Protocol 5
Referral criteria for individuals with personal or family history of colorectal cancer and/or polyposis

**Individual affected with CRC who**
- Was diagnosed <50 yrs or
- Was diagnosed <60 yrs AND abnormality on IHC or
- Has another Lynch tumour\(^1\) or
- Has ≥3 adenomatous polyps

**Individual affected with colorectal polyps\(^3\) who has**
- Has a FDR with a Lynch tumour\(^1\) both diagnosed at <75 yrs or
- Has two or more relatives\(^2\) with Lynch tumours\(^1\) all diagnosed at <75 yrs or
- Has three or more relatives\(^2\) with Lynch tumours\(^1\) diagnosed any age

**Individual unaffected with CRC or polyps who has\(^5\)**
- FDR diagnosed with CRC <50 yrs or
- FDR affected with polyposis syndrome or
- Both parents diagnosed with CRC <75 yrs or
- Two FDR or FDR and SDR diagnosed with CRC <75 yrs or
- Three relatives\(^2\) diagnosed with CRC or Lynch tumours at any age

\(^1\) Lynch tumours:
**Cancers**
- Colorectal cancer
- Endometrial cancer
- Ovarian cancer
- Pancreatic cancer
- Ureter cancer
**Benign skin tumours**
- Transitional cell cancer of renal pelvis
- Gastric cancer
- Hepatobiliary tract cancer
- Small bowel cancer
- Glioblastoma
- Sebaceous adenoma
- Sebaceous epithelioma
- Keratoacanthoma
- Skin cancers
- Sebaceous carcinoma

2: A relative is a first degree relative (FDR), second degree relative (SDR) or third degree relative (TDR)
3: For polyposis referrals, details of numbers and histology including relevant colonoscopy/histology reports are helpful for evaluation
4: Hyperplastic polyposis syndrome: as per WHO criteria\(^*\).
5: If affected relative(s) are alive it is more appropriate for them to seek referral for genetic assessment in the first instance

\(^*\) See FAQ document for further details: http://www.icr.ac.uk/protocols

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