

Date of referral **Short date letter merged**

Name:	Full Name	DOB:	Date of Birth	NHS No	NHS Number
--------------	------------------	-------------	----------------------	---------------	-------------------

Attach this form to the e-referral within 24 hours

If the ERS not available, then send [this form](#) **AND** [‘Referral header sheet’](#) by secure email to tnu-tr.sarcomaadvice@nhs.net

For advice only (using a secure email address) **please send to: tnu-tr.sarcomaadvice@nhs.net**

For use by all teams including GP’s referring patients with a suspected or confirmed bone, soft tissue or abdominal/retroperitoneal tumour. Patients referred using this form will be seen within 2 weeks, but often much sooner.

- 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: [Referring criteria and contact number to discuss referral](#) [Service Information](#)
[NICE GUIDANCE](#) [Patient info leaflet including easy read](#)

BONE PAIN

Patients with undiagnosed bony pain should receive an x-ray. If the x-ray is normal but pain persists, consider following up and repeating the x-ray, performing bone function tests or making a non-urgent referral.

SOFT TISSUE MASS

Request an urgent USS to be performed and reported within 2 weeks for people with an unexplained lump increasing in size (note guidance for head and neck lumps – refer to head and neck clinic)

Lumps are more suspicious of sarcoma if they are: >5cm diameter, painful, increasing in size, deep to fascia, fixed.

RECURRENCE

If there is a suspected recurrence of sarcoma following previous excision – please refer direct to Fast track sarcoma – **DO NOT WAIT FOR USS**

Guidance

SUSPECTED PRIMARY BONE TUMOUR

Specify Body Site:

Suspicious X-ray showing: (please mark)

- Spontaneous Fracture
- Bone Destruction
- Soft Tissue Swelling
- New Bone Formation
- Periosteal Elevation

Please attach radiology results

SUSPECTED SOFT TISSUE SARCOMA

Specify Body Site:

Suspicious USS indicating soft tissue sarcoma or uncertain results where clinical concern remains. Please indicate any additional significant features: **Please attach radiology results**

- >5cm in size
- Deep in Fascia
- Recurrence following excision
- Painful
- Increasing in size
- Fixed
- Other

Suspected Soft Tissue Sarcomas at non limb/trunk sites including the abdomen or retroperitoneum

Do not refer HIV-associated Kaposi’s sarcoma with this form

please send via e-referral to Infectious Diseases at the Royal Victoria Infirmary

Is there imaging available?

YES NO

If yes, at which hospital and when was it done?

Is there histology available?

YES NO

If yes, at which hospital and when was it done?

Reason form Referral – Compulsory

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

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

Blood results/investigations

LFTs	<input type="checkbox"/> Requested Date: <input type="text"/>			
	Result within 3 months		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

FBCs	<input type="checkbox"/> Requested Date: <input type="text"/>			
	Result within 3 months		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:	Single Code Entry:	Single Code Entry:	Single Code Entry:

	Platelet count	Platelet count	Platelet count	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 3 months		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

eGFR result within 3 months **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)
--	--	--	--

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 Sarcoma Fast track October 2023 Referral Form EMIS Web SNOMED

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"/>	