National Cancer Control Programme

National Breast Cancer GP Referral Guideline

Draft for Consultation
July 2019
A patient presents with self-detected breast lump

The GP takes history and performs a clinical exam

A discrete breast lump is NOT found by the GP
- If other breast signs are identified please refer to algorithm: A patient presents with a breast complaint [hyperlink]

A routine clinical exam by the GP identifies a discrete breast lump
- Complete electronic National Symptomatic Breast Referral Form [hyperlink]

If the exam is normal reassure the patient. Advise the patient to return in 6 weeks if they continue to feel a lump

Encourage the patient to register with BreastCheck if they are 50 years of age or older.
A patient who presents with a breast complaint 
(other than a discrete breast lump)

The GP takes history and performs a clinical exam

Does the patient have any of the following?

Pain
- Breast pain alone (see algorithm A patient who presents with mastalgia (breast pain) alone for management [Hyperlink])
- Costochondritis/musculo-skeletal pain

No referral to the SBD Clinic is indicated

Skin conditions
- Nipple itch without an associated rash
- Sebaceous cysts
- Skin lesions
- Bilateral nipple eczema
- Hidradenitis

No referral to the SBD Clinic is indicated

Miscellaneous
- Non-bloody bilateral nipple discharge
- Axillary adiposity
- Patients on HRT
- Gynaecomastia

No referral to the SBD Clinic is indicated

These symptoms can be managed in Primary Care or refer to another appropriate service if indicated.

Does the patient have any of the following signs or symptoms?

- Breast lump (please follow algorithm A patient with a breast lump [Hyperlink])
- Persistent asymmetric focal nodularity
- Unilateral bloody nipple discharge
- Unilateral, spontaneous serous nipple discharge
- New and fixed nipple retraction
- Skin dimpling (peau d'orange)
- Unilateral nipple eczema refractory to topical treatment
- Breast abscess
- Suspicious axillary lump
- Image-detected breast abnormality found on CT/MRI/PET/breast imaging (report and disk will be required for appointment)

Complete National Symptomatic Breast Referral Form [Hyperlink] and refer to the Symptomatic Breast Disease Unit

Encourage the patient to register with BreastCheck if they are 50 years of age or older.
A patient who presents with mastalgia (breast pain) alone

The GP takes history and performs a clinical exam

No suspicious clinical findings identified on clinical exam

- **No referral to the Symptomatic Breast Disease Clinic is indicated**

Patient **under 35 years of age**

- No referral to the Symptomatic Breast Disease Clinic is indicated.
  - Reassure the patient that mastalgia without any other breast signs or symptoms in women under 35 is not suggestive of cancer.
  - Provide advice on mastalgia. [Hyperlink to NCCP mastalgia info]

Patient **35 years of age or older**

- No referral to the Symptomatic Breast Disease Clinic is indicated.
  - Reassure patient and provide advice on mastalgia. [Hyperlink to NCCP mastalgia info]

Suspicious clinical findings: follow appropriate algorithm *A patient with a breast lump* or *A patient presents with a breast complaint.* [Hyperlinks]

- **Encourage the patient to register with BreastCheck if they 50 years of age or older.**

However, if the patient returns with persistent mastalgia consider referring for mammography only using the National Symptomatic Breast Referral Form.

Mammography is not recommended if the patient has had a mammogram in the previous 12 months, including in BreastCheck.