

PROVINCIAL LUNG CANCER (MEDICAL OR RADIATION ONCOLOGY) REFERRAL QUICK REFERENCE

ROUTINE REFERRAL

(Patients should only be referred to the cancer centre when they have a confirmed diagnosis of cancer)

For routine referrals, please use Alberta Netcare eReferral

www.albertanetcare.ca/eReferral.htm

- **Indicate a clear reason for referral and any confirmed diagnosis to assist in directing your referral.*
- Provide all required information and specific tests/investigations.
- Select referral locations (**Go to last page for referral processes**)
- See **QuRE Referral Consult Checklists** (<https://www.ahs.ca/quire>) for high-quality referral.

EMERGENCY

(Patient needs to be seen immediately)

Refer directly to the emergency department or call RAAPID

(South: 1-800-661-1700 | North: 1-800-282-9911) for triage assistance/direct discussion with the most appropriate specialist.

EMERGENCY:

- Spinal cord compression
- Malignant hypercalcemia (symptomatic)
- Significant hemoptysis (>100ml per 24 hours)
- Symptomatic central airway obstruction
- Clinically significant superior vena cava obstruction

EXCLUSIONS

Consider referring to ATOP (Alberta Thoracic Oncology Program) or Thoracic Surgery for assistance with diagnosis, staging or surgical treatment of lung cancer. **Please submit your referral through eReferral Consult Request. Go to www.albertanetcare.ca/ereferral.htm to get started.**

Calgary

ATOP, Foothills Medical Centre, Health Sciences Centre, Area 6B, 1403 29 Street NW

Calgary, AB T2N 2T9

Phone: 403-944-1774 | Fax: 403-944-8848

OR

Thoracic Surgery, Foothills Medical Centre, Main Building, Rm G33, 1403 29 Street NW

Calgary, AB T2N 2T9

Phone: 403-944-4279 | Fax: 403-270-8431

Edmonton

ATOP, Royal Alexandra Hospital, Children's Centre, Room 4505, 10240 Kingsway Avenue NW

Edmonton, AB T5H 3V9

Phone: 780-735-3970 | Fax: 780-735-3971

- For more information on Provincial Lung Cancer Guidelines, please visit: www.ahs.ca/info/cancerguidelines.aspx

Reason for Referral	Process	Recommended Info (Essential Investigations & Timeframes)	Extra Info (Attach if Available)
MALIGNANT PLEURAL MESOTHELIOMA	Refer to Cancer Centre	<p>< 3 Months</p> <ul style="list-style-type: none"> Tissue pathology / cytology CT chest <p>< 21 Days</p> <ul style="list-style-type: none"> CBC with differential Renal function: creatinine Liver function: ALT/AST, alkaline phosphatase (AP), total bilirubin, LDH, albumin Electrolytes: calcium 	<p>< 28 Days</p> <ul style="list-style-type: none"> Chest x-ray Abdominal imaging (US or preferably CT)
NON SMALL-CELL LUNG CANCER	Refer to Cancer Centre	<p>IF SYMPTOMATIC, PLEASE INDICATE LOCATION OF SYMPTOMS</p> <p>< 3 Months</p> <ul style="list-style-type: none"> Tissue pathology / cytology CT chest / upper abdomen <p>< 21 Days</p> <ul style="list-style-type: none"> CBC with differential Renal function: creatinine Liver function: ALT/AST, alkaline phosphatase (AP), total bilirubin, LDH, albumin Electrolytes: calcium 	<p>< 6 Months</p> <ul style="list-style-type: none"> Pulmonary Function Test (PFT)
SMALL-CELL LUNG CANCER	Refer to Cancer Centre	<p>IF SYMPTOMATIC, PLEASE INDICATE LOCATION OF SYMPTOMS</p> <p>< 3 Months</p> <ul style="list-style-type: none"> Tissue pathology / cytology CT chest / upper abdomen <p>< 21 Days</p> <ul style="list-style-type: none"> CBC with differential Renal function: creatinine Liver function: ALT/AST, alkaline phosphatase (AP), total bilirubin, LDH, albumin Electrolytes: calcium, sodium 	<p>< 6 Weeks</p> <ul style="list-style-type: none"> CT or MRI brain Bone scan <p>< 6 Months</p> <ul style="list-style-type: none"> Pulmonary Function Test (PFT)
THYMOMA/THYMIC CANCER	Refer to Cancer Centre	<p>< 3 Months</p> <ul style="list-style-type: none"> CT chest / upper abdomen 	<p>< 3 Months</p> <ul style="list-style-type: none"> Tissue pathology / cytology <p>< 21 Days</p> <ul style="list-style-type: none"> CBC with differential Renal function: creatinine Liver function: ALT/AST, AP, total bilirubin, LDH, albumin Electrolytes: calcium, sodium

Note: Please refer to the Health Services Catalogue in Alberta Netcare eReferral for approximate wait times to be seen for all standard referrals.

REFERRAL PROCESS

For routine referrals to medical or radiation oncology for lung cancer, please use Alberta Netcare eReferral system. For more information on cancer centre referral and treatment, please contact one of the following cancer centres.

AHS Zone	Cancer Centre Locations	Contact
NORTH ZONE	Grande Prairie Cancer Centre, Grande Prairie	PH: 780-538-7588 FX: 780-532-9120
EDMONTON ZONE	Cross Cancer Institute, Edmonton	PH: 780-432-8771 FX: 780-432-8681
CENTRAL ZONE	Central Alberta Cancer Centre, Red Deer	PH: 403-343-4526 FX: 403-346-1160
CALGARY ZONE	Tom Baker Cancer Centre, Calgary	PH: 403-521-3722 FX: 403-521-3245
SOUTH ZONE	Jack Ady Cancer Centre, Lethbridge	PH: 403-388-6800 FX: 403-327-4160
	Margery E Yuill Cancer Centre, Medicine Hat	PH: 403-529-8817 FX: 403-529-8007

Visit Alberta Referral Directory (<https://albertareferraldirectory.ca>) for individual clinic contact information.

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