

2 Week Rule Referral - Skin

Patient Details	
Name:	Date of Birth:
	Sex: M/F
Address:	NHS Number:
	Hospital Number:
Daytime Telephone:	<input type="checkbox"/> Please indicate by ticking the appropriate <input type="checkbox"/> box(es) which number(s) the patient can <input type="checkbox"/> be contacted on during the next 24 hours
Work Telephone	
Mobile Telephone:	
GP Details	
GP Name:	Telephone Number:
Practice:	Fax Number:
Date of Referral:	
Social circumstances	
Lives alone €	Is a carer for someone €
	Has a care package €

Your patient will be seen under the 2 week rule if one or more of the following criteria are present. Please tick the appropriate box(es) and add relevant details below.

Be aware and use the 7 point weighted check list for assessment of pigmented skin lesions

<u>Major features of Lesions</u>	Score 2 points for each	<u>Minor features of Lesions</u>	Score 1 point for each
Change in size	<input type="checkbox"/>	Largest diameter 7mm or more	<input type="checkbox"/>
Irregular shape	<input type="checkbox"/>	Inflamation	<input type="checkbox"/>
Irregular colour	<input type="checkbox"/>	Oozing	<input type="checkbox"/>
		Change in sensation	<input type="checkbox"/>

Lesions scoring 3 points or more in the 7 point check list above are suspicious

SITE:

Refer urgently patients with:

- Lesion suspected to be melanoma (excision in primary care should be avoided)
Score =
- With non-healing keratinizing or crusted tumours larger than 1cm with significant induration on palpation. They are commonly found on the face, scalp or back of the hand with a documented expansion over 8 weeks
- Who have had an organ transplant and develop new or growing cutaneous lesions as squamous cell carcinoma is common with immunosuppression but may be atypical and aggressive
- With histological diagnosis of squamous cell carcinoma

Current Medication
Relevant PMH
Additional Information
Please state if you are attaching a computer printout of this information Yes/No

Reference: NICE referral guidelines for suspected cancer June 2005
©These referral proformas were developed by The Local Referral and Management Guidelines Team
Western Sussex Hospitals NHS Trust, St Richard's Hospital . Chichester

All 2 week rule appointments for WSHT are managed and booked by the Worthing Hospital 2 week rule team.

Please Fax this form to 01903 285098 or email it to
cancer.appointments@nhs.net