

Skin cancer - suspected

When to refer

Emergency [discuss with on-call specialist]

Every patient with suspected skin cancer must see a specialist within two weeks of their GP deciding that they need to be seen urgently and requesting an appointment. It is strongly recommended that transplant patients who develop any new or growing cutaneous lesions should be referred under the two week standard.

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

Melanoma

- Pigmented lesions on any part of the body which have one or more of the following features:
 - Growing in size
 - Changing shape
 - Irregular outline
 - Changing colour
 - Mixed colour
 - Ulceration
 - Inflammation

Squamous Cell Carcinoma

- Slowly growing, non-healing lesions with significant induration on palpation (commonly on face, scalp, back of hand) with documented expansion over a period of 1-2 months.
- Patients in whom squamous cell carcinoma has been diagnosed from a biopsy undertaken in general practice.
- Patients who are therapeutically immunosuppressed after an organ transplant have a high incidence of skin cancers, mainly squamous cell carcinoma, which can be unusually aggressive.

Refer to CAS

Basal Cell Carcinoma

- Majority are on the face, particularly around the inner canthus and nose.
- Slowly growing red pearly nodule on skin surface
- Later may break down with crusting to give the classic 'rodent' ulcer

Refer to RARC

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