## **ADHB Gynae Oncology Tips for Referrers**

- 1. Use the most recent referral form. Available from the <u>ADHB Gynaecology Referral Hub</u> (Google *gynae onc referral form*).
- 2. Include the patient's name <u>and</u> NHI with all communication, and in the email title. This helps us track additional details down and helps to avoid missing important information when searching.
- 3. Do not modify the referral form labels/headings. Doing so can interfere with our MDM templating tool.
- 4. What you write will become part of the patient's permanent electronic record. Use professional and respectful language. Many patients request a copy of their MDM report.
- 5. We can't view electronic records (including radiology report) south of the Auckland DHBs, so please include specifics i.e. date of imaging/operation, radiology provider, lab name.
- 6. The brief history section should be minimal, but must convey any circumstance, background, or co-morbidity that might guide management. It should not unnecessarily include imaging/operation/histology results already included further down in the referral. Suitable examples:
  - 1 month of PMB. Perimenopausal. Past appendicectomy.
  - Ovarian mass found on work-up for abdominal pain. 2 kg weight loss over 1 month.
  - SCC of cervix on LLETZ. Asymptomatic. Normal colposcopy.

Important aspects to include:

- Significant examination findings (abnormal cervix description, location/size of vulval lesions, major limitations to mobility or ability to attend clinic/undergo surgery/lie still for radiotherapy, any possible surface metastasis e.g. vaginal lesion).
- Current inpatient status and reason (sepsis, pain, immobility).
- Desire for fertility-sparing treatment.
- Past or current malignancies and treatments, dates, and histology specifics.
- Relevant surgical history including appendicectomy, salpingectomy, mesh.
- Interpreter requirement
- 7. ECOG score is vital. Include detail if not clearly fit for surgery.
- 8. Radiology findings should be brief but detailed enough to allow triaging. Useful specifics include:
  - Uterine dimensions for endometrial cancers, to guide suitability for TLH.
  - Side and size of enlarged lymph nodes (unless numerous).
- 9. Include the required minimum set of investigations listed on the referral form. If results are pending, please chase and forward the results on to <a href="mailto:gynaeoncteam@adhb.govt.nz">gynaeoncteam@adhb.govt.nz</a> as soon possible, so that this information can be made available at MDM.
- 10. The question for MDM can simply be "Management?". But feel free to include more specific questions.

