

Treatment pathway for sarcoma of bone (curative intent)

Aims: Distribution of the agreed pathway for curative treatment of patients with sarcoma of bone by the Oxford Sarcoma Service.

Issued by: Oxford Sarcoma Advisory Group (OSAG)

As agreed by OSAG:

- Core members
- Trust Sarcoma Clinical Lead
- Oxford Sarcoma MDT

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Available at: [Oxford Sarcoma Advisory Group - Oxford Sarcoma Service - Oxford University Hospitals](#)

Treatment pathway for sarcoma of bone (curative intent)

Introduction

- This pathway refers to the care of patients within the Oxford Sarcoma Network with sarcomas arising in or involving bone that are being treated with curative intent.
- The aim of the pathway is to ensure patients receive appropriate and timely care from teams with the appropriate diagnostic and treatment expertise.

Principles of the service

- All people with a suspected or confirmed diagnosis of sarcoma must be referred to a Specialist Sarcoma Centre for multidisciplinary team (MDT) discussion.
- The principal role of a Sarcoma MDT is to determine a care plan for all people with bone and soft tissue sarcoma and to be responsible for its delivery either by members based at the Specialist Sarcoma Centre or by designated practitioners working at Local Sarcoma Units or by Children / Teenage and Young Adult Principal Treatment Centres following care pathways agreed by the Sarcoma Advisory Group.

- Pathology for all sarcomas must be reviewed by a Specialist Sarcoma Pathologist for diagnostic confirmation and undertaking any appropriate molecular analysis and genomic testing.
- Sarcoma services must be structured and managed to reduce the number of unplanned excisions or excisions undertaken outside a specialist centre.
- All resections of sarcomas are undertaken by surgeons who are core or designated members of the Sarcoma MDT.

Take home messages

- The default position is that patients with suspected or confirmed primary bone or soft tissue tumours should be referred as soon as possible to the Nuffield Orthopaedic Centre for diagnosis and surgical treatment as soon as possible.
- All patients with confirmed bone or soft tissue must be discussed in the Oxford Sarcoma Service MDT to plan appropriate multidisciplinary care. Discussion should take place before treatment unless clinical urgency means this is not possible.
- In clinically urgent cases, the treating clinician should discuss the proposed intervention with other appropriate members of the MDT if possible.

Points of contact

General referral information

[Oxford Sarcoma Service Referrals - Oxford Sarcoma Service - Oxford University Hospitals](#)

Email

sarcoma.referrals@ouh.nhs.uk

Sarcoma Office Telephone

01865 738061

Emergent / clinically urgent cases

For direct discussion with Nuffield Orthopaedic Centre Registrar / Fellow on call available through hospital switchboard:

0300 304 7777

Pathways / Guidance

- This pathway applies to bone tumours arising in the limb and trunk, in all ages.
- Patients aged **16-24 years** will also be referred to the **Teenage and Young Adult Service and MDT**.
- Patients aged **under 18 years** will also be discussed at the **Paediatric Solid Tumour MDT**.

Oxford Sarcoma Service MDT

- Diagnosis
- Treatment planning
- Staging

Decision made for curative intent

First treatment

- Surgery at OUH
- Neo-adjuvant Chemotherapy at Treatment Centre or Shared Care*
- Neo-adjuvant Radiotherapy at Treatment Centre or Shared Care*

MDT reviews by OUH

- Complex surgical planning after neo-adjuvant treatment
- Adjuvant treatment planning

+ / - Adjuvant treatment (surgery, chemotherapy or radiotherapy)

Rehabilitation

Acute ward: discharge planning, refer to community therapy as appropriate

Surveillance according to Oxford Sarcoma Service protocol (see website)

To include baseline MR scan at three months and CT chest / full body CT PET)

*See details of [designated practitioners](http://ouh.nhs.uk/oxfordsarcomaservice/team/#practitioners) (ouh.nhs.uk/oxfordsarcomaservice/team/#practitioners)