Bring List

Bring to all consults:
- Trusted friend / relative
- Referral (primary care doc)
- Insurance cards
- Authorization (insurance)
- Contacts: emergency, other docs, local pharmacy

Provide to doctor | nurse:
- Diagnosis, treatments and medical history (concise)
- List of Medications, Supplements, and Allergies
- List of Symptoms / side effects

Written questions (such as):
- Treatment objective?
- Discuss all FDA / NCCN therapies
- Rationale for recommended?
- Second opinion? | Clinical trials?

First visit / second opinion:
- Pathology report & slides
- Radiology reports / film

Ask about:
- Care managers
- Mental health professionals
- Pain specialists
- Physical therapists
- Nutritional experts
- Social workers / financial help
- Support groups

Request:
- Scripts for meds / tests / immunizations
- Copy of test results
- Next consult?

www.lymphomation.org/bringlist.pdf

To do

Notes & Observations

Checklist for Reporting of Symptoms or Side Effects

Describe primary

_____

- **General** (applies to all)
  - Started _____
    With new / end of medications
  - Changes with body position
  - Duration _____
  - Comes and goes
  - Random / predictable
  - Severity (1 to 10 highest)
- **B-symptoms (systemic)**
  - Drenching night sweats
  - Unexplained weight loss
  - Fever
    - Temperature | Range
- **Bleeding or bruising** (unexplained)
- **Bowel**
  - Bloating | Constipation | Cramps | Diarrhea
- **Breathing**
  - Wheezing / Pain / Coughing
    Shortness of breath
- **Fatigue**
  - Low performance | Sleep quality
  - Feel stressed or depressed?
- **Lesions**
  - Size change | New | Painful | Abrupt
- **Nausea or bloating**
- **Pain** (bone / muscle / other)
  - Aches | Burning | Dull | Itching | Hot
    Radiating | Sharp | Throbbing
- **Skin**
  - Persistent itch | Boils | Rash
- **Urinary**
  - Difficulty | Painful | Frequency
    Color change
- **Emergency (call 911)**
  - Breathing difficulty, or
    acute allergic reaction suspected?
  - Chest pain, pressure, tightening
  - New onset of severe pain
  - Vision: loss / partial loss of, blurred
  - Numbness / tingling in arms / legs
  - Sudden confusion, disorientation,
    memory loss
  - High fever (101 or higher)
    particularly if immune suppressed

Ask your doctor for guidance on what constitutes a medical emergency and what actions you should take.

Notes & Observations

To do