

Streamlined referral proforma:

medical oncology referral in stage IV NSCLC with excellent physiological reserve

- Patients that fulfil the criteria set out below should be referred directly to the medical oncology 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.**

Patient Details	Referrer Information
Name:	Referring Team:
DOB:	Responsible Clinician:
NHS No:	Contact details:
Hospital No:	Key Worker:
	Contact details:
	Date of referral:

Please tick to confirm all of the following criteria have been met:	Yes	No
Stage IV non-oligometastatic non-intra-cranial NSCLC (single metastases in a single organ and those with brain metastases are excluded)	<input type="checkbox"/>	<input type="checkbox"/>
Adequate tissue for all predictive markers and predictive marker testing commenced	<input type="checkbox"/>	<input type="checkbox"/>
Performance status 0/1	<input type="checkbox"/>	<input type="checkbox"/>
Clinical frailty score ≤ 3	<input type="checkbox"/>	<input type="checkbox"/>
eGFR >60 mls/min	<input type="checkbox"/>	<input type="checkbox"/>
Normal Liver Function	<input type="checkbox"/>	<input type="checkbox"/>
Significant cardiac disease (significant cardiac disease defined as Moderate or Severe LVSD, Moderate or Severe Valve disease, Unstable Angina) If yes criteria not met.	<input type="checkbox"/>	<input type="checkbox"/>
All investigations complete in line with GM Diagnostic Algorithms and GM Lung Cancer Referral SOP	<input type="checkbox"/>	<input type="checkbox"/>
The patient is aware of this referral and aware that it has been made before an MDT discussion. This means there is a small chance the management plan may change, and this will be communicated to the patient following the MDT by the referring team	<input type="checkbox"/>	<input type="checkbox"/>

Planned MDT discussion date (Please note it is the responsibility of the referring team to ensure the MDT minutes are sent to the treating team)

Additional comment: