

REFERRAL FORM FOR DISCUSSION AT  
**THE METASTATIC CANCER OF UNKNOWN PRIMARY**  
 MULTIDISCIPLINARY MEETING

MDM is on Mondays 8.45 am. Submit completed referral to: [CUPTeam@nhslothian.scot.nhs.uk](mailto:CUPTeam@nhslothian.scot.nhs.uk)  
 by Thursday 12.30 pm.

To discuss individual cases or if urgent clinical advice is required phone/email Dr Clive (↻via switch), Dr  
 Barrie (↻via switch), Gillian Knowles (↻ext 33793) or Rachel Haigh (↻ext 31341), all at WGH.

We are happy to discuss all patients with new radiological suspicion of cancer but please refer to  
 own cancer team if they are still under oncology follow up for another recent cancer diagnosis. Full  
 work up and biopsy are not required prior to discussion/ referral but **patients with bone-only mets  
 should have a normal myeloma screen and PSA before referral.** Please inform patient of  
 diagnosis. MDM discussion does not always mean we will take over the care of the patient.

Name of patient:		CHI:	
Address:		Age:	
Contact details of referring doctor and consultant:			
Email address for reply from MDM:			
Name of doctor/ consultant currently in charge of patient's care (remains so until notified):			
Where is patient currently/ specialty:			
Past medical history:			
Past history of any cancer (Dates + path staging):			
Brief presenting history:			
What are the patient's current problems?:			
Any current <b>symptoms</b> suggesting a possible primary: (delete irrelevant)	Weight loss	Yes/ No	
	Lump	Yes/ No	
	Pain	Yes/ No	
	Altered bowel habit	Yes/ No	
	Other – please describe:		
Present co-morbidities:			
Patient's fitness at present (ECOG Performance Status*)			
<b>Examination:</b> please do before referral if possible (eg	Rectum	Nodes	Skin
	Breasts	Testes (if relevant)	Other

all inpatients)					
<b>Investigations:</b> (Date, hospital + relevant result). These tests do not need to be done prior to referral	CT CAP scan				
	Endoscopy				
	Biopsy – please give site of biopsy				
Bloods– state any abnormal results	Hb:		CRP:		Bilirubin:
	Wbc:		Albumin		AlkPhos:
	Lymphocytes		Calcium:		PSA /IgGs (bone only):
	Neutrophils:		LDH:		AFP (liver only)
Does the patient know cancer is suspected?					
Other important information?					
<b>Question to be answered at the MDM:</b>					

\* **ECOG Performance status:**

- 0 - Fully active, able to carry on all pre-disease performance without restriction
- 1 - Restricted in physically strenuous activity but ambulatory and able to carry out work of a light or sedentary nature e.g. light house work, office work
- 2 - Ambulatory and capable of all self care but unable to carry out any work activities. Up and about more than 50% of waking hours
- 3 - Capable of only limited self care, confined to bed or chair more than 50% of waking hours
- 4 - Completely disabled. Cannot carry out any self care. Totally confined to bed or chair.