

CANCER PROGRAM REFERRAL GUIDE

DISEASE SITE		PATIENTS APPROPRIATE FOR REFERRAL	TESTS REQUIRED	PROVIDE IF AVAILABLE
THORACIC	Lung	Suspicious nodule(s) / lesion / mass on CT thorax	CT Scan thorax	Pathology report Pulmonary Function Test (PFT); Chest x-ray
	Gastric	Biopsy proven gastric cancer or high grade dysplasia	Pathology report	CT Scan abdomen and pelvis
	Esophageal	Biopsy proven esophageal cancer or high grade dysplasia	Pathology report	CT Scan thorax
BREAST	Women's Breast Health Centre (WBHC)	Breast abnormalities including suspicious lumps, nipple discharge or other abnormalities - please request appropriate imaging prior to WBHC physician referral . Fax a breast imaging requisition or enter CPOE order for appropriate imaging (F:613-761-4405). Following imaging, send a referral to the WBHC for consultation as required. Please indicate at time of referral if the following clinical/ imaging criteria are present (mass > 5 cm, peau d'orange, extensive erythema of the skin, clinically fixed breast mass, etc.). Patients with confirmed breast cancer can be referred to the WBHC for surgical consultation	<p>≥ 35 years: mammogram and ultrasound</p> <p>< 35 years: ultrasound</p> <p>Pathology report if biopsy not performed at the WBHC</p>	
	Direct to Oncology	Patients with a confirmed diagnosis of breast cancer and have had a surgical consultation	Pathology report including ER/PR/Her2 on the specimen (core biopsy and/or surgical pathology) Mammogram report Operative report	Chest X-ray Echo (measure ejection fraction) and MUGA Imaging reports or diagnostic reports
COLORECTAL	Colon/rectal/ anal (Surgical assessment)	Positive pathology Suspicious lesion-pending Suspicious lesion-discordant Abnormal imaging		Pathology report Endoscopy report
		Direct to oncology- Patients with a confirmed diagnosis of colorectal cancer	Pathology report	CT Scan (abdomen and pelvis) Blood work: CEA value
GU	Prostate (Surgical assessment)	Patients requiring an evaluation for a possible prostate cancer	PSA reports (current & previous)	Pathology report
		Direct to oncology- Patients with a confirmed diagnosis of prostate cancer	Pathology report	Trans Rectal UltraSound (TRUS) report
	Bladder	Patients with invasive, metastatic, or confirmed bladder cancer	Transurethral resection of the bladder tumour (TURBT) pathology report	Imaging reports Pathology report
	Kidney	Direct to oncology- Patients with a confirmed diagnosis of kidney cancer	CT scan (abdomen and pelvis)	CT Scan (head and/or chest) Relevant MRI (e.g. abdomen and pelvis) Ultrasound (e.g. abdomen and pelvis) Operative Report Surgical Pathology (e.g. previous nephrectomy)
	Testes	Direct to oncology- Patients with a confirmed diagnosis of testicular cancer	Ultrasound of testes serum tumour marker: βHCG, LDH, AFP	CT Scan (chest and/or abdomen and pelvis) Chest X-ray; Operative Report MRI (chest, abdomen and pelvis) Primary pathology from previous orchiectomy or biopsy of metastatic disease
MALIGNANT HEMATOLOGY	Lymphoma	Suspected Lymphoma	<ul style="list-style-type: none"> If neck, perform an ultrasound to ensure it is pathological adenopathy CBC, chemistry (including Ca, LDH, Cr) and INR if not already done Order Flow Cytometry (only if lymphocyte count is high on CBC) 	CT (with contrast*) neck, chest, abdomen & pelvis
	Acute Leukemia	Suspected Leukemia	CBC, INR, PTT, Fibrinogen, electrolytes, BUN, creatinine	
	Multiple Myeloma	Suspected Myeloma	CBC, electrolytes, BUN, creatinine, albumin, calcium, serum protien electrophoresis Urine protein electrophoresis	Skeletal survey

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DIRECT TO ONCOLOGY - MEDICAL AND/OR RADIATION ONCOLOGY

DISEASE SITE	TESTS REQUIRED	PROVIDE IF AVAILABLE
CNS	MRI or CT scan of the head	Biopsy Pathology or Surgical Pathology
Dermatology Melanoma	Biopsy proven	Biopsy Pathology (not required for keloid) Biopsy Pathology Surgical Pathology Reports on all surgical procedures Wide excision pathology with any applicable Operative reports Blood Work: CBC & liver function Sentinel lymph node biopsy with any applicable Operative reports
Endocrine	Biopsy proven	Biopsy Pathology CT Scan (neck) Thyroid Ultrasound Thyroid Blood Work (TSH, T3, T4)
Head & Neck	Biopsy proven	Biopsy Pathology Surgical Pathology Operative Report CT Scan head neck thorax orbits Previous Treatments Ophthalmology Treatments Ultrasound
Hepato-Pancreato- Biliary (HPB)	Biopsy proven	MRI (abdomen) CT Scan (abdomen/pelvis) Biopsy pathology Blood Work: liver function & pancreatic enzymes Endoscopy
Gynecology	Biopsy proven	Biopsy Pathology Surgical Pathology Operative Report Pelvis Ultrasound Blood Work: CA125 CT Scan (abdomen and pelvis)
Sarcoma (including gastrointestinal stromal tumor-GIST)	Biopsy proven	Biopsy Pathology CT Scan (chest & abdomen; pertinent areas) Bone Scan (if Ewing's or osteosarcoma) MRI of primary site or pertinent areas
Unknown	Biopsy proven	Biopsy Pathology Mammogram (for women) Upper/lower endoscopy CT Scan head chest abdomen and pelvis Bone Scan Blood work: CA125, CEA, CA 19-9
All other malignancies	Biopsy proven	

OTHER

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