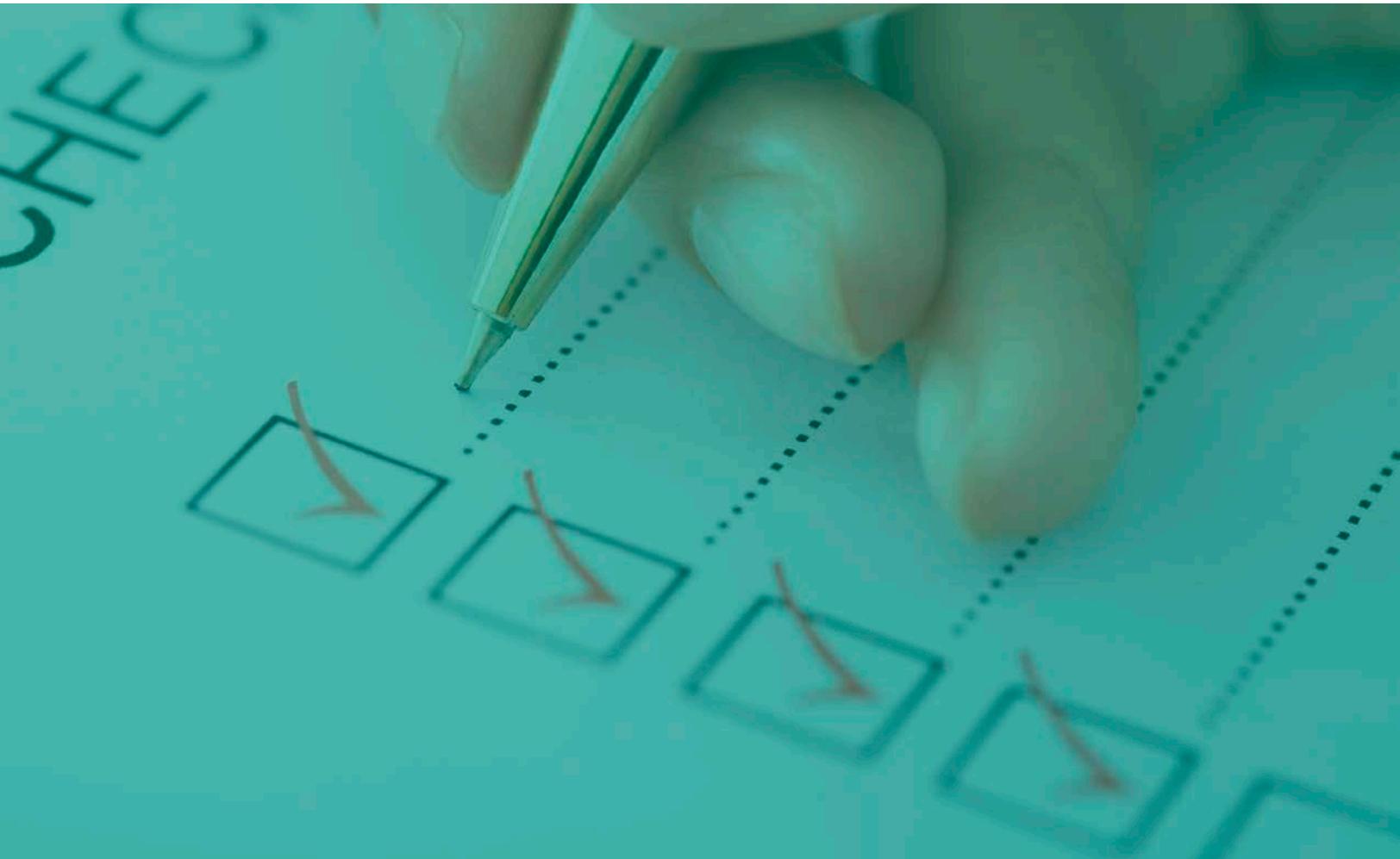


National Cancer Survivorship Resource Center Toolkit

Patient Tools

Implementing Clinical Practice Guidelines for Cancer Survivorship Care



INTRODUCTION AND OVERVIEW

More Americans are surviving cancer than ever. As the number of cancer survivors living years beyond their cancer diagnosis has grown, so has the emphasis on enhancing health and quality of life before, during and after cancer treatment. Cancer survivors are at risk for physical, psychosocial and practical impacts from cancer and its treatment, and it is essential that they have comprehensive follow-up care after treatment ends.

This toolkit provides resources to help with implementing the American Cancer Society cancer survivorship care guidelines for colorectal, head and neck and prostate cancers and the American Cancer Society/American Society of Clinical Oncology cancer survivorship care guideline for breast cancer. In addition to the guidelines, information is included on training opportunities for primary care providers and patient materials to help activate cancer survivors to be full participants in their survivorship care.

This toolkit was created to be used by:

- Primary care providers
- Oncology providers
- Comprehensive Cancer Control professionals
- Patient navigators

Quick Tip:
Viewing this PDF in Chrome? Use
“Ctrl+click” on links to open
pages in a new tab

The goals of this toolkit are to:

- Educate primary and oncology care providers about clinical follow-up care needs of cancer survivors
- Provide tools primary and oncology care providers can implement to help improve care for cancer survivors
- Equip patients with tools to help them discuss their long-term health with providers
- Highlight free continuing education resources for improving survivorship care

The information and free resources provided in this toolkit can be used to enhance practice and help to ensure cancer survivors receive evidence-based follow-up care.

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Electronic copies of the most recent version of this toolkit can be downloaded at
bit.ly/NCSRCToolkit

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ABOUT THE NATIONAL CANCER SURVIVORSHIP RESOURCE CENTER

The [National Cancer Survivorship Resource Center](#) (The Survivorship Center) is a collaboration between the [American Cancer Society](#), the [George Washington University Cancer Institute](#) and the [Centers for Disease Control and Prevention](#) (CDC), funded through a 5-year cooperative agreement from the CDC. The Survivorship Center's mission is to improve the quality of life of cancer survivors and caregivers and reduce death and disability due to cancer by focusing on the importance of improving functioning and helping survivors achieve optimal health and well-being. The Survivorship Center achieves its mission by:

- Providing evidence-based information, resources, and support to cancer survivors, caregivers, friends, and family;
- Improving the survivorship knowledge and skills of health care professionals, community-based organizations and government organizations; and
- Recommending action to policy- and decision-makers.

The Survivorship Center is focused on:

- Creating [breast](#), [colorectal](#), [head and neck](#) and [prostate](#) cancer survivorship clinical care guidelines for primary care providers.
- Implementing health care provider education and training, such as the [Cancer Survivorship E-Learning Series for Primary Care Providers](#); and a smartphone application for primary care providers to make the cancer survivorship care guidelines available at their fingertips.
- Developing resources, including the [Prescription for Cancer Information](#) for health care providers and [Life After Treatment Guide](#) for cancer survivors.

Learn more about [the Survivorship Center](#) at cancer.org/survivorshipcenter.

ABOUT THE AMERICAN CANCER SOCIETY

For 100 years, the [American Cancer Society](#) has worked relentlessly to save lives and create a world with less cancer. Together with millions of our supporters worldwide, we help people stay well and get well, find cures and fight back against cancer.

ABOUT THE GW CANCER INSTITUTE

Created in 2003, the vision of the [GW Cancer Institute](#) is a cancer-free world and health care that is patient-centered, accessible and equitable. The institute's mission is to foster healthy communities, prepared patients, responsive health care professionals and supportive health care systems through applied cancer research, education, advocacy and translation of evidence to practice. In 2015 it became part of the newly established GW Cancer Center.

ABOUT THE CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)

The [CDC](#) works 24/7 saving lives and protecting people from health threats to have a more secure nation. Whether threats are chronic or acute, man-made or natural, human error or deliberate attack, global or domestic, CDC is the U.S. health protection agency. Through the Division of Cancer Prevention and Control, CDC is a national leader in developing, implementing, and promoting public health strategies that ease the cancer burden through primary prevention, early detection, survivor support and end-of-life care.

ACKNOWLEDGEMENTS AND DISCLAIMERS

Development of this toolkit was made possible by cooperative agreement #5U55DP003054 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not represent the official views of the Centers for Disease Control and Prevention. The views expressed here do not necessarily reflect the official policies of the U.S. Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. government.

If you have questions about the National Cancer Survivorship Resource Center, contact survivorship@cancer.org. For questions about this toolkit or the GW Cancer Institute, contact gwci@gwu.edu.

National Cancer Survivorship Resource Center Toolkit

Patient Tools

Implementing Clinical Practice Guidelines for Cancer Survivorship Care

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GENERAL CANCER SURVIVORSHIP CARE VISIT CHECKLIST

Here is a checklist to help you talk with your doctor. You should ask about the treatments and cancer type you had and their possible effects as well as any other issues you may be experiencing. 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

Your survivorship care should include:

- Screening or watching for recurrence or new cancers related to your cancer treatment
- Screening for new cancers not related to your cancer treatment
- Screening for ongoing symptoms like fatigue or distress/depression/anxiety and referral to doctors or specialists who can help with these problems
- Helping you achieve and maintain healthy behaviors (e.g., nutrition, physical activity)
- Maintaining a healthy weight (BMI of 18.5-25 kg/m²)
- Limiting alcohol (no more than 1 drink per day for women and no more than 2 drinks per day for men)
- Avoiding tobacco products or quitting smoking (if you use tobacco)

Ask your doctor to help you create a personalized list of issues or symptoms to watch out for based on your treatment and medical history. You should be given a list of the surgery or surgeries, chemotherapy, radiation, or other treatments that you had to help you know what care you may need. Below are some questions to ask your doctor to get you started:

Have you had surgery?

- Ask your doctor what issues you need to watch out for based on each surgery you have had.

Have you had chemotherapy?

- Ask your doctor what issues you need to watch out for based on your chemotherapy treatment(s).

Have you had radiation?

- Ask your doctor what issues you need to watch out for based on your radiation treatment(s).

Have you had other treatments (e.g., hormonal medications or antibody therapies)?

- Ask your doctor what issues you need to watch out for based on other treatment(s) you have had.

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 (“coding” 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)*	
--	--

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)	
---	--

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)	
--	---

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	?
--	---

Lung Health

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

Oral Health

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

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>

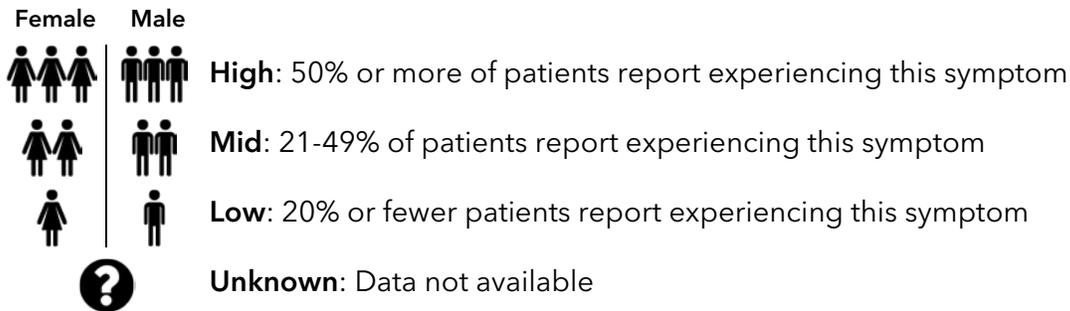
COLORECTAL CANCER SURVIVORSHIP CARE VISIT CHECKLIST

Here is a checklist to help you talk with your doctor. You should ask about the treatments and cancer type you had 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:



Sexual Health

<input type="checkbox"/> Dyspareunia (painful intercourse)	
<input type="checkbox"/> Vaginal dryness	
<input type="checkbox"/> Sexual dysfunction*	

Urinary/Bladder Health

<input type="checkbox"/> Stress urinary incontinence	
<input type="checkbox"/> Urge urinary incontinence	
<input type="checkbox"/> Hematuria (blood in urine)	

<input type="checkbox"/> Frequency	
<input type="checkbox"/> Dysuria (painful urination)	
<input type="checkbox"/> Overflow incontinence	

Bowel Health

<input type="checkbox"/> Chronic diarrhea	
<input type="checkbox"/> Bowel obstruction	
<input type="checkbox"/> Rectal incontinence	
<input type="checkbox"/> Rectal bleeding	
<input type="checkbox"/> Increased stool frequency	
<input type="checkbox"/> Bowel incontinence	
<input type="checkbox"/> Perianal irritation	
<input type="checkbox"/> Decreased stool	
<input type="checkbox"/> Flatus discrimination (gas)	
<input type="checkbox"/> Incomplete evacuations	

Fatigue

<input type="checkbox"/> Short-term (before 5 years) or long-term fatigue (after 5 years)	
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Neuropathy and Pain

<input type="checkbox"/> Neuropathy (weakness, numbness, pain, often in hands/feet)*	
<input type="checkbox"/> Chronic proctitis (rectal pain)	

Cognitive Health

<input type="checkbox"/> Memory problems (e.g., memory loss or impairment)*	
<input type="checkbox"/> Decreased executive functioning skills	
<input type="checkbox"/> Slower processing time or reaction response	
<input type="checkbox"/> Diminished organizational skills	
<input type="checkbox"/> Loss of language or math skills	
<input type="checkbox"/> Difficulty with concentration or attention	

Distress, Depression and Anxiety

<input type="checkbox"/> Depression	
<input type="checkbox"/> Anxiety*	
<input type="checkbox"/> Distress	

Fertility

<input type="checkbox"/> Ovarian failure and premature menopause	
<input type="checkbox"/> Infertility	
<input type="checkbox"/> Azoospermia (absence of motile/viable) sperm in the semen	

Dental/Oral Health

<input type="checkbox"/> Loss of taste	
<input type="checkbox"/> Dry mouth	
<input type="checkbox"/> Mucositis	

Rectal Cancer

<input type="checkbox"/> Ejaculatory problems	
<input type="checkbox"/> Erectile dysfunction	
<input type="checkbox"/> Sexual dysfunction	
<input type="checkbox"/> Depression*	

Ostomy and Stoma

<input type="checkbox"/> Urinary retention	
<input type="checkbox"/> Urinary incontinence	
<input type="checkbox"/> Bowel regularity	
<input type="checkbox"/> Leakage	
<input type="checkbox"/> Gas	
<input type="checkbox"/> Odor	
<input type="checkbox"/> Skin irritations at the ostomy site	
<input type="checkbox"/> Issues that impact your quality of life (e.g., distress, depression, anxiety, ostomy and appliance issues and care)	
<input type="checkbox"/> Issues that impact your sexual function (e.g., sexual dysfunction)	

Emotional and Social Health

<input type="checkbox"/> Challenges with body image (secondary to surgery, hormonal therapy)	?
<input type="checkbox"/> Challenges with self-image	?
<input type="checkbox"/> Changes in sexual function and/or desire	?
<input type="checkbox"/> End-of-life concerns: death and dying	?
<input type="checkbox"/> Fear of recurrence	?
<input type="checkbox"/> Fear of pain	?
<input type="checkbox"/> Relationship and other social role difficulties	?
<input type="checkbox"/> Return to work concerns and financial challenges	?

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

View the American Cancer Society Colorectal Cancer Survivorship Care Guideline at: bit.ly/acscolorc

HEAD AND NECK CANCER SURVIVORSHIP CARE VISIT CHECKLIST

Here is a checklist to help you talk with your doctor. You should ask about the treatments you had 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: 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

Blood Vessel Health

- Hot flushes/sweats (due to chemotherapy)



Musculoskeletal and Neuromuscular

- Spinal accessory nerve palsy (can include diminished muscle mass, muscle twitching, partial paralysis of some neck muscles, asymmetric neckline, and/or drooping shoulder)
- Cervical dystonia (painful involuntary contraction of the neck muscles)



<input type="checkbox"/> Muscle spasms	
<input type="checkbox"/> Neuropathies (tingling, pain, numbness, or weakness)	
<input type="checkbox"/> Shoulder pain and dysfunction	
<input type="checkbox"/> Trismus (spasm of the jaw muscles, causing the mouth to remain tightly closed)	
<input type="checkbox"/> Sensory ataxia (loss of coordination)	
<input type="checkbox"/> Gait dysfunction (change in your normal walking pattern)	
<input type="checkbox"/> Cardiac abnormality, cardiomyopathy (pain in chest, abnormal heart rate, shortness of breath, swollen legs and feet)	
<input type="checkbox"/> Brachial plexopathy (numbness, pain, tingling, burning or weakness in the shoulder, arm, hand or wrist)	
<input type="checkbox"/> Cervical radiculopathy (irritation of cervical spine nerves)	
<input type="checkbox"/> Impaired neck motion, pain	

Distress, Depression and Anxiety

<input type="checkbox"/> Distress (combination of mental, social and/or spiritual distress)	
<input type="checkbox"/> Anxiety*, stress, or worry	
<input type="checkbox"/> Depression	

Swallowing, Taste and Reflux

<input type="checkbox"/> Dysphagia (difficulty swallowing)	
<input type="checkbox"/> Aspiration	
<input type="checkbox"/> Stricture (narrowing of the pharynx and/or esophagus)	
<input type="checkbox"/> Altered or loss of taste	

Gastroesophageal reflux disease (acid reflux) 

Hearing and Balance

Hearing loss 
 Vertigo or vestibular neuropathy (dizziness, loss of balance, nausea, vomiting) 

Thyroid

Hypothyroidism (fatigue, cold intolerance, sleepiness, muscle weakness, constipation, overweight, pale appearance, coarse or thick skin, increased body hair, irregular menstrual cycle) 

Lymphatic System

Lymphedema (swelling inside or outside of face, neck or chest; pain, discomfort) 

Speech or Voice

Changes in speech or voice 
 Dysarthria (slurred or slow speech that can be hard to understand) 

Pulmonary

Pulmonary fibrosis (shortness of breath, especially with exercise; dry, hacking cough) 

Skin

Radiation dermatitis (skin irritation caused by radiation therapy) 

Vision

Early cataracts 
 Sight issues 

Heart Health

Cholesterol elevation 

<input type="checkbox"/> Increased risk of cardiovascular disease	?
<input type="checkbox"/> Increased triglycerides	?
<input type="checkbox"/> Baroreceptor failure (fatigue, dizziness)	?

Dental/Oral Health

<input type="checkbox"/> Caries (tooth decay or cavities)	?
<input type="checkbox"/> Periodontitis (inflammation and shrinkage of gums; loose teeth)	?
<input type="checkbox"/> Xerostomia (dry mouth)	?
<input type="checkbox"/> Osteonecrosis (may be symptom free, pain or bone is visible in mouth)	?
<input type="checkbox"/> Oral infections or candidiasis (white patches on tongue or inner cheeks, pain, bad breath, redness)	?

Cognitive Health

<input type="checkbox"/> Cognitive problems (e.g., difficulties with mental tasks such as thinking, remembering, or reasoning)	?
--	---

Fatigue

<input type="checkbox"/> Fatigue/decreased activity	?
<input type="checkbox"/> Sleep disturbance or sleep apnea (snoring loudly, feeling tired during the day after a full night of sleep)	?

Fracture Risk/Osteoporosis

<input type="checkbox"/> Accelerated bone loss/osteoporosis (weak/brittle bones that may cause bone pain)	?
<input type="checkbox"/> Increased risk of fracture	?

Metabolism

<input type="checkbox"/> Anemia (fatigue, pale skin, shortness of breath, dizziness, fast heartbeat)	
<input type="checkbox"/> Body hair loss	
<input type="checkbox"/> Decline in lean muscle mass/muscle wasting	
<input type="checkbox"/> Decreased sensitivity to insulin and oral glycemc agents/diabetes	
<input type="checkbox"/> Dry eyes	
<input type="checkbox"/> Increased high-density lipoprotein levels/high cholesterol	
<input type="checkbox"/> Metabolic syndrome (e.g., heart disease, high blood pressure, high blood sugar, high cholesterol, weight gain/overweight)	
<input type="checkbox"/> Subcutaneous rather than visceral fat accumulation (fat around the organs rather than under the skin)	
<input type="checkbox"/> Venous thromboembolism (e.g., blood clots from deep vein thrombosis or pulmonary embolism)	
<input type="checkbox"/> Vertigo (e.g., dizziness, feeling of spinning)	
<input type="checkbox"/> Weight gain/abdominal obesity/increased fat mass	

Emotional and Social Health

<input type="checkbox"/> Challenges with body image (secondary to surgery, laryngectomy, radiation)	
<input type="checkbox"/> Challenges with self-image	
<input type="checkbox"/> Changes in sexual function and/or desire	
<input type="checkbox"/> End-of-life concerns: death and dying	
<input type="checkbox"/> Fear of recurrence	
<input type="checkbox"/> Fear of pain	

Relationship and other social role difficulties



Return to work concerns and financial challenges



*Prevalence is listed for cancer survivors in general; not just head and neck cancer survivors

View the American Cancer Society Head and Neck Cancer Survivorship Care Guideline at: bit.ly/acsheadneck

PROSTATE CANCER SURVIVORSHIP CARE VISIT CHECKLIST

Here is a checklist to help you talk with your doctor. You should ask about the treatments and cancer type you had 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: 21-49% of patients report experiencing this symptom



Low: 20% or fewer patients report experiencing this symptom



Unknown: Data not available

Blood Vessel Health

<input type="checkbox"/> Hot flushes/sweats (due to hormonal therapy)	
---	--

Distress, Depression and Anxiety

<input type="checkbox"/> Distress (combination of mental, social and/or spiritual distress)	
<input type="checkbox"/> Anxiety, stress, or worry	
<input type="checkbox"/> Depression	
<input type="checkbox"/> Anxiety about having your PSA level checked	
<input type="checkbox"/> Illness-related uncertainty	

Bowel Health

<input type="checkbox"/> Bowel irregularity	?
<input type="checkbox"/> Cramps	?
<input type="checkbox"/> Diarrhea	?
<input type="checkbox"/> Excessive gas	?
<input type="checkbox"/> Rectal/fecal urgency	?
<input type="checkbox"/> Frequency of bowel movements	?
<input type="checkbox"/> Incontinence	?
<input type="checkbox"/> Anal sphincter dysfunction	?
<input type="checkbox"/> Rectal bleeding/blood in stool that is persistent and substantial	?
<input type="checkbox"/> Rectal inflammation, pain	?
<input type="checkbox"/> Rectal ulceration leading to rectourethral fistula (a hole between the urethra/urinary channel and the rectum)	?

Heart Health

<input type="checkbox"/> Cardiovascular (heart) disease	?
---	---

Cognitive Health

<input type="checkbox"/> Cognitive problems (e.g., difficulties with mental tasks such as thinking, remembering, or reasoning)	?
--	---

Fatigue

<input type="checkbox"/> Fatigue/decreased activity	?
---	---

Fracture Risk/Osteoporosis

<input type="checkbox"/> Accelerated bone loss/osteoporosis (weak/brittle bones that may cause bone pain)	
<input type="checkbox"/> Increased risk of fracture in men receiving ADT	
<input type="checkbox"/> Increased risk of fracture in men who experienced older radiation therapy	

Metabolism

<input type="checkbox"/> Anemia	
<input type="checkbox"/> Body hair loss	
<input type="checkbox"/> Decline in lean muscle mass/muscle wasting	
<input type="checkbox"/> Decreased sensitivity to insulin and oral glycemc agents/diabetes	
<input type="checkbox"/> Dry eyes	
<input type="checkbox"/> Excessive emotional reactions and frequent mood changes	
<input type="checkbox"/> Gynecomastia (enlarged breasts in males)	
<input type="checkbox"/> Increased high-density lipoprotein levels/high cholesterol	
<input type="checkbox"/> Metabolic syndrome (e.g., heart disease, high blood pressure, high blood sugar, high cholesterol, weight gain/overweight)	
<input type="checkbox"/> Subcutaneous rather than visceral fat accumulation (fat around the organs rather than under the skin)	
<input type="checkbox"/> Venous thromboembolism (e.g., blood clots from deep vein thrombosis or pulmonary embolism)	
<input type="checkbox"/> Vertigo (e.g., dizziness, feeling of spinning)	
<input type="checkbox"/> Weight gain/abdominal obesity/increased fat mass	

Sexual Health and Body Image

<input type="checkbox"/> Decreased semen volume	
<input type="checkbox"/> Decreased/loss of libido (sexual desire)	
<input type="checkbox"/> Erectile dysfunction (ED)	
<input type="checkbox"/> Orgasm changes: climacturia (urine leakage at orgasm)	
<input type="checkbox"/> Orgasm changes: lack of erection or anejaculation (ability to achieve orgasm w/o ejaculation)	
<input type="checkbox"/> Penile shortening	

Urinary Health

<input type="checkbox"/> Decreased bladder capacity	
<input type="checkbox"/> Dribbling or persistent leakage	
<input type="checkbox"/> Dysuria (painful or difficult urination)	
<input type="checkbox"/> Fistula (an abnormal connection between organs)	
<input type="checkbox"/> Frequency	
<input type="checkbox"/> Hematuria (blood in urine)	
<input type="checkbox"/> Hesitancy	
<input type="checkbox"/> Nocturia (needing to urinate in the middle of the night)	
<input type="checkbox"/> Overactive bladder	
<input type="checkbox"/> Radiation-induced cystitis (inflammation of the bladder)	
<input type="checkbox"/> Slowing of the urinary stream	

<input type="checkbox"/> Urethral stricture (scarring at the urethra)	
<input type="checkbox"/> Urgency	
<input type="checkbox"/> Urinary incontinence (stress)	
<input type="checkbox"/> Urinary retention/difficulty emptying the bladder	

Emotional and Social Health

<input type="checkbox"/> Challenges with body image (secondary to surgery, hormonal therapy)	
<input type="checkbox"/> Challenges with self-image	
<input type="checkbox"/> Changes in sexual function and/or desire	
<input type="checkbox"/> End-of-life concerns: death and dying	
<input type="checkbox"/> Fear of recurrence	
<input type="checkbox"/> Fear of pain	
<input type="checkbox"/> Relationship and other social role difficulties	
<input type="checkbox"/> Return to work concerns and financial challenges	

View the American Cancer Society Prostate Cancer Survivorship Care Guideline at: bit.ly/ACSPCa

MORE RESOURCES FOR PATIENTS

- [Life After Treatment Guide](#): A quick, easy-to-read information guide to help cancer survivors and their caregivers understand various aspects of the survivorship journey. The guide also includes trusted resources for survivorship information and encourages communication with health care professionals.
- [Life After Treatment Guide - A Guide for American Indians & Alaska Natives](#): At the end of cancer treatment, there may be questions about what lies ahead. There are many different types of support resources available that can help. This guide contains information that cancer survivors and their families can use to discuss life after treatment with their health care providers.
- Guideline Patient Pages: These summaries of [breast](#), [colorectal](#), [head and neck](#) and [prostate](#) cancer survivorship care guidelines help patients understand how to use the guidelines to talk to their doctor about care coordination, healthy behaviors, surveillance and screening and symptom management.