

Type	Action	Indication
<b>Anal</b>	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>Unexplained anal mass or unexplained anal ulceration</li> </ul>
<b>Bladder</b>	Refer for an appt within 2w	<ul style="list-style-type: none"> <li>45+ with unexplained visible haematuria without UTI or persisting after treatment of UTI</li> <li>60+ with unexplained non-visible haematuria and either dysuria or raised WCC</li> </ul>
	Consider non-urgent referral	<ul style="list-style-type: none"> <li>60+ with recurrent or persistent UTI</li> </ul>
<b>Bone sarcoma</b>	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>X-ray suggestive of bone sarcoma</li> </ul>
	Consider very urgent referral for an appt within 48h	<ul style="list-style-type: none"> <li>Child with x-ray suggestive of bone sarcoma</li> </ul>
	Consider a very urgent x-ray within 48hrs	<ul style="list-style-type: none"> <li>Child with unexplained bone swelling or pain</li> </ul>
<b>Brain and CNS</b>	Consider urgent MRI Brain within 2w	<ul style="list-style-type: none"> <li>Adult with progressive, sub-acute loss of central neurological function</li> </ul>
	Consider very urgent referral within 48h	<ul style="list-style-type: none"> <li>Child with newly abnormal cerebellar or other neurological function</li> </ul>
<b>Breast</b>	Refer for an appt within 2w	<ul style="list-style-type: none"> <li>30+ and unexplained breast lump</li> <li>50+ and in one nipple only and of: discharge, retraction, other changes of concern</li> </ul>
	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>Skin changes that suggest breast cancer</li> <li>30+ with unexplained lump in the axilla</li> <li>-30 with unexplained breast lump</li> </ul>
<b>Cervical</b>	Consider non-urgent referral	<ul style="list-style-type: none"> <li>Appearance of cervix consistent with cancer</li> </ul>
<b>Colorectal</b>	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>40+ and unexplained weight loss and abdominal pain</li> <li>50+ and unexplained rectal bleeding</li> <li>60+ and iron-def anaemia or changes in bowel habit</li> <li>Occult blood in faeces</li> </ul>
	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>Rectal or abdominal mass</li> <li>-50 and rectal bleeding and any of: abdo pain, change in bowel habit, weight loss, iron def anaemia</li> </ul>
	Offer testing for occult blood in faeces	<ul style="list-style-type: none"> <li>50+ and unexplained abdo pain or weight loss</li> <li>-60 changes in bowel habit or iron def anaemia</li> <li>60+ anaemia</li> </ul>
<b>Endometrial</b>	Refer for an appt within 2w	<ul style="list-style-type: none"> <li>55+ with post-menopausal bleeding</li> </ul>
	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>-55 with post-menopausal bleeding</li> </ul>
	Consider an ultrasound	<ul style="list-style-type: none"> <li>55+ with <ul style="list-style-type: none"> <li>unexplained vaginal discharge and any of: first occurrence, thrombocytosis, visible haematuria OR</li> <li>visible haematuria and any of: anaemia, thrombocytosis, high blood glucose levels.</li> </ul> </li> </ul>
<b>Gall bladder</b>	Consider urgent USS within 2w	<ul style="list-style-type: none"> <li>Upper abdo mass consistent with an enlarged gall bladder</li> </ul>
<b>Hodgkin's lymphoma</b>	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>Unexplained lymphadenopathy taking into account any associated symptoms, particularly fever, night sweats, SOB, pruritus, weight loss or alcohol-induced lymph node pain</li> </ul>
	Consider very urgent referral for an appt within 48h	<ul style="list-style-type: none"> <li>Child with unexplained lymphadenopathy taking into account any associated symptoms, particularly fever, night sweats, SOB, pruritus or weight loss</li> </ul>
<b>Laryngeal</b>	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>45+ with persistent unexplained hoarseness or an unexplained lump in the neck</li> </ul>
<b>Leukaemia</b>	Consider very urgent blood count within 48h	<ul style="list-style-type: none"> <li>Adult with any of: pallor, persistent fatigue, unexplained fever, unexplained persistent or recurrent infection, generalised lymphadenopathy, unexplained bruising, bleeding, petechiae or hepatosplenomegaly</li> </ul>
	Refer for immediate specialist assessment	<ul style="list-style-type: none"> <li>Child with unexplained petechiae or hepatosplenomegaly</li> </ul>
	Offer very urgent blood count within 48h	<ul style="list-style-type: none"> <li>Child with pallor, persistent fatigue, unexplained fever, unexplained persistent infection, generalised lymphadenopathy, persistent or unexplained bone pain, unexplained bruising, bleeding</li> </ul>
<b>Liver</b>	Consider urgent USS within 2w	<ul style="list-style-type: none"> <li>Upper abdo mass consistent with an enlarged liver</li> </ul>
<b>Lung</b>	Refer for an appt within 2w	<ul style="list-style-type: none"> <li>CXR suggests lung cancer</li> <li>40+ and unexplained haemoptysis</li> </ul>
	Offer urgent CXR within 2w	<ul style="list-style-type: none"> <li>40+ and 2 symptoms OR ever smoked + 1 symptom of: cough, fatigue, SOB, chest pain, appetite loss, weight loss.</li> </ul>
	Consider urgent CXR within 2w	<ul style="list-style-type: none"> <li>40+ and any of: persistent or recurrent chest infection, finger clubbing, supraclavicular or persistent cervical lymphadenopathy, chest signs consistent with lung ca, thrombocytosis</li> </ul>
<b>Mesothelioma</b>	Refer for an appt within 2w	<ul style="list-style-type: none"> <li>CXR suggests mesothelioma</li> </ul>
	Offer urgent CXR within 2w	<ul style="list-style-type: none"> <li>40+ and 2 symptoms OR 1 symptom + ever smoked OR 1 symptom + asbestos of exposure of cough, fatigue, SOB, chest pain, appetite loss, weight loss</li> </ul>
	Consider urgent CXR within 2w	<ul style="list-style-type: none"> <li>40+ and finger clubbing or chest signs compatible with pleural disease</li> </ul>
<b>Myeloma</b>	Offer FBC, bone profile, plasma viscosity or ESR	<ul style="list-style-type: none"> <li>60+ with persistent bone pain (esp back pain) or unexplained fracture</li> </ul>
	Offer very urgent protein electrophoresis and a Bence-Jones protein urine test within 48h	<ul style="list-style-type: none"> <li>60+ with hypercalcaemia or leukopenia and a presentation that is consistent with possible myeloma</li> </ul>
	Consider very urgent protein electrophoresis and a Bence-Jones protein urine test within 48h	<ul style="list-style-type: none"> <li>Plasma viscosity or ESR and presentation consistent with possible myeloma</li> </ul>
<b>Myeloma</b>	Refer for an appt within 2w	<ul style="list-style-type: none"> <li>Results of protein electrophoresis or Bence-Jones protein urine test suggest myeloma</li> </ul>
<b>Neuro-blastoma</b>	Consider a very urgent referral within 48hrs	<ul style="list-style-type: none"> <li>Child with palpable abdominal mass or unexplained enlarged abdominal organ</li> </ul>
	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>Unexplained lymphadenopathy or splenomegaly, taking into account any associated symptoms, particularly fever, night sweats, SOB, pruritus or weight loss</li> </ul>
<b>Non-Hodgkin's lymphoma</b>	Consider very urgent referral for an appt within 48h	<ul style="list-style-type: none"> <li>Child with unexplained lymphadenopathy or splenomegaly, taking into account any associated symptoms, particularly fever, night sweats, SOB, pruritus or weight loss</li> </ul>
<b>Non-site-specific</b>	Consider referral	<ul style="list-style-type: none"> <li>Parent or carer of child has persistent concern or anxiety about the child's symptoms, even if most likely to have a benign cause.</li> </ul>
	Offer urgent investigation or referral for an appt within 2w	<ul style="list-style-type: none"> <li>Unexplained weight loss or appetite loss</li> <li>DVT (consider)</li> </ul>

<b>Oesophageal</b>	Offer urgent direct access upper GI endoscopy within 2w	<ul style="list-style-type: none"> <li>• Dysphagia</li> <li>• 55+ and weight loss and any of: upper abdominal pain, reflux, dyspepsia</li> </ul>
	Consider non-urgent direct access upper GI endoscopy	<ul style="list-style-type: none"> <li>• Haematemesis</li> <li>• 55+ and any of: <ul style="list-style-type: none"> <li>– treatment resistant dyspepsia</li> <li>– upper abdo pain and anaemia</li> <li>– thrombocytosis with any of: nausea, vomiting, weight loss, reflux, dyspepsia, upper abdo pain</li> </ul> </li> </ul>
<b>Oral</b>	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>• Unexplained ulceration &gt;3w</li> <li>• Persistent and unexplained lump in the neck</li> <li>• Dentist concludes lesion consistent with cancer, erythroplakia or erythroleukoplakia</li> </ul>
	Consider referral for an appt within 2w with dentist	<ul style="list-style-type: none"> <li>• Lump on the lip or oral cavity</li> <li>• Red or red and white patch in the oral cavity consistent with erythroplakia or erythroleukoplakia</li> </ul>
<b>Ovarian</b>	Refer for an appt within 2w	<ul style="list-style-type: none"> <li>• 18+ and ascites or pelvic or abdominal mass (not obviously fibroids)</li> </ul>
	Ca125, then if Ca125≥35IU/ml then USS Abdo and pelvis	<ul style="list-style-type: none"> <li>• Any persistent or frequent (esp. &gt;12x/m): bloating, early satiety, loss of appetite, pelvic or abdominal pain, increased urinary urgency or frequency</li> <li>• 50+ presenting with irritable bowel syndrome symptoms</li> </ul>
	Consider Ca125, then if Ca125≥35IU/ml then USS Abdo and pelvis	<ul style="list-style-type: none"> <li>• Any of: unexplained weight loss, fatigue, changes in bowel habit</li> </ul>
<b>Pancreatic</b>	Refer for an appt within 2w	<ul style="list-style-type: none"> <li>• 40+ with jaundice</li> </ul>
	Consider an urgent direct access CT scan within 2w (US if CT unavailable)	<ul style="list-style-type: none"> <li>• 60+ with weight loss and any of: diarrhoea, back pain, abdominal pain, nausea, vomiting, constipation, new onset diabetes</li> </ul>
<b>Penile</b>	Refer for an appt within 2w	<ul style="list-style-type: none"> <li>• Penile mass or ulceration if STI excluded</li> <li>• Persistent lesion after STI treatment</li> </ul>
	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>• Unexplained or persistent symptoms affecting the foreskin or glans</li> </ul>
<b>Prostate</b>	Refer for an appt within 2w	<ul style="list-style-type: none"> <li>• Prostate feels malignant on pr</li> <li>• PSA is above the age-specific reference range</li> </ul>
	Consider PSA and pr	<ul style="list-style-type: none"> <li>• Any lower urinary tract symptoms</li> <li>• Erectile dysfunction</li> <li>• Visible haematuria</li> </ul>
<b>Renal</b>	Refer for an appt within 2w	<ul style="list-style-type: none"> <li>• 45+ with unexplained visible haematuria without UTI or persisting after treatment of UTI</li> </ul>
<b>Retino-blastoma</b>	Consider urgent referral within 2w w ophthalmology	<ul style="list-style-type: none"> <li>• Child with absent red reflex</li> </ul>
<b>Skin</b>	Refer for an appt within 2w	<ul style="list-style-type: none"> <li>• Pigmented lesion scoring ≥3pts: <ul style="list-style-type: none"> <li>– 2pts: change in size, irregular shape, irregular colour</li> <li>– 1pt: ≥7mm, inflammation, oozing, changed in sensation</li> </ul> </li> <li>• Dermoscopy suggests melanoma</li> <li>• Lesion raises the suspicion of SCC</li> <li>• Lesion raises the suspicion of BCC and concern delay may have significant impact due to site or size</li> </ul>
	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>• Lesion suggestive of nodular melanoma</li> </ul>
	Routine Referral	<ul style="list-style-type: none"> <li>• Lesion raises the suspicion of BCC</li> </ul>
<b>Soft tissue sarcoma</b>	Consider an urgent USS within 2w	<ul style="list-style-type: none"> <li>• Unexplained lump increasing in size</li> </ul>
	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>• Ultrasound scan suggestive of soft tissue sarcoma or findings are uncertain and clinical concern persists</li> </ul>
	Consider a very urgent USS within 48hrs	<ul style="list-style-type: none"> <li>• Child with unexplained lump increasing in size</li> </ul>
	Consider a very urgent referral within 48hrs	<ul style="list-style-type: none"> <li>• Child with ultrasound scan suggestive of soft tissue sarcoma or findings are uncertain and clinical concern persists</li> </ul>
<b>Stomach</b>	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>• Upper abdominal mass consistent with stomach cancer</li> </ul>
	Offer urgent direct access upper GI endoscopy within 2w	<ul style="list-style-type: none"> <li>• Dysphagia</li> <li>• 55+ with weight loss and any of: upper abdominal pain, reflux, dyspepsia</li> </ul>
	Consider non-urgent direct access upper GI endoscopy	<ul style="list-style-type: none"> <li>• haematemesis</li> <li>• 55+ and any of: <ul style="list-style-type: none"> <li>– treatment resistant dyspepsia</li> <li>– upper abdo pain and anaemia</li> <li>– thrombocytosis with any of: nausea, vomiting, weight loss, reflux, dyspepsia, upper abdo pain</li> </ul> </li> </ul>
<b>Testicular</b>	Refer for an appt within 2w	<ul style="list-style-type: none"> <li>• non-painful enlargement or change in shape or texture of the testis</li> </ul>
	Consider USS	<ul style="list-style-type: none"> <li>• Unexplained or persistent testicular symptoms</li> </ul>
<b>Thyroid</b>	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>• Unexplained thyroid lump</li> </ul>
<b>Vaginal</b>	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>• Unexplained palpable mass in or at the entrance to the vagina</li> </ul>
<b>Vulval</b>	Consider referral for an appt within 2w	<ul style="list-style-type: none"> <li>• Unexplained vulval lump, ulceration or bleeding</li> </ul>
<b>Wilm's tumour</b>	Consider a very urgent referral within 48hrs	<ul style="list-style-type: none"> <li>• Child with any of: palpable abdominal mass, unexplained enlarged abdominal organ, unexplained visible haematuria</li> </ul>