



Cancer Care Service

Outpatient Referral Guideline

Please use this guide to complete the appropriate tests so patients can be accurately triaged within the Cancer Care Outpatients Department. Referral should include complete patient / family history relevant to the patient's condition or complaint.

Relevant investigation results are to be available for the Oncologist at clinic consultations.

NB: If significant co-morbidities then please attached relevant tests results. Eg: Echo, Stress test and RFTs.

Presentation	Baseline observations
Breast Cancer	<ul style="list-style-type: none"> • Named Referral letter • Family history – relationship, age of the family member at time of breast Ca Bilateral Mammogram and /or U/S • Histology incl Hormone receptors and ISH • Latest imaging – CT, bone scan, PET, MRI Recent pathology, markers Ca 15.3 • Genetic mutation testing results
Prostate	<ul style="list-style-type: none"> • Named Referral letter • Histology • Latest imaging – CT, bone scan • Recent pathology, PSA
GIT Malignancy	<ul style="list-style-type: none"> • Named Referral letter • Histology • Past treatment – surgery, radiation, chemotherapy • Latest imaging – CT, bone scan, PET, MRI • Recent pathology – incl markers CA 19.9 CEA KRAS
Head and Neck Tumours	<ul style="list-style-type: none"> • Named Referral letter • Histology • Past treatment – surgery, radiation, chemotherapy • Latest imaging – CT, bone scan, PET, MRI • Recent pathology
Testicular Tumour	<ul style="list-style-type: none"> • Named Referral letter • Histology • Past treatment – surgery, radiation, chemotherapy • Latest imaging – CT, bone scan, PET, MRI, U/S • FBC, UEG, LFT • Tumour markers, (alpha-feto protein, Beta HCG, LDH)
Thyroid conditions	<ul style="list-style-type: none"> • Named Referral letter • Histology • Past treatment – surgery, radiation • Latest imaging – CT, bone scan, PET, MRI, U/S FBC, UEG, LFT • TFTs including T4, T3, TSH, + thyroid antibodies,
Lung	<ul style="list-style-type: none"> • Named Referral letter Histology • Past treatment – surgery, radiation, chemotherapy • Latest imaging – CT, bone scan, PET, MRI, U/S • FBC, UEG, LFT, EGFR • Genetic mutation testing results



Ovarian	<ul style="list-style-type: none"> • Named Referral letter • Histology • Past treatment – surgery, radiation, chemotherapy • Latest imaging – CT, bone scan, PET, MRI, U/S • FBC, UEG, LFT, EGFR, Markers Ca 125 • Genetic mutation testing results
Renal cell	<ul style="list-style-type: none"> • Named Referral letter • Histology • Past treatment – surgery, radiation, chemotherapy • Latest imaging – CT (KUB), bone scan, PET, MRI, U/S • FBC, UEG, LFT, EGFR
Brain	<ul style="list-style-type: none"> • Named Referral letter • Histology • Past treatment – surgery, radiation, chemotherapy • Latest imaging – PET, MRI, • FBC, UEG, LFT
BCC, SCC, Melanoma	<ul style="list-style-type: none"> • Named Referral letter • Histology • Past treatment – surgery, radiation chemotherapy • Latest imaging • Genetic mutation testing results
Haematological conditions	<ul style="list-style-type: none"> • Named Referral letter • Histology – bone marrow biopsy • Past treatment – radiation, chemotherapy • Latest imaging – CT, PET, MRI, U/S • FBC, UEG, LFT, EGFR

Enquiries Monday to Friday, 9am to 4pm

Phone: 1300 090 760