

Diagnostic and Therapeutic Services
LABORATORY MEDICINE DIRECTORATE

Referral Guidelines for Lymphadenopathy

**The following should be referred urgently for outpatient assessment:
Check FBC + film, biochemical profile, calcium and LDH. Consider
glandular fever in patients < 25yrs.**

- Lymphadenopathy >1cm persisting for >6 weeks with no obvious precipitant
- Lymphadenopathy for <6 weeks in association with:
 - B symptoms – fevers/sweats/weight loss
 - Hepatic or splenic enlargement
 - Rapid nodal enlargement
 - Disseminated/generalised nodal enlargement
 - Anaemia/leucopenia/thrombocytopenia
 - Hypercalcaemia

Solitary neck nodes should generally be referred to ENT.