



Peripheral Blasts on CBC/Concern for Leukemia

| DEFINITION | SUGGESTED LABS/ IMAGING FROM REFERRING PROVIDER | URGENCY OF SCHEDULING |
|---|---|--|
| <p>Consider a new diagnosis of leukemia in a child who has:</p> <ul style="list-style-type: none"> • More than 2 cell lines down (anemia/thrombocytopenia/neutropenia) • An elevated or low WBC with blasts • Other symptoms may include petechiae, pallor, fatigue, bruising, bone pain, limp, hepatosplenomegaly | <ul style="list-style-type: none"> • CBC with differential • BMP • Phosphorus • LFT • Uric acid • LDH | <p>This is an urgent referral. Please complete and submit this webform, AND call 1-800-466-3729 to ensure the referral is scheduled or transferred in a timely manner.</p> |

Signs/Symptoms Concerning for Brain Tumor or Spinal Cord Compression

| DEFINITION | SUGGESTED LABS/ IMAGING FROM REFERRING PROVIDER | URGENCY OF SCHEDULING |
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| <p>Symptoms concerning for brain tumor: Persistent vomiting, balance/coordination problems, afebrile seizures, head tilt, increasing head circumference crossing centiles, persistent or recurring headaches, abnormal eye movements, loss of vision.</p> <p>Symptoms concerning for spinal cord compression: change of sensation, bladder or bowel dysfunction, sensory or motor changes in back, arms or legs.</p> | <p>If imaging has already been obtained, send reports and cloud images.</p> | <p>This is an urgent referral. Please complete and submit this webform, AND call 1-800-466-3729 to ensure the referral is scheduled or transferred in a timely manner.</p> |

ONCOLOGY REFERRAL GUIDELINES

Continued

Mass Identified on Exam or Imaging

| DEFINITION | SUGGESTED LABS/IMAGING FROM REFERRING PROVIDER | URGENCY OF SCHEDULING |
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| Mass identified on exam or imaging | <p>Work-up varies depending on location of mass and may include X-rays or imaging of involved area. Forward all labs/imaging reports and cloud images if available or send disc. If chest mass or abdominal mass, suggested labs include:</p> <ul style="list-style-type: none"> • CBC with differential • CRP/ESR • BMP • LFT • Uric acid • LDH • Do not start steroids if concerned for malignancy, as this can compromise the definitive diagnosis and treatment, and may lead to tumor lysis syndrome | <p>This is an urgent referral. Please complete and submit this webform, AND call 1-800-466-3729 to ensure the referral is scheduled or transferred in a timely manner.</p> |

Lymphadenopathy (Non-urgent) – Without Signs/Symptoms of Mediastinal Mass

| DEFINITION | SUGGESTED LABS/IMAGING FROM REFERRING PROVIDER | URGENCY OF SCHEDULING |
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| <p>Lymph nodes >2cm, increasing in size over weeks to months with no obvious cause and no other concerning findings.</p> <p>Lymph nodes <2cm in diameter, reducing or fluctuating in size are unlikely to be associated with malignancy in the absence of other concerning symptoms. Symptoms such as fever, night sweats weight loss, splenomegaly, bone pain, firm, non-tender LNs or supraclavicular LNs are more concerning for malignancy.</p> <p>Referral is URGENT and not routine if LNs are rapidly increasing in size OR associated with signs/symptoms of a mediastinal mass (breathlessness suggestive of airway obstruction not explained by known respiratory illness, increased SOB lying flat, distended veins/ venous congestion of upper chest or face).</p> | <p>If imaging has already been obtained, send reports and cloud images.</p> | <p>This is an urgent referral. Please complete and submit this webform, AND call 1-800-466-3729 to ensure the referral is scheduled or transferred in a timely manner.</p> |

ONCOLOGY REFERRAL GUIDELINES

Continued

Lymphadenopathy with Signs/Symptoms of Mediastinal Mass

| DEFINITION | SUGGESTED LABS/ IMAGING FROM REFERRING PROVIDER | URGENCY OF SCHEDULING |
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| <p>LNs with Signs/symptoms of a mediastinal mass should be evaluated urgently (breathlessness suggestive of airway obstruction not explained by known respiratory illness, increased SOB lying flat, distended veins/venous congestion of upper chest or face). Lymph nodes >2cm, rapidly increasing in size, or associated with symptoms such as fever, night sweats weight loss, splenomegaly, bone pain, firm, non-tender LN's or supraclavicular LN's are more concerning for malignancy. LN's rapidly increasing in size should be evaluated urgently.</p> | <ul style="list-style-type: none"> • CBC with differential • CRP/ESR • BMP • LFT • Uric acid • LDH • CXR (please include report and cloud images) • Do not start steroids if concerned for malignancy, as this can compromise the definitive diagnosis and treatment, and may lead to tumor lysis syndrome | <p>This is an urgent referral. Please complete and submit this webform, AND call 1-800-466-3729 to ensure the referral is scheduled or transferred in a timely manner.</p> |

Mediastinal Mass Noted on Imaging Mass

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| <p>Mediastinal mass noted on imaging</p> | <ul style="list-style-type: none"> • CBC with differential • CRP/ESR • BMP • Phosphorus • LFT • Uric acid • LDH • CXR (please include report and cloud images) • Do not start steroids if concerned for malignancy, as this can compromise the definitive diagnosis and treatment, and may lead to tumor lysis syndrome. | <p>This is an urgent referral. Please complete and submit this webform, AND call 1-800-466-3729 to ensure the referral is scheduled or transferred in a timely manner.</p> |

ONCOLOGY REFERRAL GUIDELINES

Continued

Pathology Shows Cancer

| DEFINITION | SUGGESTED LABS/IMAGING FROM REFERRING PROVIDER | URGENCY OF SCHEDULING |
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| Pathology shows cancer | Forward all available path reports, labs and cloud imaging. | This is an urgent referral. Please complete and submit this webform, AND call 1-800-466-3729 to ensure the referral is scheduled or transferred in a timely manner. |

Familial Cancer Syndromes

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| Including Li-Fraumeni, von Hippel Lindau, DICER1, etc. | Refer to Genetics for appropriate counseling and screening tests. After confirmed diagnosis of familial cancer syndrome (even if the child has no personal history of cancer), genetics will refer the patient to the appropriate clinic for screening. | Routine: Only patients who have had genetics counseling, including recommendations for screening, will be scheduled with oncology. Your referral will be processed in two to three business days. If you need to speak to a specialist or feel your referral needs to be addressed sooner, please call 1-800-466-3729 after completing this webform. |

ONCOLOGY REFERRAL GUIDELINES

Continued

Prior history of malignancy- currently on therapy and transferring care

| DEFINITION | SUGGESTED LABS/ IMAGING FROM REFERRING PROVIDER | URGENCY OF SCHEDULING |
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| Patient is currently undergoing treatment for a malignancy and requires transfer of care. | Forward all treatment records. | This is an urgent referral. Please complete and submit this webform, AND call 1-800-466-3729 to ensure the referral is scheduled or transferred in a timely manner. |

Prior history of malignancy and therapy has been completed

| DEFINITION | SUGGESTED LABS/ IMAGING FROM REFERRING PROVIDER | URGENCY OF SCHEDULING |
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| Treated for malignancy in the past and has completed all prescribed therapy. | Forward all treatment records. | Routine: Your referral will be processed in two to three business days. If you need to speak to a specialist or feel your referral needs to be addressed sooner, please call 1-800-466-3729 after completing this webform. |

Other

| DEFINITION | SUGGESTED LABS/ IMAGING FROM REFERRING PROVIDER | URGENCY OF SCHEDULING |
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| | | Your referral will be processed in two to three business days. If you need to speak to a specialist or feel your referral needs to be addressed sooner, please call 1-800-466-3729 after completing this webform. Call ODD to determine plan. |