

BREAST CANCER SURVIVORSHIP CARE VISIT CHECKLIST

Here is a checklist to help you talk with your doctor. You should ask about the treatments you had, your cancer type and their possible effects as well as any other issues you may be experiencing. These issues may not all be relevant to you. If you are unsure of what treatments you had or what symptoms to watch out for, ask your doctor.

When you talk with your doctor, you should discuss:

- Your survivorship care plan
- Care coordination and communication with cancer treatment team and primary care provider
- Screening or watching for recurrence or new cancers
- Looking out for and managing physical, emotional and social effects
- Getting referrals to medical rehabilitation care (e.g., physical or occupational therapy), mental health care or palliative care (symptom management) as needed
- Information about healthy behaviors

Some of these issues affect many patients, some affect very few. The icons below correspond to prevalence, or how many patients report having each of the symptoms:



High: 50% or more of patients report experiencing this symptom



Mid-High: 21-50% or more of patients report experiencing this symptom



Mid: 21-49% of patients report experiencing this symptom



Low-High: A wide range of patients (from 20% or fewer to 50% or more) report experiencing this symptom



Low-Mid: 20%-49% of patients report experiencing this symptom



Low: 20% or fewer patients report experiencing this symptom



Unknown: Data not available

Fatigue

Fatigue*



Musculoskeletal Health

Numbness of upper arm



Musculoskeletal pain



<input type="checkbox"/> Decreased/limited range of motion in upper arm	
<input type="checkbox"/> Myalgias (muscle pain)	
<input type="checkbox"/> Arthralgias (joint pain)	
<input type="checkbox"/> Weakness upper arm	
<input type="checkbox"/> Axillary web syndrome ("cording" in the skin of the inner arm with sensations of pain and tightness that appear as a web or a corded rope)	
<input type="checkbox"/> Difficulties with shoulder: adhesive capsulitis ("frozen shoulder" with stiffness and pain in the shoulder joint) on same side of body as breast cancer	
<input type="checkbox"/> Difficulties with shoulder: rotator cuff injury on same side of body as breast cancer	

Bone Health

<input type="checkbox"/> Bone loss (if premenopausal)*	
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Cognitive Function

<input type="checkbox"/> During treatment: problems with concentration, executive function and memory	
<input type="checkbox"/> After treatment: problems with concentration, executive function and memory	








Early Menopause/Hot Flashes

<input type="checkbox"/> Hot flashes	
<input type="checkbox"/> Changes in menstruation (your period)	
<input type="checkbox"/> Chemotherapy-induced early menopause	






Body Image

<input type="checkbox"/> Body image/appearance concerns (e.g., breast asymmetry or loss of breast(s), hair loss, sexual dysfunction/chemotherapy-related early menopause, obesity/weight gain, poor cosmetic outcome, scarring and/or lymphedema after surgery, skin changes from radiation including skin discoloration or telangiectasia)	
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Sexual Health

<input type="checkbox"/> Change in or decreased sexual desire	
<input type="checkbox"/> Arousal or lubrication concerns	
<input type="checkbox"/> Dyspareunia (difficult or painful sexual intercourse)	
<input type="checkbox"/> Orgasm concerns	
<input type="checkbox"/> Change in sexual function and/or desire	
<input type="checkbox"/> Loss of sexual sensitivity of the skin	
<input type="checkbox"/> Vaginal dryness	




Pain and Neuropathy

<input type="checkbox"/> Chronic pain	
<input type="checkbox"/> Neuropathy (weakness, numbness, pain, often in hands/feet)	
<input type="checkbox"/> Lack of skin sensitivity	
<input type="checkbox"/> Numbness of upper arm	
<input type="checkbox"/> Skin sensitivity/pain	

Lymphedema

<input type="checkbox"/> Lymphedema (swelling in an arm)	
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Distress, Depression and Anxiety

<input type="checkbox"/> Worry, anxiety	
<input type="checkbox"/> Depression	
<input type="checkbox"/> Distress (unpleasant experience of psychological, social, and/or spiritual nature)	

Emotional and Social Health

<input type="checkbox"/> Challenges with self-image	?
<input type="checkbox"/> End-of-life concerns: death and dying	?
<input type="checkbox"/> Fear of pain	?
<input type="checkbox"/> Fear of recurrence	?
<input type="checkbox"/> Mood changes	?
<input type="checkbox"/> Relationship and other social role difficulties	?
<input type="checkbox"/> Return to work concerns and financial challenges	?

Heart Health

<input type="checkbox"/> Cholesterol elevation	?
<input type="checkbox"/> Increased risk of cardiovascular disease	?
<input type="checkbox"/> Increased triglycerides	?

Fertility

<input type="checkbox"/> Ovarian failure with or without menopausal symptoms	?
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Lung Health

<input type="checkbox"/> Shortness of breath (lung pneumonitis or fibrosis)	?
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Oral Health

<input type="checkbox"/> Oral health (mouth) issues	?
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Other Effects

<input type="checkbox"/> Blood clots	?
<input type="checkbox"/> Leukemia and myelodysplastic syndrome	?
<input type="checkbox"/> Stroke	?

*Prevalence is listed for cancer survivors in general; not just breast cancer survivors

View the American Cancer Society/American Society of Clinical Oncology Breast Cancer Survivorship Care Guideline at: <http://bit.ly/BrCaCare>