

## Criteria for offering diagnostics

### Bone Sarcoma

- Arrange urgent x-ray for in patients with:
  - Unexplained **bone swelling or tenderness** not responding to analgesia or night time pain

**NOTE:** Normal or equivocal X-ray does not exclude Sarcoma as changes may not appear in the early stages of the disease.  
In adults, seek advice from the radiology service if ongoing concerns and arrange further imaging if urgent direct access. In children, refer early.

### Bone Sarcoma: Children and Adults - Risk Factors:

*Retinoblastoma, Paget's disease of the bone, bone exposure to ionising doses of radiation, Li Fraumeni syndrome, hereditary multiple exostoses, Ollier's disease or Mafucci's disease*

### Soft Tissue Sarcoma

- Arrange for **urgent ultrasound** in patients with:
  - Unexplained lump **increasing significantly** in size
  - Any lump **>5 cm**, whether painful or not

### Soft Tissue Sarcoma: Adults

#### Risk Factors:

*Prior radiotherapy, Li-Fraumeni syndrome, neurofibromatosis, familial adenomatous polyposis (Gardner's syndrome)*

### Soft Tissue Sarcoma: Children

Please **contact the Paediatrician on-call urgently** and use the **Pan London Suspected Children's Cancer form**

**Please do not refer the following benign conditions using the sarcoma 2WW form:**

- subcutaneous lipomas
- sebaceous cysts/epidermoid cyst
- ganglions
- giant cell tumours of the tendon sheath
- pigmented villonodular synovitis (PVNS) of a joint
- post-traumatic or inflammatory phenomena such as fat necrosis, abscess
- fibromas
- normal variant anatomy
- lymphangiomas/haemangiomas/all vascular malformations
- chest wall/rib asymmetry
- tenosynovitis of the wrist (for wrist mass)
- sternoclavicular joint degeneration

## Referral Criteria

- Suspicious **X-Ray showing** one or more of the following **suspicious features:** Spontaneous fracture, Bone destruction, New bone formation, Periosteal elevation
- Normal or equivocal x-ray but high clinical suspicion of bone sarcoma – see above (**NB provide full description in section 1 of the referral form 'Reason for referral'**)

- Ultrasound or MRI report findings:
  - **Suggest soft tissue sarcoma**
  - Are **uncertain** / scan does not confidently confirm a benign diagnosis, **and clinical concern persists** Suspected **recurrence** of previous sarcoma
  - GP does not have urgent direct access to ultrasound or MRI but has high clinical suspicion of soft tissue sarcoma (**NB provide full description in section 1 of the referral form 'Reason for referral'**)

## SUSPECTED SARCOMA REFERRAL TO SPECIALIST SARCOMA CENTRE

**ADULTS (SUSPECTED BONE AND SOFT TISSUE SARCOMA): FOR AN APPOINTMENT WITHIN 2 WEEKS**

**CHILDREN (UNDER 16 WITH SUSPECTED BONE SARCOMA): FOR AN APPOINTMENT WITHIN 48 HOURS**

### RESOURCES:

1. Suspected cancer: recognition and referral NICE guidelines NG12 (Feb 2021) <https://cks.nice.org.uk/topics/bone-soft-tissue-sarcoma-recognition-referral/>
2. Improving outcomes for people with sarcoma NICE guidelines [CSG9] 2006 <http://www.nice.org.uk/guidance/csg9>
3. <https://clinicalsarcomaresearch.biomedcentral.com/articles/10.1186/s13569-016-0060-4>
4. RCGP and Bone Cancer Research Trust <http://elearning.rcgp.org.uk/course/view.php?id=152>
5. Sarcoma UK <http://sarcoma.org.uk>