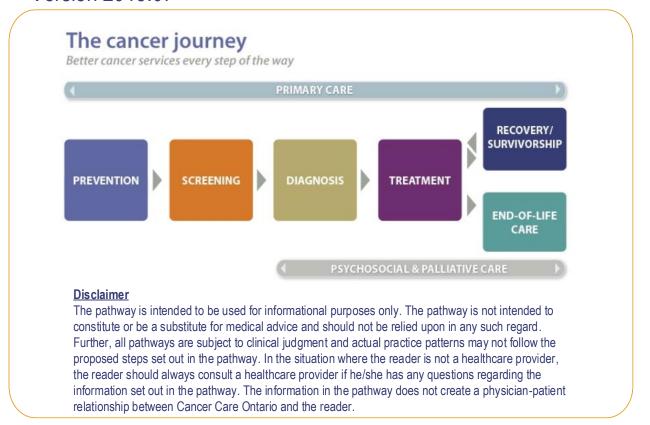


Soft Tissue Sarcoma Diagnosis Pathway

Sarcoma Disease Pathway Management Working Group Version 2015.07





Pathway Considerations

- It is presumed that the patient is assessed clinically throughout the entire pathway.
- It is presumed that at each step along the pathway, the risks and benefits of screening are discussed with the patient.
- Primary care providers play an important role in the cancer journey and should be informed of relevant tests and consultations. Ongoing care with a primary care provider is assumed to be part of the pathway. For patients who do not have a primary care provider, Health Care Connect, is a government resource that helps patients find a doctor or nurse practitioner.
- Throughout the pathway, a shared decision-making model should be implemented to enable and encourage patients to play an active role in the management of their care. For more information see Person-Centered Care Guideline and EBS #19-2 Provider-Patient Communication*
- Hyperlinks are used throughout the pathway to provide information about relevant CCO tools, resources and guidance documents.
- The term 'health care provider', used throughout the pathway, includes primary care providers and specialists, nurse practitioners, and emergency physicians.
- The family physician should be informed of all tests and consultations usual ongoing care with the family physician is assumed to be part of the pathway.

Target Population

This pathway has been developed for the use of primary care providers and other health care providers for patients presenting with suspicious masses that may be a soft tissue sarcoma.

| Pathway Legend | Shape Guide |
|---|-----------------------------------|
| Colour Guide | Intervention |
| Primary Care | Decision or assessment point |
| Supportive and End of Life Care | Patient (disease) characteristics |
| Pathology | Consultation with specialist |
| Surgery | Exit pathway |
| Radiation Oncology | Or Off-page reference |
| Medical Oncology | Patient path |
| Radiology | R Referral |
| Multidisciplinary Cancer Conference (MCC) | W Wait time indicator time point |
| | Line Guide |
| | Required |
| | Possible |

Pathway Disclaimer

This pathway is a resource that provides an overview of the screening and the presentation and clinical work-up of a cancer diagnosis that an individual in the Ontario cancer system may receive.

The pathway is intended to be used for informational purposes only. The pathway is not intended to constitute or be a substitute for medical advice and should not be relied upon in any such regard. Further, all pathways are subject to clinical judgment and actual practice patterns may not follow the proposed steps set out in the pathway. In the situation where the reader is not a healthcare provider, the reader should always consult a healthcare provider if he/she has any questions regarding the information set out in the pathway. The information in the pathway does not create a physician-patient relationship between Cancer Care Ontario and the reader.

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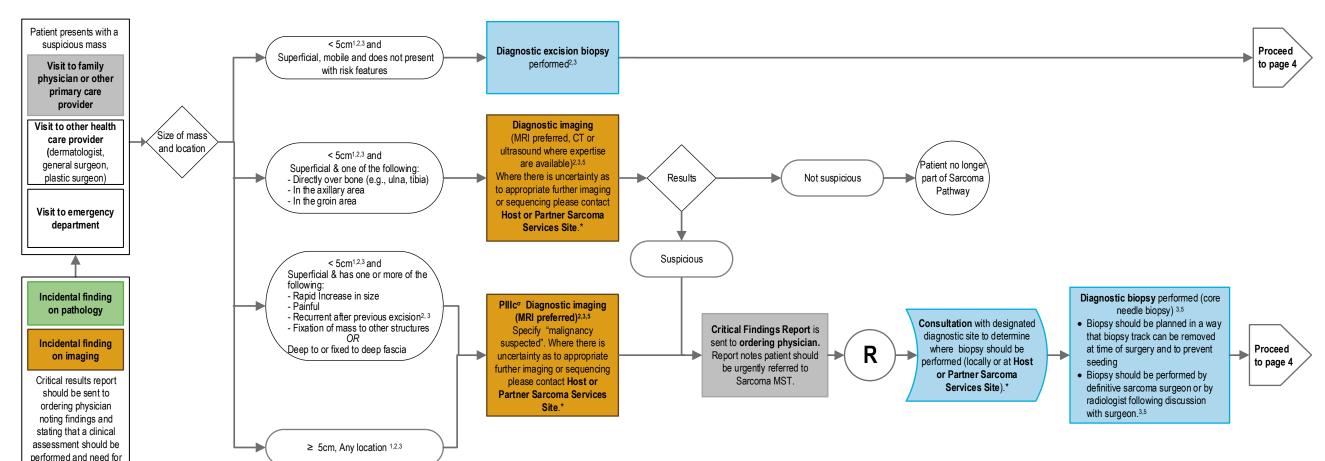
This pathway may not reflect all the available scientific research and is not intended as an exhaustive resource. Cancer Care Ontario and its content providers assume no responsibility for omissions or incomplete information in this pathway. It is possible that other relevant scientific findings may have been reported since completion of this pathway. This pathway may be superseded by an updated pathway on the same topic.

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additional imaging and/ or biopsy.

If you have any concern regarding a lesion suspected to be a sarcoma, please immediately contact a Multidisciplinary Sarcoma Team (MST) at a Host Site*[†]



Risk Factors

The majority of patients presenting with soft tissue sarcoma do not have identifiable risk factors.

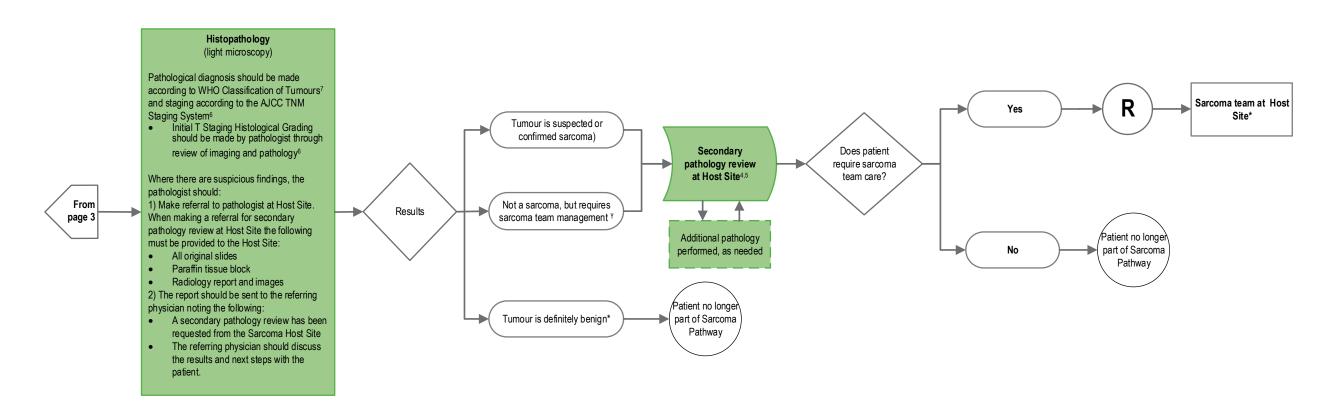
- * Disclaimer: For any cases, where the lesion is suspected to be a sarcoma, early consultation with a sarcoma specialist is advised. Contact information for Host and Partner Sarcoma Service Sites can be found at www.cancercare.on.ca/sarcomacare
- Thany sarcoma-like conditions require sarcoma team management. These include desmoid tumours, atypical lipomatous tumour, fibromatosis, any spindle cell or myxoid neoplasm, and others. For a full list of sarcomas and sarcoma-like conditions, please refer to Appendix A or go to www.cancercare.on.ca/sarcomacare.
- ^o Further information on imaging wait time targets and prioritization can be found at www.health.gov.on.ca/en/pro/programs/waittimes/surgery/target.aspx.

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- 1) Bannasch, H., Elsenhrdt, S.U., Grosu, A., Henz, J., Momeni, A. and Stark, G.U. (2011) The diagnosis and treatment of soft tissue sarcomas of the limbs. Deutsches Arzteblatt International 2011; 108(3): 32–8.
- 2) Grimer, R.J., Mottard, S., and Briggs, T.R. (2010) Earlier diagnosis of bone and soft tissue sarcoma. The Journal of Bone and Joint Surgery.
- 3) Grimer, R., Judson, I., Peake, D. and Seddon, B. (2010) Guidelines for the management of soft tissue sarcomas. Sarcoma 2010: 506182.
- 4) Sarcoma Steering Committee and Cancer Care Ontario (2014). Provincial Sarcoma Services Plan. Available at www.cancercare.on.ca/sarcomacare.
- 5) The European Sarcoma Network Working Group (2012). Soft tissue and visceral sarcoma: ESMO Clinical Practice Guidelines for diagnosis, treatment and follow-up. Annals of Oncology; 23 (Supplement 7): vii92-vii99.
- 6) National Comprehensive Cancer Network. NCCN Clinical Practice Guidelines in Oncology Soft Tissue Sarcoma. Version 2.2014
- 7) Fletcher, C.D.M, Unni, K.K and Mertens, F. (2002) World Health Organization Classification of Tumours Pathology and genetics of tumours of the soft tissue and bone. *International Agency for Research on Cancer*.