

RENAL CANCER NETWORK

SMDT REFERRAL FORM

rf.kidneycancerreferrals@nhs.net

Royal Free London



NHS Foundation Trust

Patient contact: Lead CNS at Royal Free London David Cullen 020 7317 7779 mob.07775687823**REFERRING TEAM**

Priority:	2ww/screening/consultant upgrade/other	Type:	62 days/31 days	Breach date:	
Consultant / Specialty:		Email:			
Referring hospital:		Date:			
CNS at local hospital		Contact no.			

PATIENT DEMOGRAPHICS

Name: (forename surname)		DOB:	
NHS number:		Local MRN:	
RFL MRN:		Gender:	
Language requirements?			
Home address:			
Telephone numbers:		Email:	

CLINICAL HISTORY (inc questions for MDT)

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OTHER RELEVANT MEDICAL HISTORY (inc co-morbidities and relevant meds)

	Creatinine level:	
	GFR:	
	Anti-coagulation/anti-platelet meds (please list opposite)?	
	WHO performance status:	

RELEVANT IMAGING SENT (Dates +/- results)

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RELEVANT BIOPSIES (Dates +/- results)

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CHECKLIST

Renal mass CT or renal mass MRI performed Should not be referred with ultrasound only, unless there is a very good reason
CT / MRI reviewed by local renal radiologist Local renal radiologist must agree that case is suitable for MDT
If Bosniak 3/4 cyst or solid lesion, needs urgent CT chest locally If this will delay referral by a week, discuss with RFH MDT co-ordinator (? RFH slot available)
All relevant imaging sent by IEP to The Royal Free and UCLH Including current and previous imaging of kidneys and CTs/MRIs of the body
All imaging reports for these scans and biopsy results sent to RFH Either via IEP (if your PACS allows this) or via email to RFH MDT co-ordinator