

STEREOTACTIC RADIATION TREATMENT REFERRAL FORM

DEADLINE: Thursday 12:00pm

Patient Name		H&C Number				
DOB						
Referrer Name		Referrer Contact Number				
Diagnosis						
Recent Imaging Findings - Brain & Extra cranially						
Previous SRS details including						
<ul style="list-style-type: none"> • Site(s) treated • Date(s) • Outcome 						
Question being asked						
<ul style="list-style-type: none"> • Is this a referral for SRS to new lesion • A radiological review of previous lesion(s) • both 						
Future Treatments Planned						
Treatment Intent <i>(Please Tick)</i>	Radical	<input type="checkbox"/>	Life Expectancy	<input type="checkbox"/>	KPS	<input type="checkbox"/>
	Palliative	<input type="checkbox"/>				
Clinical Summary						

Criteria for referral for SRT for cerebral metastases		
Stereotactic radiotherapy (SRT) is considered if all the following criteria are met		
<i>Please tick the appropriate box</i>	Yes	No
Decision making for treatment is made within an IOG compliant CNS tumours MDT	<input type="checkbox"/>	<input type="checkbox"/>
The relevant IOG compliant site specific tumour MDT has confirmed that the life expectancy from the extra-cranial disease is more than 6 months	<input type="checkbox"/>	<input type="checkbox"/>
Referral is made by a consultant oncologist who is, & will continue to be, responsible for the ongoing management of the patient	<input type="checkbox"/>	<input type="checkbox"/>
No, or controlled/controllable, extra-cranial metastatic disease	<input type="checkbox"/>	<input type="checkbox"/>
Pressure symptoms which would be best relieved by surgery are excluded	<input type="checkbox"/>	<input type="checkbox"/>
General ability to tolerate treatment	<input type="checkbox"/>	<input type="checkbox"/>
The number or total volume of lesions treated is agreed with the local SRS/SRT MDT and part of the CNS Tumours MDT operational policy.	<input type="checkbox"/>	<input type="checkbox"/>

Patients potentially suitable for SRT are not to be added directly to the SRT MDM. Patients can only be added for discussion by the SRT team (DSC, JAH, and TF). All potential referrals are to be discussed, by the treating consultant oncologist, with Dr Conkey, Dr Harney or Mr Flannery & *only* if deemed suitable by them will be put on MDM. The treating oncologist must agree to follow patients up post SRS & organise MRI imaging as advised by the SRS team (if appropriate).

Please complete and email this form to tom.flannery@belfasttrust.hscni.net, Jacqui.harney@belfasttrust.hscni.net or David.conkey@belfasttrust.hscni.net and copy in angela.oneill@belfasttrust.hscni.net, MDMNeuroOncology@Belfasttrust.hscni.net and Joanne.moss@belfasttrust.hscni.net (MDT Coordinator)

Completed forms will be accepted no later than Thursday 12pm. All fields must be completed for the referral to be processed.