

Melanoma: Referral source and diagnostic query

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BACKGROUND

In 2014, Ireland's National Cancer Control Programme (NCCP) introduced an electronic referral form for general practitioners (GPs) to refer suspicious pigmented lesions to secondary care units. Ideally all patients diagnosed with melanoma should be referred using this pathway, with the query 'A likely melanoma.' A key performance indicator designated by the NCCP is that excision takes place within 6 weeks of receipt of referral.

This audit was performed to assess local uptake of the NCCP referral form and whether the route of referral of suspicious pigmented lesions aided accurate triage.

METHODS

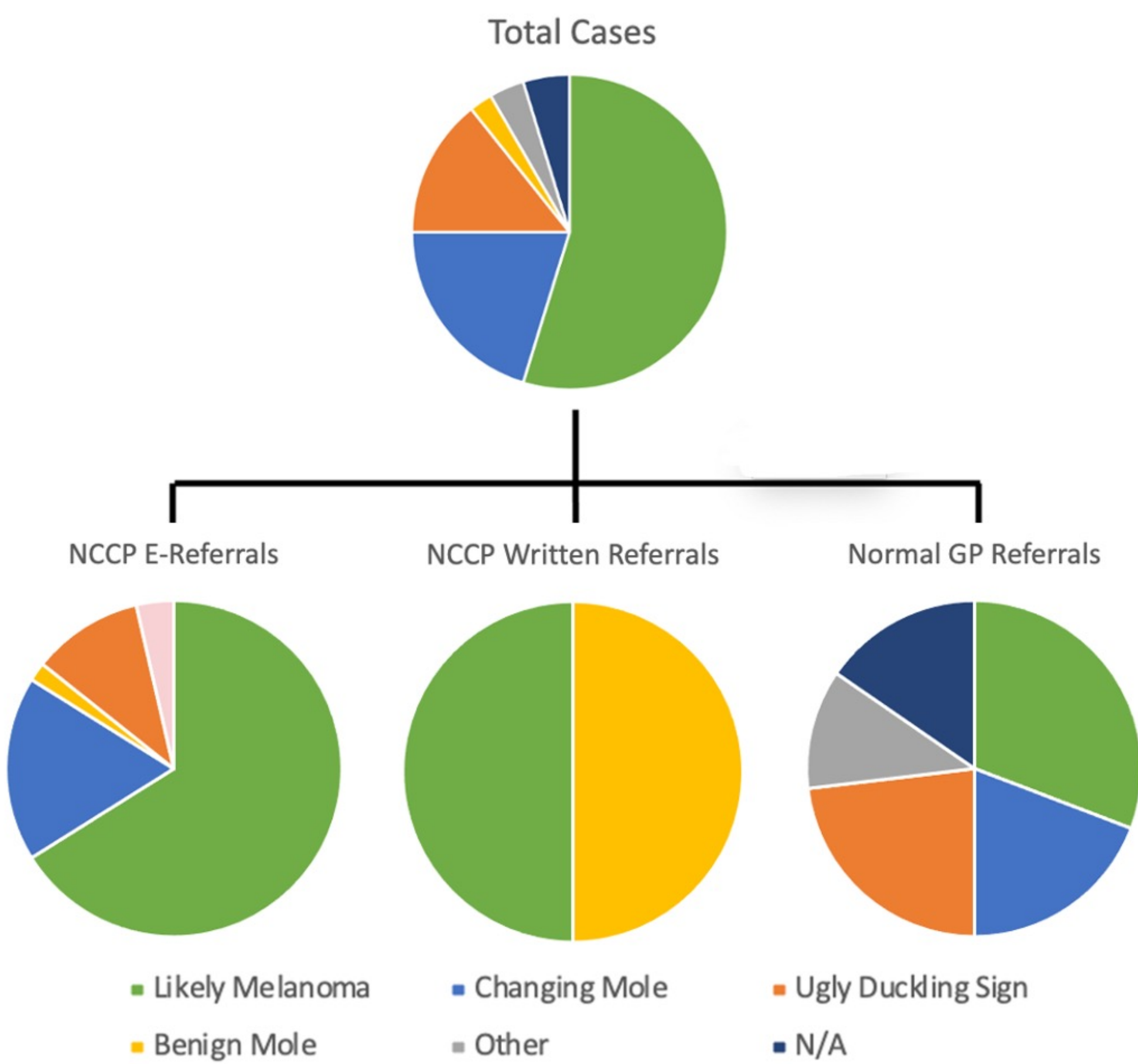
109 cases of invasive melanoma were diagnosed in our hospital in 2022, as identified from the local melanoma database. Source and route of referral, date of referral, referral query, and date of excision were extracted to compare accuracy in diagnosis across referral route and how the referral routes affect time to excision.

RESULTS

84 cases were referred to dermatology from GPs. When focusing specifically on these cases, the percentage distribution reveals that 56/84 (66.7%) followed the correct pathway (NCCP E-Referral), 26/84 (30.9%) were initiated through standard GP forms, and 2/84 (2.4%) originated from NCCP written referrals. These specific referrals underwent additional evaluation to ascertain the referral query and assess the time from referral to excision.

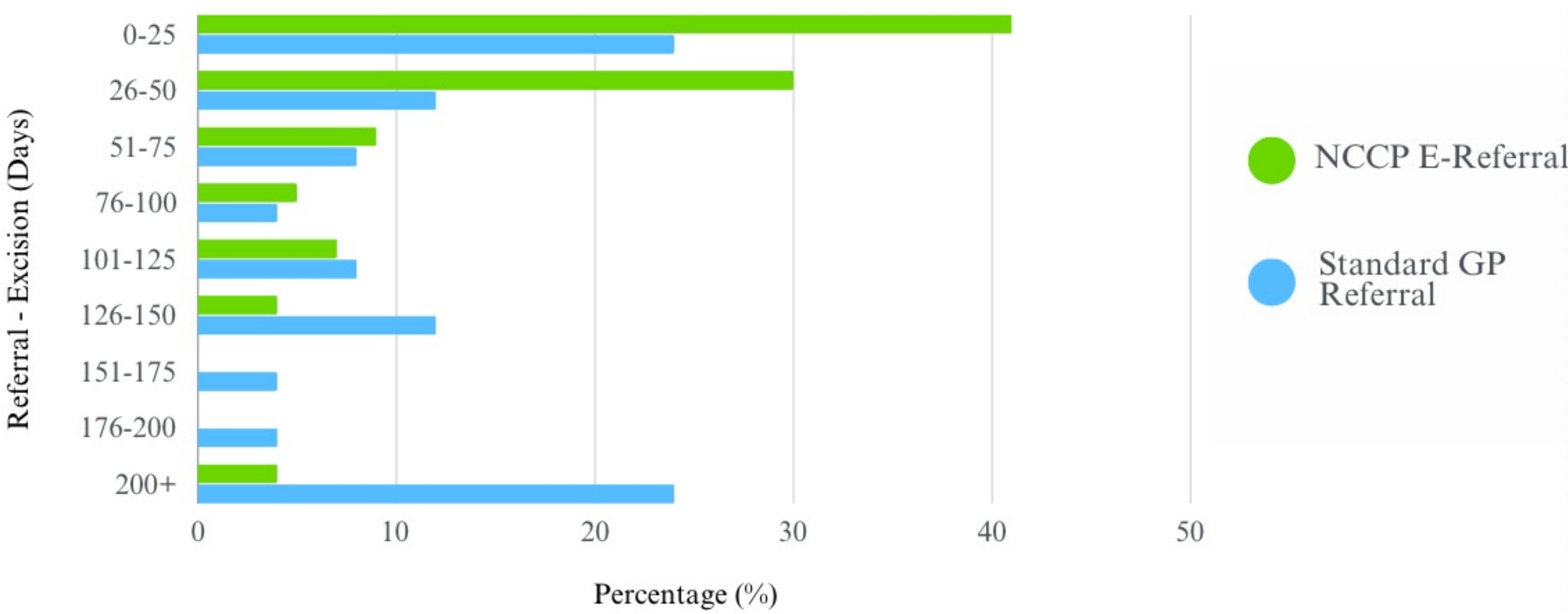
REFERRAL QUERY

The referral queries were categorized based on the options provided on the NCCP E-Referral form. These categories included a likely melanoma, a changing mole, an ugly duckling sign, a benign mole, or other

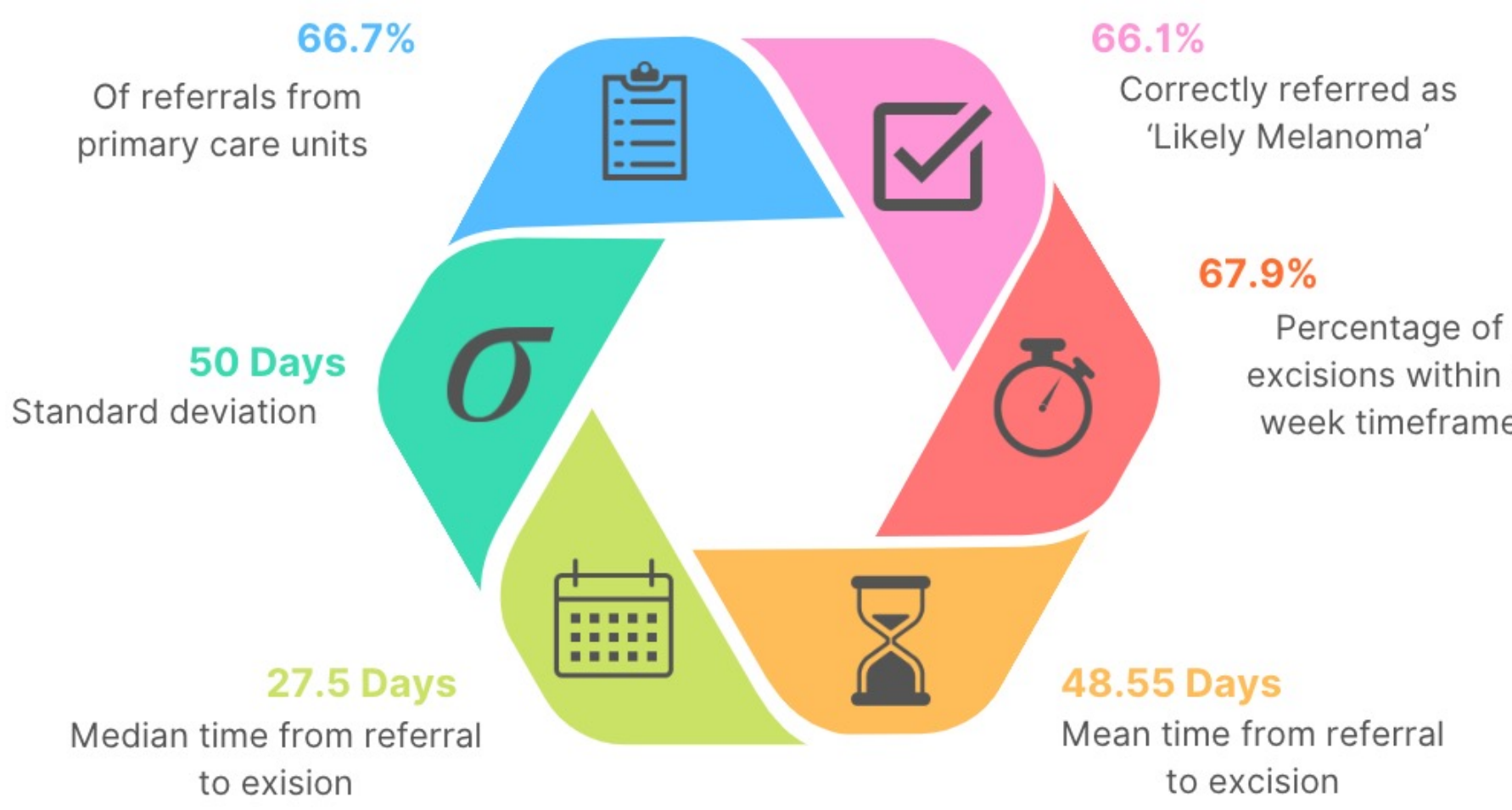


REFERRAL TO EXCISION TIME

Time elapsed from referral to excision was also examined. This comparison focused on cases utilizing the NCCP E-Referral pathway and those initiated through standard GP referral, with the results below demonstrating the increased effectiveness of the NCCP E-Referral pathway

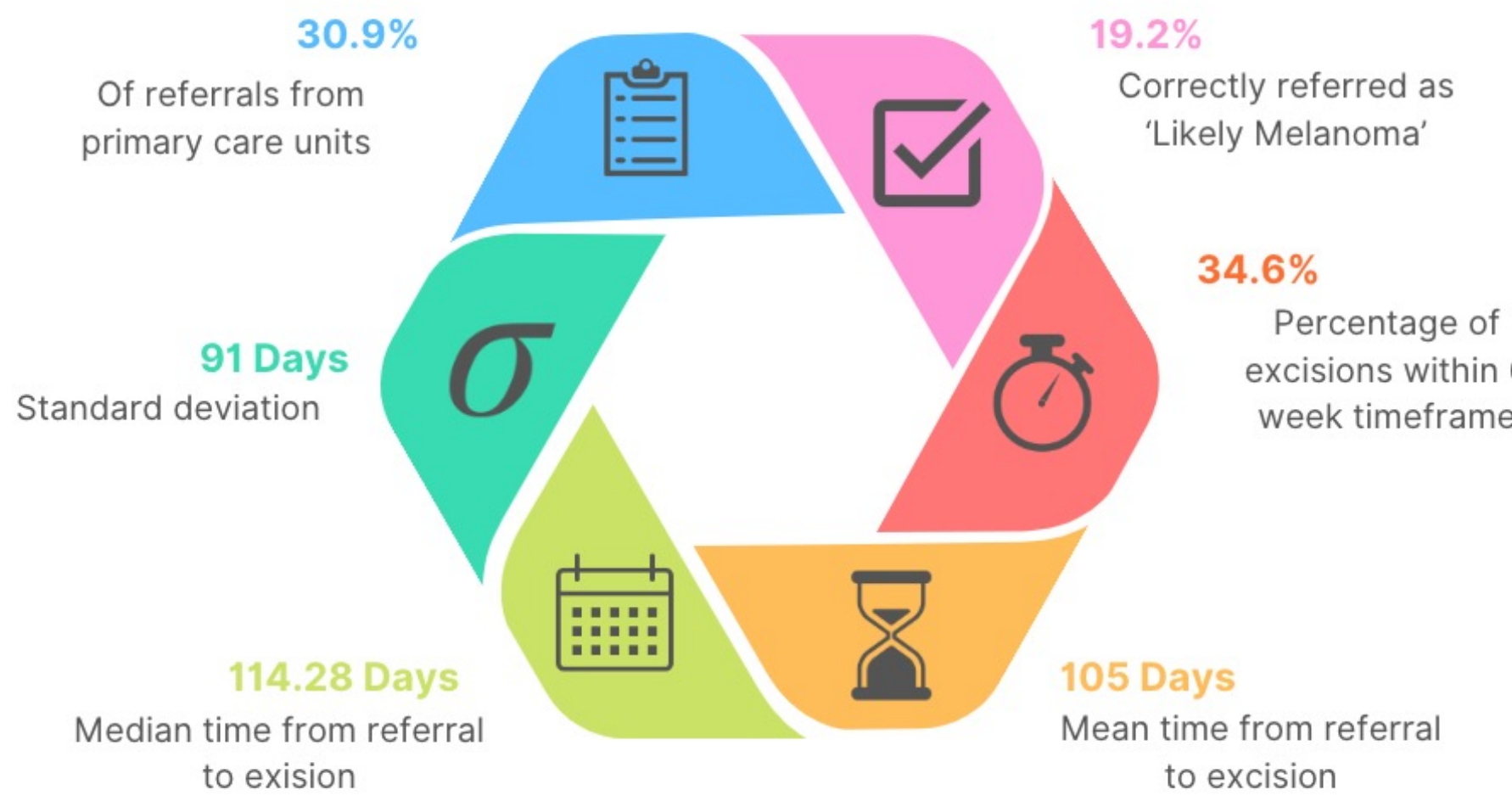


NCCP E-Referrals



These charts highlight the efficacy of the NCCP E-Referral pathway over the standard GP referral pathways across all assessed areas

Standard GP Referrals



CONCLUSIONS

The majority (66.7%) of melanomas referred from primary care were referred using the preferred electronic NCCP referral form. This still falls short of the goal of 100%. We need to work towards increasing this percentage to get closer to our target as findings demonstrate that the utilization of the NCCP electronic pigmented lesion form leads to a significantly reduced interval for excision when compared to alternative pathways.

We have highlighted the findings of this audit to the local GP community at the hospital GP liaison committee, in order to emphasise the importance of using the electronic NCCP referral form for referral of suspicious pigmented lesions.