

Urology

Prostate cancer

EGFR testing needs to have been performed (Result >60 in last 9 months, 40-59 in last 6 months, <40, please repeat prior to referral), please confirm date: Single Code Entry: eGFR (estimated glomerular filtration rate) using creatinine Chronic Kidney Disease Epidemiology Collaboration equation per 1.73 square metres

- Prostate feels malignant on digital rectal examination (Please complete PSA for all referrals) PSA result: Specific Codes Table: PSA (prostate-specific antigen) level
- Single PSA level **over 10ng/ml** and above the age-specific reference range, **after exclusion of UTI**.
- Two PSAs, 6 weeks apart (**but no older than 10 weeks**), with level **under 10ng/ml** and above the age-specific reference range, **after exclusion of UTI**. If you feel there is a clinical reason not to wait for a second PSA, please state reason Free Text Prompt
- Men over 80 years with a PSA <10 do not require referral.**

Age Specific Reference Ranges

- | | |
|--|---|
| <input type="checkbox"/> 40-49yrs and ≥ 2.5 ng/ml | <input type="checkbox"/> 70-79yrs and ≥ 5 ng/ml |
| <input type="checkbox"/> 50-59yrs and ≥ 3 ng/ml | <input type="checkbox"/> ≥ 80 yrs and ≥ 20 ng/ml |
| <input type="checkbox"/> 60-69yrs and ≥ 4 ng/ml | <input type="checkbox"/> ≥ 80 yrs and 10-20 ng/ml Will be seen in 6 weeks |

Bladder and Renal cancer

EGFR testing needs to have been performed within the last 6 weeks, please confirm date:

Aged 45 and over and have:

- visible haematuria that persists or recurs after successful treatment of urinary tract infection.

Non-Visible Haematuria (NVH) is where dipstick analysis demonstrates the presence of blood that is not visible to the naked eye, and where the patient has not given a history of visible haematuria. Patients with NVH should only be referred via the suspected cancer system if:

- Aged 60 and over** and have unexplained non-visible haematuria, **persistent for > 2 weeks**, and either dysuria or a raised white cell count on a blood test. Please confirm dysuria raised white cell count

Patients with new NVH who do not meet these criteria have an extremely low risk of malignancy and can be referred routinely using a non-cancer pathway.

- Imaging suspicious of renal cancer
- Imaging suspicious of bladder cancer

Testicular cancer

- Non-painful enlargement or change in shape or texture of the testis
- Imaging suspicious of testicular cancer

Penile cancer

- Penile mass or ulcerated lesion
- Unexplained or persistent symptoms affecting the foreskin or glans such as unusual foul-smelling discharge, bleeding, phimosis or swollen lymph nodes in groin area.