

When to refer

Every patient with a suspected gynaecological tumour must see a specialist within two weeks.

Note: in women over 45 years with persistent abdominal pain or distension, ovarian cancer should be considered and a pelvic examination performed.

Urgent out-patient referral [liaise with specialist and copy to CAS]

- Lesion suspicious of cancer on cervix or vagina on speculum examination.
- Lesion suspicious of cancer on clinical examination of the vulva.
- Palpable pelvic mass not obviously fibroids.
- Suspicious pelvic mass on pelvic ultrasound.
- More than one or a single heavy episode of postmenopausal bleeding (PMB) in women aged over 55 years who are not on HRT.
- Postcoital bleeding (PCB) age over 35 years that persists for more than 4 weeks.
- HRT: unexpected or prolonged bleeding persisting for more than 4 weeks after stopping HRT.

Refer to CAS

- Any other women with postmenopausal bleeding not on HRT.
- Repeated unexplained postcoital bleeding.

Refer to RARC

- if the patient does not meet the referral criteria above consider referral to CAS requesting a RARC appointment.