

Night sweats

Fever

NHS Rotherham Clinical Commissioning Group

Poforring Clinicians	Dotiont's Dotails
NB: ALL REFERRALS SHOULD E	BE SENT TO SHEFFIELD CHILDREN'S HOSPITAL

Referring	Clinician:	Patient	's Details	<b>::</b>	
GP Name:		NHS No	):		
Address:		Name:	lame:		
		Address	s:		
Tel No:					
Fax No:		Tel No	(home & mobile):		
I ax IIII		DOB:			
		Male/F	emale		
		Langua		Interpreter required ( )	
			ort requi	•	
I confirm to PLEASE HA  Immediate consider if	that I have explaine ND THE PATIENT A CO  Referral implies refer admission is required	d the 2 week wait appointme DPY OF THE URGENT <u>2ww Patier</u>	nt and p	cian directly and discuss the case to	
1. Leukae	emia				
Hepatosp	lenomegally			IMMEDIATE REFERRAL	
	ed petechiae			IMMEDIATE REFERRAL	
FBC indicates leukaemia				IMMEDIATE REFERRAL	
High level of suspicion from history			URGENT REFERRAL		
OFFE	R VERY URGENT FB	C WITH ANY OF THE FOLLOWI	NG UNE	KPLAINED SIGNS AND SYMPTOMS:	
Pallor	Fever	Persistent Fatigue	G	eneralised Lymphadenopathy	
Bruising	Bleeding	Persistent Infection	Pé	ersistent/unexplained bone pain	
2. Lymph	oma				
Unexplain	ed Lymphadenopat	:hy		IMMEDIATE REFERRAL	
Splenome	galy			IMMEDIATE REFERRAL	

TAKE INTO ACCOUNT ASSOCIATED SYMPTOMS PARTICULARLY:

Weight loss

Shortness of breath

Pruritis

IMMEDIATE REFERRAL	
IMMEDIATE REFERRAL	

4. Neuroblastoma	
Palpable abdominal mass	IMMEDIATE REFERRAL
Unexplained enlarged abdominal organ	IMMEDIATE REFERRAL

5. Retinoblastoma	
Absent red reflex	URGENT REFERRAL

6. Wilms' Tumour	
Palpable abdominal mass	IMMEDIATE REFERRAL
Unexplained enlarged abdominal organ	IMMEDIATE REFERRAL
Unexplained visible haematuria	IMMEDIATE REFERRAL

7. Soft Tissue Sarcoma			
USS findings suggestive of soft tissue sarcoma	IMMEDIATE REFERRAL		
USS findings uncertain and clinical concern persists	IMMEDIATE REFERRAL		
CONSIDER VERY URGENT DIRECT ACCESS USS WITH UNEXPLAINED LUMP THAT IS INCREASING IN SIZE			

8. Bone Sarcoma		
X-ray findings suggest possibility of bone sarcoma	IMMEDIATE REFERRAL	
CONSIDER VERY URGENT X-RAY FOR UNEXPLAINED BONE SWELLING OR PAIN		

Clinical Information:
Medical History
Active problems:
Investigations: FBC U&E LFT INR (as necessary) TFT
Known Allergies
Milowii / Micigles
Medications
Is this patient anticoagulated? Yes ( ) No ( )
Family History:
lathers of facility bistoms of discours 2. Yes / . No.
Is there a family history of disease? Yes ( ) No ( ) Please provide details
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