

## **MEDICAL RECORDS NEEDED FOR EVALUATION OF PROSTATE CANCER AT RADIATION ONCOLOGY OF ATLANTA**

- I. **PSA reports** – copies of all of your PSA values from the beginning. You may find it helpful to write them down in order from newest to oldest on a separate sheet of paper; some patients also choose to graph their results. Either way, if you do this, you will have a PSA record for future reference. Please include your lab sheet with your labs.
2. **Biopsy (pathology) report** – the pathologist’s written report of the prostate needle biopsy.
3. **Biopsy slides** --- the actual glass slides from which your diagnosis of prostate cancer was made. If you wish to be treated at ROA, an expert pathologist will review these biopsy slides to confirm the diagnosis of prostate cancer and the Gleason Score. You will receive a separate bill from Milstead Pathology for this second opinion. Please note that we will not have your slides reviewed unless you choose treatment here at ROA or specifically request we do so.
4. **Prostate CAT scan** – You may send the actual films or the images on a CD, but we must have the images to determine whether or not you are a candidate for treatment as well as the number of seeds for the implant. If you have not had a prostate CT, one will be done at the time of your consultation.
5. **Bone scan report** –If one was done. In the last 5 years, many men have not required bone scans.
6. **A “Letter of Medical Clearance”** from your doctor stating you are medically fit for the anesthesia required to perform a prostate seed implant. If you are over age 45 or if you have a history of heart problems, an EKG plus the report and a current chest x-ray report will also be needed.
7. **Please complete and return the following evaluation forms.** The forms are important to understanding your overall health and prostate symptoms.
  - Initial Health questionnaire
  - Sexual Health Inventory Form
  - American Urological Association (AUA) questionnaire
  - EPIC questionnaire
8. **Consultation and office notes** from your family doctor and urologist.
9. **Insurance cards (primary and secondary)** – make a copy of the front and back. Note that sometimes your insurance will tell you which hospital to use for your implant and which urologist we can consult.
10. **Visa or passport copy** if you live outside the United States.

Should you have any questions, please feel free to call our Prostate Seed Coordinator at 404-851-8622, or our scheduler, at 404-303-3896. You may also send an email to [contact@radonatlanta.com](mailto:contact@radonatlanta.com)