**Patients for Pancreatic MDT discussion**

All newly diagnosed pancreatic cysts should be reviewed locally by a GI radiologist. Referral to the central MDT if the following criteria apply:

* Age **≤ 50** with cyst measuring over 1cm
* Age **≤ 80** with cyst **≥3cm**
* Mural nodule
* Thickened/enhancing cyst wall
* Growth rate **≥5mm**/year or **≥10mm** over 2 years between surveillance scans
* Main pancreatic duct **≥5mm** or abrupt calibre change in duct
* Jaundice
* New onset diabetes
* Acute pancreatitis caused by IPMN

If these criteria do not apply, the patient does not need central MDT review, and can be followed up locally according to the cyst follow-up pathway:

* Initial MR pancreas at 1 year from initial scan, then 2 yearly MR pancreas until unfit for surgery or develops one of the above features which would trigger MDT review
* All scans should be reviewed by local GI radiologist
* Patients with significant co-morbidity who would not be a candidate for surgery should not enter cyst surveillance.
* Incidental simple pancreatic cysts detected in patients aged **≥80** years old without any of the above features do not require further input or follow-up unless the patient is exceptionally fit and understands the implications of and is willing to undergo surveillance.