

Pilot HSE National Clinical Guideline:
**GP Guideline for the referral of patients
with high risk squamous cell carcinoma**

June 2025



Disclaimer

'This guideline ("the Guideline") was developed by a multidisciplinary Guideline Development Group ("the Group") and is based upon the best clinical evidence available together with the clinical expertise of the Group members. The Guideline supersedes all previous HSE/NCCP squamous cell carcinoma GP referral guidelines. The National Cancer Control Programme (NCCP) is part of the Health Service Executive (HSE) and any reference in this disclaimer to the NCCP is intended to include the HSE. Please note, the Guideline is for guidance purposes only. The appropriate application and correct use of the Guideline is the responsibility of each health professional, as an autonomous practitioner, at all times. Each health professional should exercise his or her clinical judgement in deciding when and how to make a referral to a Skin Cancer Clinic. In the event of any uncertainty as to the application and/or use of the Guideline or whether a referral should be made to a Skin Cancer Clinic it is the responsibility of each health professional to seek further clarity from the appropriate clinician or specialist. The NCCP accepts no liability nor shall it be liable, whether arising directly or indirectly, to the user or any other third party for any claims, loss or damage resulting from any use of the Guideline.'

Introduction

The HSE National Clinical Guideline: GP Guideline for the referral of patients with high risk squamous cell carcinoma (SCC) has been developed to provide a clear pathway for patients with suspected high risk SCC that requires referral to a secondary care skin cancer clinic. These guidelines are based on the best available current evidence integrated with clinical expertise and patient values.

How to refer

Patients with a suspected high risk SCC should be electronically referred to a skin cancer clinic.

Electronic referrals are sent via Healthlink (www.Healthlink.ie) or by using one of the following Irish College of General Practitioner (ICGP) accredited software:

- Complete GP
- Helix Practice Manager
- HealthOne
- Socrates

List of Skin Cancer Clinics

- The Mater Misericordiae University Hospital (pilot site)

Follow the SunSmart 5 S's to reduce your risk of skin cancer



Slip on clothing that covers your skin



Slop on sunscreen on exposed areas using factor 30+ for adults and 50+ for children



Slap on a wide-brimmed hat



Seek shade – especially if outdoors between 11am and 3pm



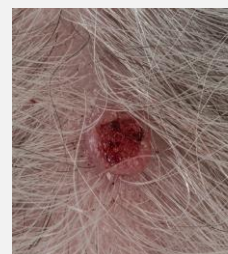
Slide on sunglasses

Do not deliberately try to get a suntan. Avoid getting a sunburn.
Never use a sunbed.

A patient presents with a suspected Squamous Cell Carcinoma (SCC)

A Squamous Cell Carcinoma may present as:

- A nodule or keratinized tumour that may ulcerate or be painful/tender
- An ulcer without keratinization



The GP takes a patient history and performs a clinical exam, if any of the following features are present the patient should be referred to a Skin Cancer Clinic

Tumour location

The patient has a suspected SCC, of any size, on the following locations:

- Head or neck
- Hands
- Feet
- Pretibia
- Anogenital

OR

Tumour diameter

The patient has a suspected SCC on any other part of the body with a diameter of >20 mm

OR

Patient factors

The patient has a suspected SCC :

- over the site of previous radiotherapy, chronic inflammation or scarring or site of previous SCC
- or is immunocompromised*

*Definition of immunocompromised:

Solid organ transplant recipients, genetic conditions in which predisposition occurs, or patients with chronic lymphocytic leukaemia, drug-induced immunosuppression (for example Azathioprine).

Refer the patient to a Skin Cancer Clinic



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