

Greater Manchester Sarcoma Referral Pathway

SOFT TISSUE SARCOMA

Any lump or swelling which is:

- > 5cm
- Deep
- Painful
- Increasing in Size
- Recurrence after previous excision
- Has an ultrasound scan / MRI suspicious of sarcoma



**REFER DIRECTLY TO MANCHESTER
ROYAL INFIRMARY
SARCOMA SERVICE ON A
SUSPECTED CANCER REFERRAL
(HSC 205)**

Please submit referral via the E-referral Service.

Alternatively email or fax the referral form to :

Mr Amit Kumar / Mr Ashok Paul

Fax: 0161 276 8006

Email:

MFT.Sarcomareferrals@nhs.net

BONE SARCOMA

Refer for assessment if:

X-ray suggests the possibility of bone sarcoma

AND / OR

Unexplained bone swelling or pain in a Child / Young Person (\leq 25 years)



**REFER DIRECTLY TO THE ROBERT JONES
& AGNES HUNT ORTHOPAEDIC
HOSPITAL ON A SUSPECTED CANCER
REFERRAL (HSC 205)**

Please submit referral via the E-referral Service.

Alternatively fax the referral form to :

Miss Gillian Cribb / Mr Paul Cool /

Miss Karen Shepherd

Fax: 01691 404 268

Tel: 01691 404 107

For ALL other lumps NOT suspicious of cancer (including Lipomas), please refer to appropriate department at local hospitals. Refer as an URGENT (NOT HSC 205) to relevant department:

If on a limb—Refer to Orthopaedic Department

If on the neck—Refer to Head & Neck Department

If in the groin—Refer to Haematology Department

If on the chest / abdomen / back—Refer to General Surgery Department

Please note young people (age 16 -25) should be investigated or assessed very urgently i.e. within 48 hours

Greater Manchester Soft Tissue Sarcoma Patient Pathway

Greater Manchester & Oswestry Sarcoma Service

Any lump or swelling > 5cm which is:

- > 5cm
- Deep
- Painful
- Increasing in Size
- Recurrence after previous excision

Quality Criteria

Dedicated patient tracker monitors time on pathway

Standard 1:

All patients with suspected Sarcoma are discussed at the Sarcoma MDT

Standard 2 :

All patients are assessed by a Sarcoma Specialist

Standard 3 :

All sarcoma patients are introduced to their Clinical Nurse Specialist

Standard 4:

Patients will be considered for a clinical trial if applicable

DAY 0—7

Refer directly to MFT Sarcoma Service



Case reviewed in either an Outpatient Appointment and/or a Multi-disciplinary Team meeting (MDT)

DAY 7—10



If confirmed Sarcoma diagnosis a Management plan will be created and confirmed at GMOSS MDT

DAY 10—14



You will received your first definitive treatment detailed in the Management plan.

DAY 15—62

Greater Manchester Metastatic Bone Disease Referral Pathway

Greater Manchester & Oswestry Sarcoma Service

BONE METASTASES

Refer for assessment if:

Imaging (XR, CT, MRI) suggests the possibility of
bone metastases

AND / OR

Fracture
Non Weight Bearing
Pain
Limb or joint swelling



Email or Fax referral form to:

Mr Amit Kumar/Mr Ashok Paul

Fax: 0161 276 8006 (Tel: 0161 276 4376 to confirm receipt)

Email: Sarcoma.mdt@mft.nhs.uk

OR

Your local Orthopaedic Department Metastatic Bone Disease Lead

For any bone lesion with no previous history of cancer, please refer on bone sarcoma pathway

This is not a referral pathway for patients with Cancer of Unknown Primary - please refer to CUP team

Please note young people (age 16 -25) should be investigated or assessed very urgently
i.e. within 48 hours