

Specialist Breast Centre

Breast Care Expertise & Triple Assessment
Direct Access Symptomatic & Routine Patients

Patient Referral Criteria

Urgent Referrals

- High suspicion of breast cancer at any age
- Discrete breast or axillary lump
- Ulceration/erythema/oedema
- Skin nodule
- Nipple eczema
- Recent nipple retraction/distortion
- Blood stained nipple discharge
- Suspected breast abscess

Non-Urgent Referrals

- Clinically benign breast lump
- Asymmetrical nodularity
- Pain not responding to simple measures
- Nipple discharge that is not blood stained

Clinic & Services

Dedicated TAC & Daily imaging clinics

Multidisciplinary team

Fully integrated radiology, radiography,
surgical, oncology and radiotherapy teams

Onsite pathology and laboratory

Breast Care Nurse support

Triple Assessment

Digital Mammography

High Resolution Ultrasound

Interventional Breast techniques

Breast MRI

Rapid and Direct Access

Referral Process

GP Referral required

- Referrals using form on the reverse or by letter via fax, email, post or HealthLink
- Referrals triaged and patients offered appointments in line with recommended guidelines
- Patients with high suspicion of breast cancer should be referred for Triple Assessment

Specialist Breast Centre

Referral Form

CONSULTANT SURGEON First available or specify surgeon _____

Practice Details

Name: _____

Address: _____

Tel: _____

Fax: _____

Referring GP Signature: _____

Patient Details

Name: _____

Address: _____

Tel: _____

Mobile: _____

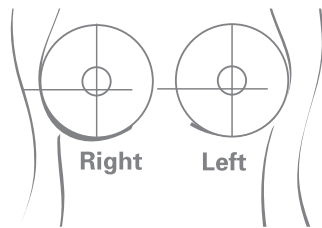
Date of Birth: _____

Physical Examination

Breast

Axilla

Other



Presenting Complaint

Urgent referral

- Discrete breast or axillary lump (unilateral, distinct, separate mass in patients over 35 years)
- Ulceration
- Skin distortion
- Nipple eczema
- Recent nipple retraction or distortion (less than 3 months)
- Blood-stained nipple discharge
- Patients with acute abscess

Early referral

- Inflammation persisting after Antibiotics
- Persistently refilling or recurrent cyst
- Unilateral discharge (not blood-stained)
- Intractable breast pain
- Discrete lump in women under 35 years
- Asymmetrical nodularity that persists at review after menstruation

Routine referral

- A patient whom the referring doctor considers to require a specialist opinion e.g. minor or moderate degrees of persistent breast pain (no discrete palpable lesion)
- Persistent bilateral nipple discharge (not blood-stained)
- Other

Personal history of breast cancer: No Yes side _____ year _____

Family history of breast cancer: No Yes who _____

Previous mammogram: No Yes where _____ year _____

For office use only:

Date referral received: ____ / ____ / ____ Appointment date: ____ / ____ / ____

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