

## **2 Week Rule Referral Guidelines - Lung**

Immediate referral (via casualty or on call team)

Consider immediate referral for patients with:

- Signs of superior vena caval obstruction (swelling of the face/neck with fixed elevation of jugular venous pressure)
- Stridor.

Urgent referral (2 week-rule referral)

Refer urgently patients with:

- Persistent haemoptysis (in smokers or ex-smokers aged 40 years and older)
- A chest X-ray suggestive of lung cancer (including pleural effusion and slowly resolving consolidation)
- A normal X-ray where there is a high suspicion of lung cancer
- A history of asbestos exposure and recent onset of chest pain, shortness of breath or unexplained systemic symptoms where a chest X-ray indicates pleural effusion, pleural mass or any suspicious lung pathology.

Urgent chest X-ray

Refer urgently for chest X-ray (the report should be returned within 5 days) for patients with any of the following:

- Haemoptysis
- Unexplained or persistent (longer than 3 weeks):
  - Chest and/or shoulder pain
  - Dyspnoea
  - Weight loss
  - Chest signs
  - Hoarseness
  - Finger clubbing
  - Cervical or supraclavicular lymphadenopathy
  - Cough
  - Features suggestive of metastasis from a lung cancer (for example, secondaries in the brain, bone, liver, skin)

Underlying chronic respiratory problems with unexplained changes in existing symptoms.