

## Carlo Fidani Regional Cancer Centre Referral Guide

Referrals for patients diagnosed with a malignancy must be accompanied by:

- o Completed referral form
- All pathology reports documenting cancer diagnosis (biopsy and/or surgical pathology report)
- o A consultation letter including presenting symptoms and findings
- o Further diagnosis-specific information as per table below

The following is cancer disease site specific information is required for staging and is important to ensure patients can be started on treatment as quickly as possible. If tests are in progress, please provide the date of the procedure and location when submitting the referral.

Incomplete referrals will be returned as incomplete and will result in a DELAY to consult for your patient.

Patients remain under the care of the referring provider until seen by an Oncologist at the Carlo Fidani Regional Cancer Centre (Trillium Health Partners).

Disease Site	Required Information	If Available
Breast	ER/PR/Her2 status on the core biopsy and/or surgical pathology Mammogram Report Operative Report CT Chest, Abdomen & Pelvis	Chest X-ray Echo (Measure ejection fraction) and MUGA
Colorectal/Anal Canal		CT Scan Abdomen & Pelvis Bloodwork CEA Value Endoscopy Report PET Scan (Anal Canal) MRI Pelvis (Rectal)
Lung	CT Scan – Thorax Genetic Panel (EGFR, ALT and PDL1)	Pulmonary Function Test (PFT) Chest X Ray Surgical Procedure Notes PET scan Brain imaging (CT, MRI- with contrast)
Prostate	PSA	Trans Rectal Ultrasound (TRUS) report Bone Scan
Bladder		Transurethral resection of the bladder tumour (TURBT) CT Scan Chest, Abdomen & Pelvis
CNS	MRI or CT Scan of the head	
Dermatology Melanoma	BRAF results	Surgical Procedure Reports Wide excision or Sentinel lymph node biopsy pathology with any applicable operative reports Blood work: CBC & Liver function
Endocrine		CT Scan Neck Thyroid ultrasound Thyroid blood work (TSH, T3, T4)



Disease Site	Required Information	If Available
Esophageal		CT Scan Thorax
		PET Scan
Gastric		CT Scan Abdomen & Pelvis
		Endoscopy Report
Gynecology		Operative Report
		Pelvis ultrasound
		Blood work CA 125
		CT Scan Abdomen & Pelvis
Hepato-Pacreato-Biliary	Trace	MRI Scan Abdomen
(HPB)	Alpha feto protein	CT Scan Abdomen & Pelvis
		Blood Work: Liver enzymes
		Endoscopy Report
Kidney	CT Scan Abdomen & Pelvis	CT Scan Head and/or Chest
		Relevant MRI (e.g. abdomen and pelvis)
		Ultrasound (e.g. abdomen and pelvis)
		Operative Report
Malignant Haematology	Pathology Report (suggestive	Relevant CT Scans
	lymphoma requires a repeat	
	biopsy for confirmation)	
	Spep or FLC confirming	
	monoclonal gammopathy	
	Genetic Panel (JAK1, cALR, Ph	
	chromosome) positive confirming	
	presence of a MPD (if negative	
	bone marrow biopsy done to	
	confirm diagnosis	
	3	
	For amyloidosis mass spec	
	results must be obtained to	
	confirm AL amyloidosis	
	Leukocytosis greater than 10	
Multiple Myeloma	CBC, electrolytes, BUN,	Skeletal Survey
	creatinine, albumin, calcium,	
	serum protein electrophoresis	
	Urine protein electrophoresis	
Skin (Non-Melanoma)	2	
Testis	Ultrasound of testes; serum	CT Scan (chest and/or abdomen and pelvis)
	tumour marker: BHCG, LDH,	Chest X-ray
	AFP	Operative Report
	, " .	MRI (chest, abdomen and pelvis)
		Primary pathology from previous orchiectomy
		or biopsy of metastatic disease
Unknown	Investigations that led to the	or bropoy or motastatic disease
CIRIOWII	referral	
Places note that TUD is not		adiatria maliananay dasianatad santra
		ediatric malignancy designated centre. to find the closest designated centre.