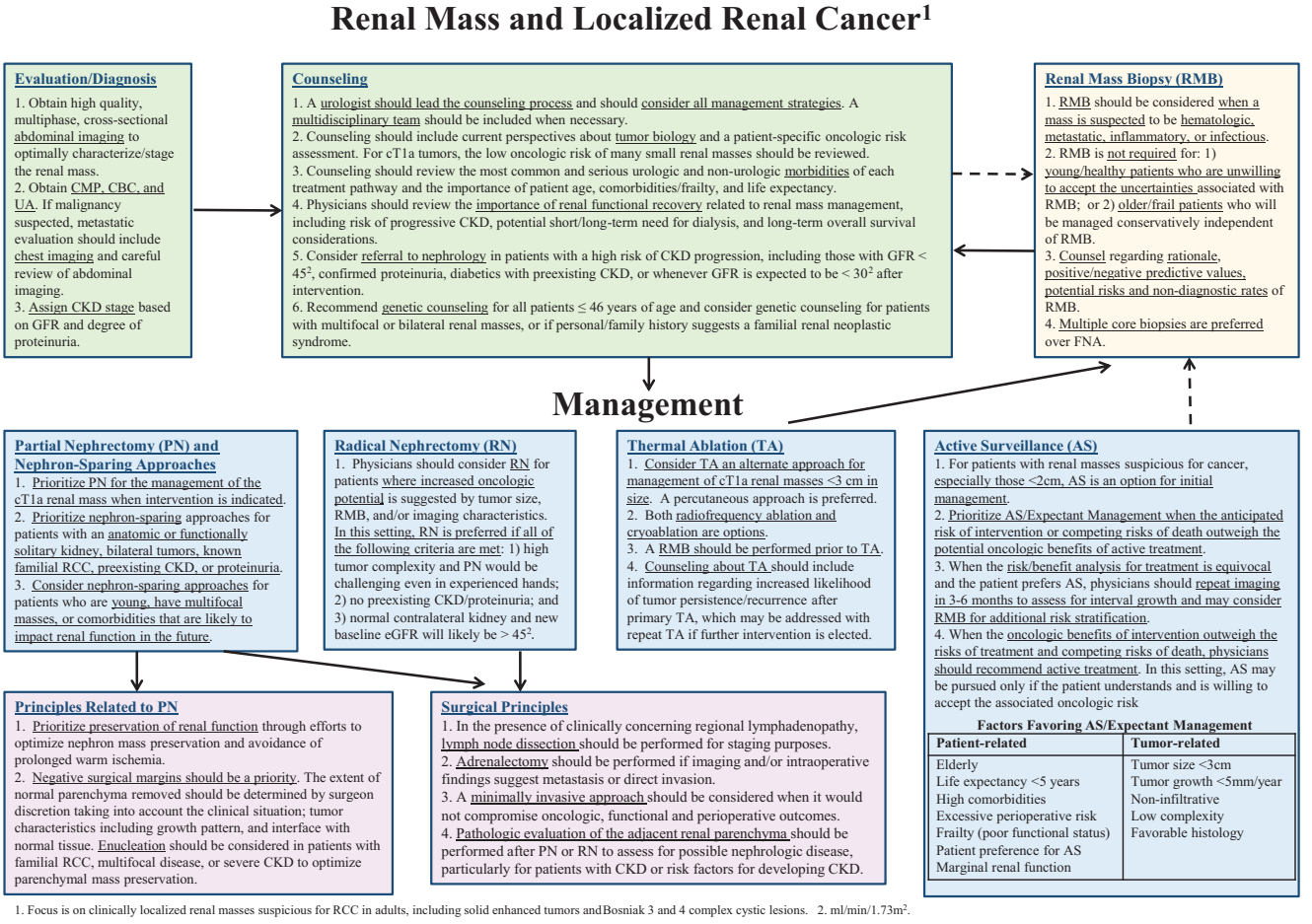

Figure. Renal mass and localized renal cancer treatment algorithm

common site of metastatic disease and are evaluated with either chest radiography or CT scan based on risk of metastases.[7]

3. For patients with a solid or complex cystic renal mass, physicians should assign CKD stage based on eGFR and degree of proteinuria. (Expert Opinion)

Renal function and its prognostic implications can be assessed with serum creatinine (to calculate an estimated glomerular filtration rate) and urinalysis to screen for proteinuria (supplementary fig. 1, http://jurology.com/). Protein on urine dipstick should trigger quantitative measurement (protein or albumin-to-creatinine ratio).[13,14] An assessment of eGFR and proteinuria has important implications regarding potential management options and involvement of a nephrologist (see guideline statements 8, 14-17, 19).

Counseling

4. For patients with a solid or Bosniak 3/4 complex cystic renal mass, a urologist should lead the counseling process and should consider all management strategies. A multidisciplinary team should be included when necessary. (Expert Opinion)

Given the complexities underlying the natural history and management of localized renal masses, a urologist is best suited to lead the evaluation and counseling of these patients.[2] Additional involvement by other specialists may be considered based on specific factors.

5. Physicians should provide counseling that includes current perspectives about tumor biology and a patient-specific risk assessment inclusive of sex, tumor size/complexity, histology (when obtained) and imaging characteristics. For cT1a tumors, the low oncologic risk of many small renal masses should be reviewed. (Clinical Principle)

A number of important parameters can be used to advise patients about their risk of malignancy and death from a localized renal mass, and should be discussed as it could impact individualized decision-making.[2] Overall, 20-25% of T1a tumors are benign, and only about 20% are high grade or locally