Investigations likely for the MUO/CUP patient

Depending on clinical appropriateness the following tests are likely for the presenting MUO/CUP patient:

• Comprehensive history and physical examination including breast, nodal areas, skin, genital, rectal and pelvic examination

• Full blood count; urea, electrolytes and creatinine; liver function tests; calcium; urinalysis; lactate dehydrogenase

• Computed Tomography (CT) scan of the chest, abdomen and pelvis

• Myeloma screen (when there are isolated or multiple lytic bone lesions)

• Symptom-directed endoscopy

• Prostate-specific antigen (PSA) in men

• CA125 in women with presentations compatible with ovarian cancer (including those with inguinal node, chest, pleural, peritoneal or retroperitoneal presentations).

• AFP and HCG in patients with presentations compatible with germ-cell tumours (particularly those with mediastinal and/or retroperitoneal masses and in young men) and in midline nodal disease.

• AFP in patients with presentations compatible with hepatocellular cancer.

• Testicular ultrasound in men with presentations compatible with germ-cell tumours

• Biopsy and standard histological examination, with immunohistochemistry where necessary, to distinguish carcinoma from other malignant diagnoses.