

Your survivorship passport

Name / initials:

1 / 4 Your verified treatment summary

Ask the oncology team to check this summary. Attach official reports or the existing caregiver-toolkit treatment-history record. You do not need to copy every result here.

Type in a form-capable PDF reader, save a copy, then close and reopen it to check. Completed files are not encrypted; keep them securely. Text boxes can scroll: for long answers, keep the full text in your own document labelled with this worksheet and question, and enter "See attached notes" here. Print your completed copy from the reader and check print preview. If your language does not display correctly, use a document that supports it, or print and write by hand.

Patient identifier chosen by you / plan date / team that checked this summary

Confirmed diagnosis, site, pathology and stage; key report dates and location

Surgery and dates; radiotherapy site, dates and dose from official summary

Cancer medicines and dates; important doses or cumulative exposure from the team

Major treatment complications, allergies, devices or alert cards

For long answers, enter "See attached notes" and print the full response separately. Check that all intended text is visible in print preview.

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2 / 4 Ongoing treatment and possible late effects

Do not stop ongoing treatment because a main course has ended. Risks depend on the particular treatment and person; there is no universal scan or blood-test schedule.

Current medicines, purpose and planned review; current prescription location

Ongoing symptoms and rehabilitation or symptom-support needs

Late effects the team says are relevant; what to watch for and who manages them

Fertility, sexual health, menopause, bone or heart health questions, where relevant

Questions about vaccinations, dental care or other medical treatment

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3 / 4 Your individual follow-up plan

Record only the tests and intervals agreed by your team. Clarify who orders each test, reviews the result and contacts you. New concerning symptoms should not wait for a routine visit.

Oncology review: purpose / timing / responsible team / contact

Tests specifically recommended: which / why / when / who reviews results

Primary-care and other condition reviews; routine screening appropriate for you

Symptoms that need an earlier call / emergency route confirmed by the team

Who to contact if an appointment or result is missing; next plan-review date

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4 / 4 Life after treatment and sharing the plan

Recovery is not a deadline. Ask for help with physical, emotional, social or financial effects. Agree whom the patient wants to receive a copy of the plan.

Personal recovery goals: activity, fatigue, work, sleep, food or confidence

Practical and emotional support; who can help and when

Oncology, primary-care and specialist contacts; backup route

Who has the latest copy / date shared / records or alert cards to carry

Questions for the next review; changes since the last plan

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