CANCER OF UNKNOWN PRIMARY TEAM	
	<u>Referrals to the following Trusts can be made using this form</u>	
	Please send BOTH this 'service form' AND the 'Referral header sheet'	
	For URGENT attention of the CUP Team	
	Northumbria	[enter contact details]
	Durham and Darlington	Refer via malignancy of unknown origin on eRS – all referrals will be triaged before patients are given an appointment. Local contacts for advice only: Dr Sarah Jordon, Consultant Gastroenterologist and AOS/CUP Lead 013388 455174 Dr Steve Cowie, Respiratory Consultant and CUP Advisor 01325 743490
	Newcastle	Secure email to: tnu-tr.ncccuponcologyrefer@nhs.net CUP nurse specialists: 0191 2448419 CUP team secretary: 0191 2138471 CUP lead clinician (anonymised advice only): Christopher.jones@nuth.nhs.uk
	North Cumbria	Referrals can be sent via the advice and guidance process on eRS Local contacts for anonymised advice only: Syed.Haider@ncuh.nhs.uk kerry.Miles@ncuh.nhs.uk
	Do not use this form in other areas (Gateshead, Sunderland, South Tyneside, Teesside)	
	Other areas	Contact the local hospital CUP team for advice before referring

Reason form Referral – Compulsory

(Please include why patient initially attended, relevant PMH, examination findings and what they know.)

The clinical information is essential to safe and effective care of your patient

Performance Status	<input type="checkbox"/>	0	Fully active
	<input type="checkbox"/>	1	Cannot carry out heavy physical work
	<input type="checkbox"/>	2	Up and about more than half the day and can look after yourself
	<input type="checkbox"/>	3	In bed or sitting in a chair for more than half the day and need help in looking after yourself
	<input type="checkbox"/>	4	In bed or a chair all the time and need a lot of looking after

Please indicate COVID 19 risk:		
<input type="checkbox"/>	Standard	No co-morbidities
<input type="checkbox"/>	Vulnerable	Co-morbidities/frailty
<input type="checkbox"/>	Shielded	In the shielded group because of high risk from COVID 19 infection

Radiology results: In the past 6 months Please attach relevant radiology results to this referral

WEIGHT: Single Code Entry: Body weight Single Code Entry: Body weight Single Code Entry: Body weight

Blood tests within 2 months – REQUIRED

If blood results to not appear below but have been requested, please 'X' appropriate boxes and add date)

PSA	<input type="checkbox"/> Requested Date: <input type="text"/>			
	Result within 2 months REQUIRED		Latest Result	
PSA level	Single Code Entry: PSA (prostate-specific antigen) level	Single Code Entry: PSA (prostate-specific antigen) level	Single Code Entry: PSA (prostate-specific antigen) level	Single Code Entry: PSA (prostate-specific antigen) level

HbA1c	<input type="checkbox"/> Requested Date: <input type="text"/>		
	Result within 2 months REQUIRED		Latest Result

HbA1c	Single Code Entry: Haemoglobin A1c level - International Federation of Clinical Chemistry and Laboratory Medicine standardised	Single Code Entry: Haemoglobin A1c level - International Federation of Clinical Chemistry and Laboratory Medicine standardised	Single Code Entry: Haemoglobin A1c level - International Federation of Clinical Chemistry and Laboratory Medicine standardised	Single Code Entry: Haemoglobin A1c level - International Federation of Clinical Chemistry and Laboratory Medicine standardised
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LFTs	<input type="checkbox"/> Requested Date: <input type="text"/>			
	Result within 2 months REQUIRED		Latest Result	
Bilirubin	Single Code Entry: Serum bilirubin level...	Single Code Entry: Serum bilirubin level...	Single Code Entry: Serum bilirubin level...	Single Code Entry: Serum bilirubin level...
Alkaline Phosphatase	Single Code Entry: Serum alkaline phosphatase level	Single Code Entry: Serum alkaline phosphatase level	Single Code Entry: Serum alkaline phosphatase level	Single Code Entry: Serum alkaline phosphatase level
ALT	Single Code Entry: Serum alanine aminotransferase level	Single Code Entry: Serum alanine aminotransferase level	Single Code Entry: Serum alanine aminotransferase level	Single Code Entry: Serum alanine aminotransferase level
Gamma GT Level	Single Code Entry: GGT (gamma-glutamyl transferase) level	Single Code Entry: GGT (gamma-glutamyl transferase) level	Single Code Entry: GGT (gamma-glutamyl transferase) level	Single Code Entry: GGT (gamma-glutamyl transferase) level
Albumin	Single Code Entry: Serum albumin level...	Single Code Entry: Serum albumin level...	Single Code Entry: Serum albumin level...	Single Code Entry: Serum albumin level...
Globulin	Single Code Entry: Serum globulin level...	Single Code Entry: Serum globulin level...	Single Code Entry: Serum globulin level...	Single Code Entry: Serum globulin level...
Total Protein	Single Code Entry: Serum total protein...	Single Code Entry: Serum total protein...	Single Code Entry: Serum total protein...	Single Code Entry: Serum total protein...

FBCs/ferritin	<input type="checkbox"/> Requested Date: <input type="text"/>			
	Result within 2 months REQUIRED		Latest Result	
Haemoglobin	Single Code Entry: Haemoglobin estimation	Single Code Entry: Haemoglobin estimation	Single Code Entry: Haemoglobin estimation	Single Code Entry: Haemoglobin estimation
WCC	Single Code Entry: Total white cell count	Single Code Entry: Total white cell count	Single Code Entry: Total white cell count	Single Code Entry: Total white cell count
MCV	Single Code Entry: MCV - Mean corpuscular volume	Single Code Entry: MCV - Mean corpuscular volume	Single Code Entry: MCV - Mean corpuscular volume	Single Code Entry: MCV - Mean corpuscular volume
Platelets	Single Code Entry: Platelet count	Single Code Entry: Platelet count	Single Code Entry: Platelet count	Single Code Entry: Platelet count
Ferritin	Single Code Entry: Serum ferritin level	Single Code Entry: Serum ferritin level	Single Code Entry: Serum ferritin level	Single Code Entry: Serum ferritin level

U&Es	<input type="checkbox"/> Requested Date: <input type="text"/>			
	Result within 2 month REQUIRED		Latest Result	
Sodium	Single Code Entry: Serum sodium level	Single Code Entry: Serum sodium level	Single Code Entry: Serum sodium level	Single Code Entry: Serum sodium level

Potassium	Single Code Entry: Serum potassium level	Single Code Entry: Serum potassium level	Single Code Entry: Serum potassium level	Single Code Entry: Serum potassium level
Urea Level	Single Code Entry: Serum urea level	Single Code Entry: Serum urea level	Single Code Entry: Serum urea level	Single Code Entry: Serum urea level
Creatinine	Single Code Entry: Serum creatinine level	Single Code Entry: Serum creatinine level	Single Code Entry: Serum creatinine level	Single Code Entry: Serum creatinine level
CA125	Single Code Entry: CA-125 (cancer antigen 125) arbitrary concentration in serum...	Single Code Entry: CA-125 (cancer antigen 125) arbitrary concentration in serum...	Single Code Entry: CA-125 (cancer antigen 125) arbitrary concentration in serum...	Single Code Entry: CA-125 (cancer antigen 125) arbitrary concentration in serum...

eGFR result within 2 months **REQUIRED** **Requested** **Date:**

Single Code Entry: eGFR (estimated glomerular	Single Code Entry: GFR (glomerular filtration rate)	Single Code Entry: GFR (glomerular filtration rate)	Single Code Entry: GFR (glomerular filtration rate)
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eGFR latest result

Single Code Entry: eGFR (estimated glomerular	Single Code Entry: eGFR (estimated glomerular	Single Code Entry: eGFR (estimated glomerular	Single Code Entry: eGFR (estimated glomerular
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Myeloma Screen	<input type="checkbox"/> Requested Date: <input type="text"/>	
	Latest Result	Date
Serum Kappa level	Single Code Entry: Serum kappa light chain level	Single Code Entry: Serum kappa light chain level
Serum Lambda level	Single Code Entry: Serum lambda light chain level	Single Code Entry: Serum lambda light chain level
Serum Kappa lambda ratio	Single Code Entry: Serum kappa:lambda light chain ratio	Single Code Entry: Serum kappa:lambda light chain ratio
Bence jones Protein	Single Code Entry: Urine Bence Jones protein	Single Code Entry: Urine Bence Jones protein
Serum paraprotein level	Single Code Entry: Serum paraprotein level	Single Code Entry: Serum paraprotein level
Serum total protein	Single Code Entry: Serum total protein...	Single Code Entry: Serum total protein...
IgM (Immunoglobulin M)	Single Code Entry: IgM	Single Code Entry: IgM
Others	<input type="text"/>	

 **Medical History** This section is unlocked.

Note to referrer: Extraneous/sensitive information **MUST BE DELETED** from the Medical History below

Problems

Medication

Allergies

Please complete the rest of this form

Referrer details

Name of referrer:	Referring User <input type="text"/>	Date of referral:	Short date letter merged
Referring Organisation		GP details	
Organisation Name , Organisation Full Address (single line) Tel: Organisation Telephone Number Email: Organisation E-mail Address Fax: Organisation Fax Number		Usual GP Full Name Usual GP Organisation Name Usual GP Full Address (single line) Tel: Usual GP Phone Number Fax: Usual GP Fax Number	
Name of GP to address correspondence to, if different to accountable GP		<input type="text"/>	

Patient details

Name:	Full Name	Address:	Home Full Address (stacked)
Gender:	Gender(full)		
DOB & Age:	Date of Birth Age: Age		
NHS number:	NHS Number		
Patient Contacts:	Home:	Patient Home Telephone	Mobile: Patient Mobile Telephone
	Work:	Patient Work Telephone	Email: Patient E-mail Address
	Carer/Advocate: The patient has confirmed the following person should be included in correspondence – Name: <input type="text"/> Contact Details: <input type="text"/>		
Contact Consent:	<input type="checkbox"/> Can leave message on answer machine <input type="checkbox"/> Can contact by text <input type="checkbox"/> Can contact by Email		NB: Not all services use Texts or Emails as a method of communication.
Ethnicity:	Ethnic Origin		
Interpreter:	<input type="checkbox"/> Yes Language: Single Code Entry: Main spoken language English... <input type="text"/>		
Accessibility Needs:	<input type="checkbox"/> Wheelchair access <input type="checkbox"/> Deaf Single Code Entry: Partial deafness... <input type="checkbox"/> Registered Blind Single Code Entry: Registered blind <input type="checkbox"/> Learning Disability, Single Code Entry: On learning disability register Single Code Entry: Moderate learning disability... <input type="checkbox"/> Other disability needing consideration <input type="text"/> <input type="checkbox"/> Accompanied by Carer		
Risks:	<input type="checkbox"/> Vulnerable Adult (Details of any recording within last 3 yrs) Single Code Entry: Vulnerable adult Single Code Entry: No longer a vulnerable adult... Single Code Entry: Difficult intubation Other: <input type="text"/>		
Other: Single Code Entry: Military veteran Single Code Entry: Left military service Single Code Entry: History relating to military service Single Code Entry: History relating to Army service... Single Code Entry: Has a carer Single Code Entry: Is no longer a carer Single Code Entry: Is a carer			

Accessible information

Communication support: Uses a legal advocate...

Contact method: Requires contact by telephone...

Information format: Requires information verbally...

Professional required: Interpreter needed - British Sign Language...

[If you have any problem with this form or suggested changes, please control & click here to open direct email.](#) (NB: NOT TO BE USED FOR REFERRING A PATIENT) NCA MUO (malignancy of unknown origin) Fast track October 2023 referral form EMIS Web SNOMED CDRC

To be completed by the Data Team (Insert Dates)

Received: / /	First Appointment booked: / /
First Appointment date: / /	1 st seen: / /
Specify reason if not seen on 1 st appointment:	
Diagnosis: Malignant <input type="checkbox"/>	Benign <input type="checkbox"/>