

## **NHS Border's Primary Care RCDS Referral Template (December 2025)**

Guidelines

Clinical Data

Additional Information

Past Medical History

Medication

Risks/Alerts

Demographics

Additional Support Needs

Administration

### Borders RCDS Protocol R21

## **Referral / Inclusion Criteria**

- GP Clinical Suspicion / "gut feeling" of cancer but not indicative of tumour site
- New unexplained weight loss (either documented 5% or more of body weight in three months or with strong clinical suspicion)
- New unexplained loss of appetite, fatigue, nausea, malaise, or bloating of four weeks or more (less if strong clinical suspicion)
- New unexplained, unexpected, or progressive pain, including bone pain, of four weeks or more
- Unexplained laboratory test findings (e.g. Thrombocytosis potentially indicative of lung, endometrial, gastric, oesophageal and colorectal (LEGO-C) cancers)
- >18 years of age
- The patient is well enough to go through the process
- RCDS bundle investigations have been requested
- There is no other urgent referral pathway suitable for this clinical scenario

## **Exclusion Criteria**

- Patients already on or suitable for a tumour site specific urgent suspicion of cancer referral pathway
- Symptoms likely due to recurrence of previous cancer - refer to previous specialty
- Cancer of unknown origin found on primary care radiological investigation(s) - consider the most likely NHS Borders tumour site specific pathway or Cancer of Unknown Primary (CUP) pathway via Sci-Gateway > Lothian > WGH > Medical Oncology > CUP
- Referrals from Secondary Care or non-Borders residents
- Patients aged <18
- Patient too unwell to attend or likely to require acute admission
- A serious non-cancer diagnosis is likely - these should be referred to the appropriate specialty

## Borders RCDS Protocol R21

Urgency/Priority of referral \*

Urgent - Suspicion of cancer

Suspicion of cancer

☐ Yes

discussed with patient? \*

☐ No

**Reason for referral**

Provisional Diagnosis /  
Presenting Complaint \*

AB

Main referral text

AB

GP Clinical Suspicion /  
"gut feeling" of cancer  
but not indicative of  
tumour site \*

☐ Yes

☐ No

New unexplained weight  
loss (either documented  
5% or more of body  
weight in three months or  
with strong clinical  
suspicion) \*

☐ Yes

☐ No

New unexplained loss of  
appetite, fatigue, nausea,  
malaise, or bloating of  
four weeks or more (less  
if strong clinical  
suspicion) \*

☐ Yes

☐ No

New unexplained,  
unexpected, or  
progressive pain,  
including bone pain, of  
four weeks or more \*

☐ Yes  
☐ No

Unexplained laboratory  
test findings (e.g.  
Thrombocytosis  
potentially indicative of  
lung, endometrial,  
gastric, oesophageal and  
colorectal (LEGO-C)  
cancers) \*

☐ Yes  
☐ No

**Please confirm the following have taken place**

Chest, abdominal, lymph  
node, and urinalysis  
examinations \*

☐

Relevant findings

Mandatory RCDS blood bundle obtained.  
Please either select RCDS Female or RCDS Male  
from GPOC > Star icon > Order sets.

FBC, ESR, CRP, U&E,  
LFT, gGT, TSH, HbA1c,  
bone profile, full iron  
studies, vitamin B12,  
folate, blood borne virus  
screen (HIV, Hep B, Hep  
C), CA125 or PSA \*

☐

Relevant findings

Cancel

Attachments

Preview Letter

Spellcheck

Save as Draft

Send