Greater Manchester
Cancer Alliance

Renal Cell Carcinoma Pathway

TITLE OF DOCUMENT	GM Renal Post Op Pathway
DATE DOCUMENT PRODUCED	26th September 2025
DOCUMENT VERSION NUMBER	V.1
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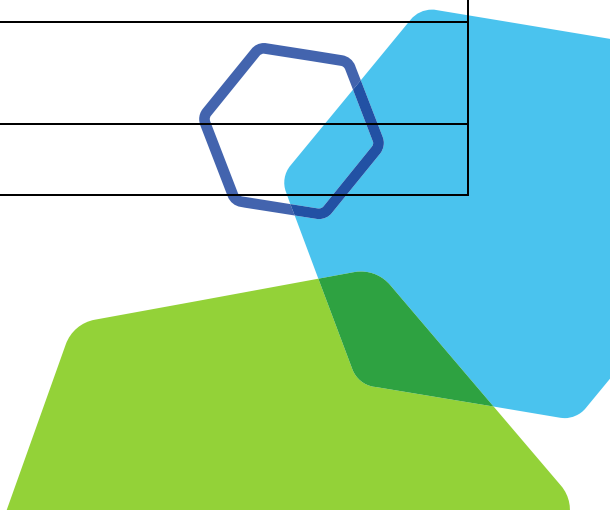
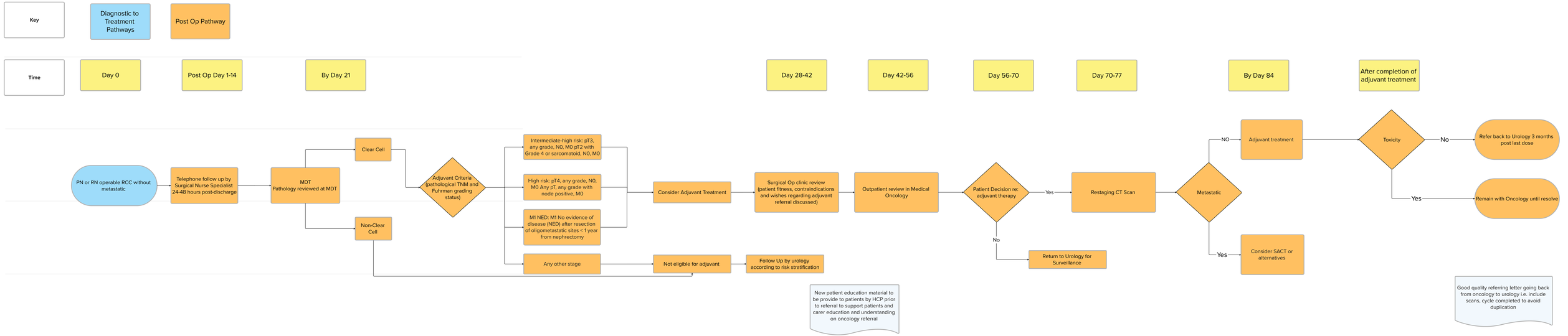
WHICH PROGRAMME / PATHWAY BOARD / GROUP HAS PRODUCED THIS DOCUMENT (IF APPLICABLE)	Greater Manchester Cancer Alliance Urology Pathway Board
WHAT CONSULTATION HAS TAKEN PLACE?	Collaborative working with MSD - to optimise the Renal Cell Carcinoma (RCC) Patient Pathway from diagnosis across all Urology sites in Greater Manchester, East and Mid Cheshire to treatment being given in Oncology at The Christie. Pathway mapping workshops, a GAP analysis workshop and pathway implementation including education developed. This pathway was developed to support the education of the timescales to referral post-surgery. The pathway reflects the national pathway and no changes have been made.
HAS AN EQUALITY IMPACT ASSESSMENT BEEN COMPLETED?	*No – No pathway changes have been made to the national pathway.*
HAVE THE ENVIRONMENTAL SUSTAINABILITY IMPACTS BEEN CONSIDERED AND ADDRESSED?	*No – No pathway changes have been made to the national pathway.*
DATE RATIFIED AT PROGRAMME PATHWAY BOARD	10/02/2026
REVIEW DATE	February 2028




Key
Diagnostic to Treatment Pathways
Post Op Pathway
Time
Day 0
Post Op Day 1-14
By Day 21
Day 28-42
Day 42-56
Day 56-70
Day 70-77
By Day 84
After completion of adjuvant treatment
PN or RN operable RCC without metastatic
Telephone follow up by Surgical Nurse Specialist 24-48 hours post-discharge
MDT
Pathology reviewed at MDT
Clear Cell
Non-Clear Cell
Adjuvant Criteria (pathological TNM and Fuhrman grading status)
Intermediate-high risk: pT3, any grade, N0, M0 pT2 with Grade 4 or sarcomatoid, N0, M0
High risk: pT4, any grade, N0, M0 Any pT, any grade with node positive, M0
M1 NED: M1 No evidence of disease (NED) after resection of oligometastatic sites < 1 year from nephrectomy
Any other stage
Consider Adjuvant Treatment
Not eligible for adjuvant
Follow Up by urology according to risk stratification
Surgical Op clinic review (patient fitness, contraindications and wishes regarding adjuvant referral discussed)
Outpatient review in Medical Oncology
Patient Decision re: adjuvant therapy
Yes
No
Return to Urology for Surveillance
Restaging CT Scan
Metastatic
NO
Adjuvant treatment
Yes
Consider SACT or alternatives
Toxicity
No
Refer back to Urology 3 months post last dose
Yes
Remain with Oncology until resolve
New patient education material to be provide to patients by HCP prior to referral to support patients and carer education and understanding on oncology referral
Good quality referring letter going back from oncology to urology i.e. include scans, cycle completed to avoid duplication