

West Midlands Sarcoma Advisory Group

Guideline for the Initial Investigation and Referral to Sarcoma Specialist Multi Disciplinary Team for Suspected Sarcoma of Soft Tissue Extremities (limbs and trunk wall) in Adults

Version History

Version	Date Issued	Brief Summary of Change
0.1	06.04.11	First draft by Rachel Loveless
0.2	07.04.11	Circulated to Charles Candish for comment
0.3	11.04.11	Referral form added by RL
0.4	19.04.11	Flow chart added by RL
0.5	11.11.11	Updated by Karen Metcalf following comments from other Networks
0.6	14.11.11	Updated by Karen Metcalf following comments received by email from members of the West Midlands Sarcoma Advisory Group
0.7	21.11.11	Updated by Karen Metcalf following comments received by email from members of the West Midlands Sarcoma Advisory Group to exclude bone
0.8	28.11.11	Reviewed and updated by West Midlands Sarcoma Advisory Group and prepared for reviewing by Guidelines Sub Group
0.9	12.12.11	Amended by Karen Metcalf following receipt of comments by Alison Rowe, Ben Parfitt and Lara Barnish and prepared for review by Guidelines Sub Group
0.10	14.12.11	Reviewed and updated by the Pan Birmingham Cancer Network Guidelines Sub Group
1.0	19.12.11	Reviewed and endorsed by Pan Birmingham Cancer Network Guidelines Sub Group

Date Approved by Network Governance	December 2011
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Date for Review	December 2014
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1 Scope of the guideline

- 1.1 This guideline has been produced to support the referral of adult patients with suspected soft tissue sarcoma occurring in extremities (i.e. arms, legs or trunk wall) to the Specialist Sarcoma Multi Disciplinary Team based at the Royal Orthopaedic Hospital NHS Foundation Trust.
- 1.2 Referral can be made by either primary care or secondary care clinician.
- 1.3 This guideline covers the referring populations from the following Cancer Networks:
 - 3 Counties
 - Arden
 - Anglia [Bedfordshire, Cambridge, Peterborough, Suffolk (West)]
 - Greater Midlands
 - Pan Birmingham

2 Guideline background

The responsible Multi Disciplinary Team (MDT) for the management of soft tissue sarcoma is dependent on the site of the tumour.

The West Midland Sarcoma Advisory Group has agreed the referral pathway for suspected soft tissue sarcomas occurring in extremities i.e. limbs or trunk wall is to the Royal Orthopaedic Hospital NHS Foundation Trust.

This guideline is specific to soft tissue sarcoma occurring in limbs or trunk wall and does not cover referral pathways for patients with other soft tissue sarcomas e.g. retroperitoneal or those presenting initially to site specific MDTs for example gynaecology, urology, skin, head and neck. Separate referral guidelines are in the process of being developed for these sarcomas, which should be referred to the Specialist Sarcoma Multi Disciplinary Team at University Hospitals Birmingham NHS Foundation Trust.

3 Guideline statements

- 3.1 Soft tissue lump with any of the following characteristics should be considered malignant until proved otherwise:
 - size > 5cm
 - increasing in size
 - deep to the deep fascia
 - painful
 - recurrent after previous excision

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- 3.2 Any patient with bone pain, particularly non mechanical bone pain should be referred for imaging preferably with MRI.
- 3.3 The presence of any of the following should lead to further investigation:
- bone lysis
 - new bone formation
 - periosteal elevation
 - soft tissue swelling
- 3.4 Any patient with a lump greater than 5cm in diameter or which is deeply situated should be investigated by MRI and biopsy. Excision biopsy should only be considered for small subcutaneous lumps less than 5cm in diameter unless there are additional features as described above.
- 3.5 All patients with suspected sarcoma of bone or soft tissue should be referred to a Specialist Sarcoma Multi Disciplinary Team and be seen by a specialist from this team within 2 weeks of referral.
- 3.6 See appendix 1, for an algorithm for investigating a soft tissue mass.
- 3.7 Patients can be referred by their GP or secondary care physician.
- 3.8 GPs should make the referral by using the urgent suspected sarcoma two week referral form. See appendix 2. A copy of this form is also available on the Pan Birmingham Cancer Network website <http://www.birminghamcancer.nhs.uk/staff/rf/gp-urgent-2-week-wait>. This form should be faxed to the Royal Orthopaedic Hospital Birmingham rapid access fax as directed.
- 3.9 Secondary care physicians should make the referral by faxing a referral letter to the rapid access clinic at the Royal Orthopaedic Hospital NHS Foundation Trust (0121 685 4146). Initial contact to request clinician to clinician discussion and advice may be made by telephoning the rapid access clinic on 0121 685 402.
- 3.7 If a patient has HIV disease, Kaposi's sarcoma should be considered and if this is suspected clinicians should make a referral to an appropriate HIV treatment centre

4 Monitoring of the guideline

Adherence to the Network guidelines may from time to time be formally monitored

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5 Patient information and counselling

- 5.1 All patients, and with their consent, their partners will be given access to appropriate written information during their investigation and treatment, and on diagnosis will be given the opportunity to discuss their management with a clinical nurse specialist who is a member of the relevant MDT. The patient should have a method of access to the sarcoma team at all times.
- 5.2 Access to psychological support will be available if required. All patients should undergo a holistic needs assessment and onward referral as required.

References

1. Department of Health, 2000, *The NHS Cancer Plan: A plan for investment, a plan for reform*. Department of Health, London.
2. NHS Executive, 2001, *Cancer Waiting Times HSC 2001/012*. Department of Health, London. See Also DSCN 22/2002 *National Cancer Waiting Times Monitoring*.
3. NHS Executive, 2000, *Cancer Referral Guidelines HSC 2000/013*. Department of Health, London.
4. Department of Health, 2004, *Manual for Cancer Services 2004*. Department of Health, London.
5. Aspects of current management – Earlier diagnosis of bone and soft tissue tumours. R.J. Grimer, T.W.R. Briggs. *The journal of bone and joint surgery*. Vol 92 B. No11 November 2010

Authors

Rachel Loveless	Project Lead
Charles Candish	Consultant Clinical Oncologist
Rob Grimer	Consultant Orthopaedic Surgeon
Karen Metcalf	Network Director

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Approval Signatures


Pan Birmingham Cancer Network Clinical Governance Committee Chair

Name: Karen Deaney

Signature: _____ Date: December 2011

Pan Birmingham Cancer Network Manager

Name: Karen Metcalf

Signature:  Date: December 2011

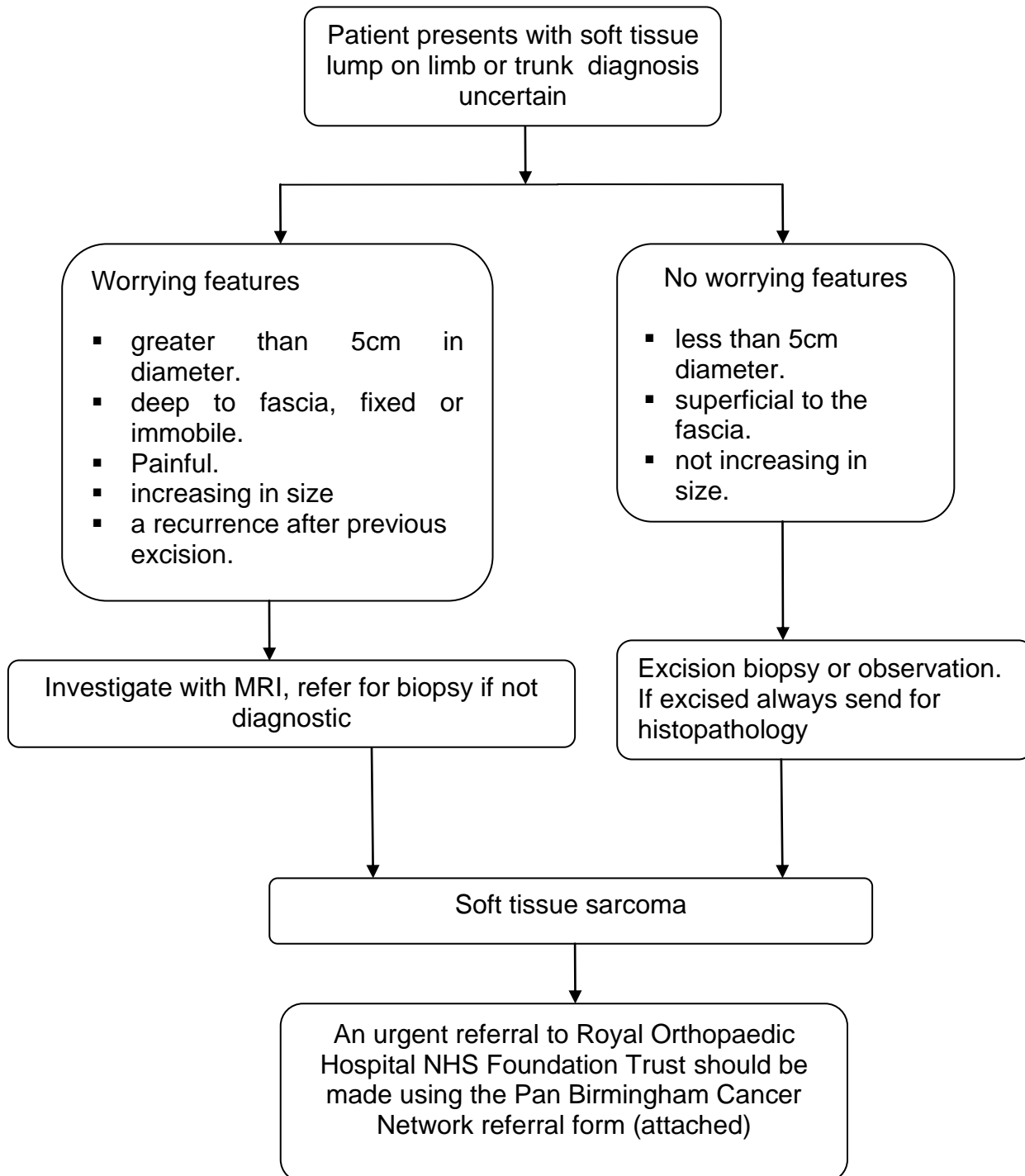
Supra Network Site Specific Group Clinical Chair

Name: Charles Candish

Signature:  Date: December 2011

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Appendix 1 - algorithm for investigating a soft tissue mass



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