

## BARD: non-lymphoma patient referral form

**Purpose:** This form is to aid the referral of **non-lymphoma patients** who have received radiotherapy involving breast tissue under age 36 for inclusion in the Breast screening After Radiotherapy Dataset (BARD). This is to facilitate breast screening for these women in line with national very high-risk guidance. This form should not be used for women who have been treated for breast cancer.

**Completion:** Once this form has been completed with section 3 signed by a **Consultant Clinical Oncologist**, please return to BARD at [chn-tr.BARD@nhs.net](mailto:chn-tr.BARD@nhs.net) Thank you.

### 1. Patient details

Name: .....

NHS number: .....

DOB: .....

Address: .....

### 2. Medical history

Cancer diagnosis for which radiotherapy received (including date): .....

.....

Site of RT field: .....

RT dose: .....

RT fractions: .....

RT start date: .....

RT finish date: .....

### 3. Confirmation of eligibility

I confirm that this patient received radiotherapy to breast tissue under age 36 and is considered to be at increased risk of breast cancer.

Signed (Consultant Clinical Oncologist):

Print name:

Radiotherapy Centre:

Date: