2 Week Rule Referral Guidelines - Urology

Urgent referral (2 week-rule)
Refer urgently patients:

**Prostate**
- With a hard, irregular prostate typical of a prostate carcinoma. Prostate-specific antigen (PSA) should be measured and the result should accompany the referral. (An urgent referral is not needed if the prostate is simply enlarged and the PSA is in the age-specific reference range).
- With normal prostate, but rising/raised age-specific PSA, with or without lower urinary tract symptoms. (In patients compromised by other co-morbidities, a discussion with the patient or carers and/or a specialist may be more appropriate.)
- With symptoms and high PSA levels.

**Bladder and renal**
- Of any age with painless macroscopic haematuria
- Aged 40 years and older who present with recurrent or persistent urinary tract infection associated with macroscopic haematuria
- With an abdominal mass identified clinically or on imaging that is thought to arise from the urinary tract
- Aged 50 years and older who present with unexplained microscopic haematuria on urine microscopy without infection

**Testicular**
- With a swelling or mass in the body of the testis

**Penile**
- With symptoms or signs of penile cancer. These include progressive ulceration or a mass in the glans or prepuce particularly, but can involve the skin of the penile shaft. (Lumps within the corpora cavernosa can indicate Peyronie's disease, which does not require urgent referral.)

Non-urgent referral
- Refer patients under 50 years of age with microscopic haematuria.
- Patients under 50 years of age with microscopic haematuria with proteinuria or raised serum creatinine should be referred to a renal physician.

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The age-specific cut-off PSA measurements recommended by the Prostate Cancer Risk Management Programme are as follows: age 50-59 ≥ 3.0 ng/ml; aged 60-69 ≥ 4.0 ng/ml; aged 70 and over ≥ 5.0 ng/ml. (Note that there are no age-specific reference ranges for men over 80 years. Nearly all men of this age have at least a focus of cancer in the prostate. Prostate cancer only needs to be diagnosed in this age group if it is likely to need palliative treatment.)