

CANCER-SKIN



CLIENT NAME: _____

Submit the Client Information Questionnaire with this form

1. List date(s) of diagnosis: _____
2. What type of skin cancer was diagnosed?
 basal cell carcinoma
 squamous cell carcinoma
 malignant melanoma
3. Where was the skin cancer located? _____
4. Has the cancer metastasized (spread) beyond the skin?
 no
 yes; give details: _____
5. Has there been any evidence of recurrence?
 no
 yes; give details: _____
6. For malignant melanoma only, what stage was the cancer?
 Clark I/in situ
 Clark II/Breslow ≤ 0.75 mm
 Clark III/Breslow .75-1.5mm
 Clark IV/Breslow 1.51-4.0mm
 Clark V/Breslow > 4.0 mm
7. Is client on any medications? (accurate name, dosage, and reason)
8. Does client have any other health issues? (additional questionnaires may be required)