**Streamlined pre-MDT referral proforma:**

**Surgical referral in stage I/II NSCLC with excellent physiological reserve.**

* Patients that fulfil the criteria as set out in the MDT charter should be referred to the thoracic surgical team without waiting for MDT discussion.
* This proforma should accompany any referral
* The patient should be listed for MDT where an abbreviated discussion can occur if the patient has already been referred and meets the criteria. The abbreviated discussion should include;
  + The eligibility for pre-MDT referral
  + The TNM staging
  + MDT agreement with referral
* **Please note it is the referrer’s responsibility to ensure all criteria are met and the referrer should be aware that referral outside of the set criteria may potentially lead to delays in the patient’s pathway**.

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| **Patient Details**  Name: Click here to enter text.  DOB: Click here to enter text.  NHS No: Click here to enter text.  Hospital No: Click here to enter text. | **Referrer Information**  Referring Team: Click here to enter text.  Responsible Clinician: Click here to enter text.  Contact details: Click here to enter text.  Key Worker: Click here to enter text.  Contact details: Click here to enter text.  Date of referral: Click here to enter text. |

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| **Criteria must be completed below** | **Yes** | **No** |
| Stage I/II NSCLC |  |  |
| Pathologically confirmed NSCLC |  |  |
| Post-operative predicted FEV1 & DLCO >40% |  |  |
| Shuttle walk or 6-minute walk test >400m |  |  |
| Performance status 0/1 |  |  |
| Clinical frailty score ≤3 |  |  |
| All investigations complete in line with GM Diagnostic Algorithms and GM Lung Cancer Referral SOP (including CT brain in stage II, EBUS if any thoracic lymph node >1cm in short axis) |  |  |

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| **Planned MDT Discussion Date** Click here to enter text. |
| **Additional comment:** Click here to enter text. |