

ESMO Checklist: Pancreatic Cancer Patient Related Treatment Workflow

Tick the box and insert the date as you have dealt with every task listed below, as appropriate. In case you use the template, you can also insert and save data directly on the PDF file.

PATIENT'S PERSONAL DATA			
Last Name:		First Name:	
Date of birth: __/__/__		Gender:	
DATE OF REFERRAL/1ST CONSULTATION: __/__/__			
__/__/__ MEDICAL HISTORY AND RISK FACTORS			
Past personal medical history and vascular risk factors:			
Past surgical history:			
Concurrent medication:			
Allergies:			
Smoking history: __pack/y from age__ to age__			
Alcohol consumption:			
Normal weight:		Height:	BMI:
__/__/__ PRESENT MEDICAL CONDITIONS			
Main symptoms:			
Weight loss:			
ECOG Performance Status:			
Nutritional Status:			
Other relevant clinical conditions:			
__/__/__ DIAGNOSIS AND CLINICAL STAGING			
__/__/__ MDCT	__/__/__ MRI	__/__/__ EUS	__/__/__ ERCP
__/__/__ TNM stage and grade			
Classification – disease extension			
Resectable		Borderline non resectable	
Borderline resectable		Metastatic	
__/__/__ HISTOLOGICAL ANALYSIS			
Core biopsy of primary tumour or metastatic site		Ductal adenocarcinoma	Non-ductal phenotype
Tissue material available/stored for future molecular analyses		YES	NO
BRCA status (if available)			
__/__/__ LAB TESTS			
FBC	Liver and Renal Function	CA 9-19 serum measurement	