PATIENT ASSESSMENT: EXAMINATION, INDICATIONS AND FIT

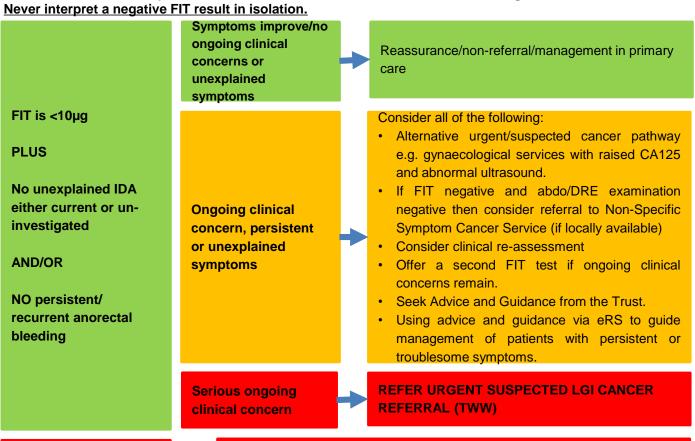
Note: blood tests should include MCV, FBC, U&E, iron studies/ferritin, eGFR and CA125 for women.



Symptoms/clinical findings	Adult aged 18 years or over
Unexplained abdominal pain and/or unexplained weight loss	Arrange FIT test AND order bloods. Safety net and wait for the results and then consider referring depending on results in context of clinical concerns
Changes in bowel habit (CBH)	
Anaemia without iron deficiency which is unexplained (especially in those 60yrs and above)	
Unexplained rectal bleeding	
Rectal bleeding AND WITH abdominal pain/CBH/weight loss	
Unexplained IDA OR previously un-investigated IDA in men and non-menstruating women (menstruating women with IDA need only be referred if FIT Positive)	Refer Urgent Suspected LGI Cancer Referral (TWW) PLUS Arrange FIT test AND order bloods Do NOT wait for FIT result or blood results Ensure that it is unexplained IDA
Abdominal mass	Refer Urgent Suspected LGI Cancer Referral (TWW) Arrange FIT AND Order bloods. Do NOT wait for FIT result or blood results
Anal/rectal mass	Refer Urgent Suspected LGI Cancer Referral (TWW). DO NOT FIT test. Order bloods. Do NOT wait for blood results
Anal ulceration	

WHEN TO REFER ON URGENT SUSPECTED LGI REFERRAL

FIT results must be interpreted in the context of other results, examination findings and clinical concern. Never interpret a negative FIT result in isolation.



FIT is <10µg AND unexplained IDA and/or persistent/ recurrent anorectal bleeding

FIT 10µg or more

REFER URGENT SUSPECTED LGI CANCER REFERRAL (TWW)