

UCSF Radiation Oncology - New Patient Medical Records Checklist for PROSTATE

WE REQUIRE THE FOLLOWING MEDICAL RECORDS FOR YOUR PATIENT PRIOR TO SCHEDULING AN APPOINTMENT:

Patient Name:

Patient DOB:

Requesting MD:

- ☐ History and Physical from initial consultation of the diagnosis. Any other History and Physical regarding metastatic disease
- ☐ ALL Diagnostic Imaging Reports and CDs related to the site of the disease being treated (CT, PET-CT, MRI, Ultrasound, Bone scan, etc.)
- ☐ Operative Reports for all surgeries related to the site of disease being treated
- ☐ Original Pathology/Cytology report (MANDATORY) and ANY related biopsies, including any recurrent and/or metastatic disease
- ☐ Pathology slides from biopsy/biopsies pertaining to the diagnosis (if available)
- ☐ Chemotherapy Records if patient received chemo (name of drug, dose, dates administered)
- ☐ Radiation Records name of radiation oncologist, dose, number of treatment fields, dates of treatment, color copy of the treatment plan including ISODOSE LINES; preferably all contents provided on a DICOM-RT CD or an emailed PDF (ask physics or dosimetry)
- ☐ Office visit notes pertaining to the diagnosis (particularly from radiation oncology, urology, and cardiology)
- ☐ Medication list
- ☐ Demographic information
- ☐ Copy of insurance card front and back
- ☐ Authorization for the consult from the insurance (if needed)
- ☐ Referral letter from the doctor (if there is a referring MD)
- ☐ Lab Results (PSA, testosterone, etc.)

Attention: New Patient Coordinator

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