**Scientist led Cardio-oncology clinic: Consultation checklist**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Patient name:** |  | **MRN:** |  | **DOB:** |  |
| **Cancer type:** |  | **Therapy:**  |  | **Cycle no:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Reason for visit (circle as appropriate):** | Baseline echo | Echo surveillance | EOT echo | Re-scan for ?cardiotoxicity |

|  |  |
| --- | --- |
| **PMx (circle as appropriate):** | **Medications:** |
| IHD |  |
| HTN |  |
| DM |  |
| CKD |  |
| Respiratory |  |
| ? Previous cardiotoxicity |  |
| ? Family Hx of cardiac conditions |  |
| Other:  |  |

|  |  |
| --- | --- |
| **Symptoms (Circle as appropriate):** | **Clinical Examination (Circle as appropriate):** |
| Chest pain | Bilateral pitting oedema  |
| SOB at rest | Raised JVP |
| SOBOE | Lung auscultation (?bibasal creps etc).  |
| Pre-syncope | Heart sounds ?murmur |
| Syncope | Pulse & rate: ?Regular / irregular; ?Tachycardia |
| Leg swelling |  |
| Palpitations |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Clinic echo results:**  | TOMTEC LVEF:  | 3D Oncart LVEF: | Oncart GLS: | RV function: | Other: |

|  |  |  |  |
| --- | --- | --- | --- |
| **Investigations in clinic:**  | BP & Results:  | ECG & Results (if appropriate):  | Recent blood results (if appropriate):  |

|  |
| --- |
| **Outcome (Circle as appropriate):** |
| Routine review & echo in 4/6 months | Cardiotoxicity suspected (LVEF >45%). Re-echo in 2 weeks.  | Urgent Consultant review or discussion at CO MDT for initiation of medical therapy (Confirmed cardiotoxicity; LVEF <45%; drop in LV function and symptomatic; other cardiac pathology requiring consultant review).  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Further investigations required? (circle as appropriate):** | 24hr tape | 24hr BP monitor | CMRI | Bloods | BNP |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Clinic admin:** | CVIS report | e-noting & outcome | TOMTEC & updated LVEF on CVIS.  | Bookings team emailed.  |

|  |  |  |
| --- | --- | --- |
| **Scientist Name:** | **Signature:**  | **Date:**  |