



Harmonized

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Authorizing Prescriber(s)

Lakeridge Health Oshawa (LHO) Gynecologic Oncology Surgeons

Authorized to Whom

The Gynecology Nurse Navigator working in the Gynecological Diagnostic Assessment Program at Lakeridge Health (LH) at the Durham Regional Cancer Program, who have advanced gynecological oncology knowledge, skill, and judgement.

Co-implementers:

- Medical Radiation Technologists (MRT) and Diagnostic Medical Sonographers (DMS) employed at Lakeridge Health who have the knowledge, skill and judgement to perform diagnostic imaging as selected by the Gynecology Nurse Navigator from the order tables under this directive.
- Phlebotomists employed at LH who have the knowledge, skill and judgement to draw blood samples by venipuncture for laboratory tests as selected by the Gynecological Nurse Navigator from the orders table under this directive.

Patient Description/Population

Outpatients 16 years of age and older, referred to the Gynecology Diagnostic Assessment Program, who have biopsy proven gynecological cancer or suspicious findings.

Order and/or Procedure

The order and/or procedures are not presented in sequential order. Any one or combination may be performed by the Gynecological Nurse Navigator, for any new patient scheduled for an initial consult in the Gynecological Diagnostic Assessment Program. All abnormal results will be reported to the Most Responsible Practitioner (MRP).

- Laboratory tests as per the [Order Table Form](#)
- Diagnostic imaging as per the [Order Table Form](#)
- Trans-vaginal ultrasound, for patients with a confirmed grade 1 endometrial cancer without a trans-vaginal ultrasound within the last 3 months
- Computed Tomography Scan (CT) with contrast of the chest, abdomen and pelvis for patients with a suspected or confirmed cervix cancer, endometrial cancer (excluding grade 1 endometrial), or ovarian cancer

- Magnetic Resonance Imaging (MRI) of the pelvis for patients with a confirmed cervix cancer
- Pathology review request for specimen(s)
 - Required for all external pathology specimens not initially examined by a gynecology specialized pathologist

Indications to the Implementation of the Directive

Any new patient scheduled for an initial consult in the Gynecological Diagnostic Assessment Program with indications as listed in the [Order Table Form](#) and:

- Patient is accepted into the Gynecological Diagnostic Assessment Program
- Patient with biopsy proven gynecological cancers or suspicious findings
- Patient who requires cancer staging for gynecological cancers

Contraindications to the Implementation of the Directive

The directive must not be implemented in any of the following circumstances:

- Patient is under the age of 16
- Patient or Substitute Decision Maker (SDM) refuses diagnostic investigation
- Patient who have had the diagnostic test(s) completed within 2 months of a visit
- For CT: See [Order Table Form](#) for modality specific investigations
- For MRI: See [Order Table form](#) for modality specific investigations

Consent

The Gynecological Nurse Navigator implementing the medical directive must obtain consent, by telephone or in person, and document that consent has been obtained. If the patient or SDM refuses to provide consent for treatment, contact the MRP or delegate immediately to determine plan of care.

Documentation Requirements

In addition to standard documentation practices, the Gynecological Nurse Navigator implementing this directive must document the following in the order section of the person's health record:

- The name of this medical directive
- The procedure(s)/treatment(s) implemented
- The name of the implementer
- The date and time
- Legible signature of implementer including credentials/electronic signature
- Co-implementers will document in the patient's health record and as per standard documentation practices

Review/Evaluation Process

The Medical Directive will be reviewed by the Gynecological Program Committee every 2 years.

References

- Adult Renal Protection for Intravascular Contrast Administration Diagnostic Imaging – Policy and Procedures.* Lakeridge Health, 2018
- Canadian Association of Nurses in Oncology: Practice Standards and Competencies.
<http://www.cano-acio.ca/conep>
- Cervical Cancer Diagnosis Pathway Map, Disease Pathway Management, 2020.
<https://www.cancercare.on.ca>
- Cervical Cancer Treatment Pathway Map, Disease Pathway Management, 2020.
<https://www.cancercare.on.ca>
- College of Nurses of Ontario, (2020). Practice Guideline: Directives.
- College of Physicians and Surgeons of Ontario. (2021). Delegation of Controlled Acts Policy #4-03. <http://www.cpso.on.ca/Policies/delegation.htm>
- Endometrial Cancer Diagnosis Pathway Map, Disease Pathway Management, 2018.
<https://www.cancercare.on.ca>
- Endometrial Cancer Treatment & Follow-Up Pathway Map, Disease Pathway Management, 2018. <https://www.cancercare.on.ca>
- Lakeridge Health Laboratory Paradigm Documents, 2021.
<http://thewave.corp.lakeridgehealth.on.ca/pnp/LabMed/Forms>
- Lakeridge Health MRI Safety – Metallic Implants and Foreign Bodies- Policy and Procedures (2017).
- Ovarian Cancer Diagnosis Pathway Map, Version, 2018. <https://www.cancercare.on.ca>
- Regulated Health Professions Act, 1991, Stat. Of Ontario. 1991, Ch.18 (amended 2021).



Gynecological Diagnostic Assessment Program Investigations – Medical Directive

DRCC Quality Council Approved: 21OCT2021

This table must **not** be used independently apart from the Medical Directive

Order Table Form

Order	Indication	Contraindication
Diagnostics		
CT with contrast of the: <ul style="list-style-type: none"> • chest, • abdomen, and • pelvis 	Any new patient scheduled for an initial consult for a suspected or confirmed; <ul style="list-style-type: none"> • cervix cancer • endometrial cancer (excluding grade 1 endometrial) • ovarian cancer 	<ul style="list-style-type: none"> • Patients with estimated Glomerular Filtration Rate (eGFR) less than or equal to 45 mL/min • Grade 1 endometrial cancer
Magnetic Resonance Imaging (MRI) of the pelvis	Any new patient scheduled for an initial consult for a confirmed cervix cancer	<ul style="list-style-type: none"> • Any device that is electrically, magnetically or mechanically activated • Aneurysm clips/coils on the 3 Tesla (3T) magnets • Orbital foreign body • Suspected cervix cancer patients require physician consult
Trans-vaginal ultrasound	<ul style="list-style-type: none"> • Any new patient scheduled for an initial consult for a confirmed grade 1 endometrial cancer without a trans-vaginal ultrasound within the last 3 months 	<ul style="list-style-type: none"> • Patient does not have grade 1 endometrial cancer • Patient had a trans-vaginal ultrasound within the last 3 months



Order	Indication	Contraindication
Laboratory Procedures		
CA 125, CEA, CBC, electrolytes, creatinine with eGFR, fasting glucose, uric acid, total protein, albumin, calcium, phosphate, magnesium, total bilirubin, ALP, AST, ALT, LD.	Any new patient scheduled for an initial consult with: <ul style="list-style-type: none"> suspicious or confirmed pelvis mass 	
CA 125, CBC, electrolytes, creatinine with eGFR, A1C, albumin, calcium, phosphate, magnesium, total bilirubin, ALP, AST, ALT.	Any new patient scheduled for an initial consult with: <ul style="list-style-type: none"> any endometrial tumour 	
CBC, electrolytes, creatinine with eGFR, albumin, calcium, phosphate, magnesium, total bilirubin, ALP, AST, ALT.	Any new patient scheduled for an initial consult for suspicious or confirmed: <ul style="list-style-type: none"> Cervix cancer Vaginal cancer Vulvar cancer 	Patient does not have suspicious or confirmed: <ul style="list-style-type: none"> Cervix cancer Vaginal cancer Vulvar cancer
INR, APTT	Any new patient scheduled for an initial consult for suspicious or confirmed gynecological cancer requiring: <ul style="list-style-type: none"> biopsy neo adjuvant systemic treatment 	<ul style="list-style-type: none"> Patient does not require biopsy Neo adjuvant systemic treatment not required
AFP	Any new patient 16 to 35 years of age scheduled for an initial consult, with a suspicious or confirmed pelvic mass	<ul style="list-style-type: none"> Patient is under 16 years of age or over 35 years of age Patient and/or SDM has not consented
Serum bhcg	Any new patient scheduled for an initial consult that is 16 to 35 years of age with: <ul style="list-style-type: none"> suspicious or confirmed pelvic mass suspected or confirmed hydatidiform mole 	<ul style="list-style-type: none"> Patient is under 16 years of age or over 35 years of age Patient and/or SDM has not consented Patient does not have suspicion of hydatidiform mole