

NHS number: _____

Name: _____

Address: _____

Date of birth: _____

CR number: _____

Affix patient label

Checklist for investigations / actions for new / relapsed paediatric haematology / oncology patients

Refer to the guidelines for referring new, urgent and routine
haematology / oncology patients to BRCH

Weight (kg): Height (cm):	BP:
History	- Remember symptoms relevant to haematology / oncology problems
Examination	- Remember lymphadenopathy, hepatosplenomegaly, testicular examination in boys, fundoscopy, signs of raised intracranial hypertension
Vaccination history	- Remember to ask about history of chicken pox or measles in child.
Baseline investigations and actions	Please tick
Full blood count including differential and review of film (if appropriate)	
Coagulation screen	
Group & save	
Urea and electrolytes / bone profile / liver function tests / magnesium / uric acid	
Blood cultures and CRP if febrile / unwell	
Viral titres for chickenpox, measles, CMV, EBV (pre-transfusion)	
Swabs from any lesion	
Consider non-specific markers such as LDH, ferritin, ESR	
Tumour markers if appropriate: AFP, β HCG, CEA	
Urinary catecholamines if neuroblastoma is a differential diagnosis	
Consider CXR and other imaging as indicated in guideline	
Details of other imaging performed – CT, MRI etc. if relevant	
TPMT genotype if possible leukaemia	
Documentation of discussion by Consultant or senior member of staff of suspected diagnosis of malignancy with patient and / or family.	
Plan for on-going care documented in notes	
RCHT Paediatric Oncology Team informed of patient - email: rch-tr.PaedsOncology@nhs.net	
GP contacted within 24 hours of suspected diagnosis (or by the end of the next working day)	
Checklist activated by	Sign: Print: Designation:
	Date: Time: