

GO PUBLIC!



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Gynecology Oncology Referral Guidelines

Gynecology Clinic Location: Valley Specialty Center basement
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This information is designed to aid practitioners in making decisions about appropriate medical care. These guidelines should not be construed as dictating an exclusive course of treatment. Variations in practice may be warranted based on the needs of the individual patient, resources, and limitations unique to the institutional type of practice.

E-CONSULT DISCLAIMER:

E-consults are based on the clinical data available to the reviewing provider, and are furnished without benefit of a comprehensive evaluation or physical examination. All advice and recommendations must be interpreted in light of any clinical issues, or changes in patient status, not available to the reviewing provider. The ongoing management of clinical problems addressed by the e-consult is the responsibility of the referring provider. If you have further questions or would like clarifications regarding e-consult advice, please contact the reviewing provider. If needed, the patient will be scheduled for an in-office consultation.

All URGENT consultations require provider-to-provider communication. If your patient has a medical emergency, please direct them to the closest emergency room for expedited care.

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GESTATIONAL TROPHOBLASTIC DISEASE

- 1. Background**
- 2. Pre-referral evaluation and treatment**
- 3. Indications for referral**

GYNECOLOGIC CANCER OR SUSPICIONS FOR CANCER

- 1. Background**
 - a. Includes these diagnoses:
 - i. Cervical cancer
 - ii. Endometrial cancer
 - iii. Tubal/peritoneal/ovarian cancer
 - iv. Uterine sarcoma
 - v. Vulvar cancer
 - vi. Vaginal cancer
 - vii. Atypical endometrial hyperplasia
- 2. Pre-referral evaluation and treatment**
- 3. Indications for referral**

HEREDITARY CANCER SYNDROMES

- 1. Background**
- 2. Pre-referral evaluation and treatment**
- 3. Indications for referral**
 - a. Women with familial cancer syndromes and high risk for ovarian/breast/uterine cancers with or without confirmation of mutation status.

PRE/NONMALIGNANT CONDITIONS

- 1. Background**
 - a. Includes these conditions
 - i. Pre-invasive cancer of cervix/vagina/vulva
 - ii. Suspicious pelvic masses
 - iii. Severe pelvic adhesive disease due to endometriosis or prior surgeries
 - iv. Fistulas
 - v. Placenta Accreta Spectrum

- 2. Pre-referral evaluation and treatment**
- 3. Indications for referral**

Revisions:

- March 2017, formatting
- Oct 2017, formatting