

Locally Advanced and Recurrent Rectal Cancer

Clinical Algorithm for

1) PRC-bTME (*Primary Rectal Cancer beyond total mesorectal plane*) T4

2) Locally RRC (*Locally Recurrent Rectal Cancer*)

Suspected Locally Advanced Or Recurrent Rectal Cancer:

Imaging assessment:

- 1) High resolution MRI
- 2) CT Thorax, Abdomen, Pelvis

Referral to Specialist Complex Pelvic MDT at Lancashire Teaching Hospitals

Email / fax / telephone contact
– **DECISION AND PLAN** same day communication

Not Resectable

- 1) Clinic Discussion patient family
- 2) Palliative Care

Potentially Resectable

- 1) Clinic Discussion with patient / family
- 2) EUA – joint specialty
- 3) Anaesthetic / CPEX
- 4) PET-CT
- 5) MULTIVISCERAL – RESECTION WITH RECONSTRUCTION

Specialist input from Plastics, Neurosurgery and Vascular as necessary

Specialist MDT, neo adjuvant treatment

Contact details for referrals:

Mr Peter Mitchell (Consultant Colorectal Surgeon)

Peter.Mitchell@lthtr.nhs.uk

Steven Nicholas (MDT Co-ordinator Lancashire Teaching Hospitals NHS Trust)

Tel: 01772 52 2209

Email: Steven.Nicholas@lthtr.nhs.uk