Medical history
Oncological exercise therapy

LOGO
EINRICHTUNG
XXXXX

OnkoAktiv
Netzwerk für onkologische Sport- und Bewegungstherapie
Eine Initiative des NCT

serial number | **author** | **institution** | **date of data collection** (DD/MM/YYYY)

surname | **first name** | **date of birth** (DD/MM/YYYY)

height (cm) | **weight** (kg) | **BMI** (kg/m²) | ☐ **male** ☐ **female**

Oncological diagnosis

oncolocial diagnosis | **date of primary diagnosis** (MM/YYYY)

metastases

existing bone metastases:

date of primary diagnosis (MM/YYYY) | **localization**

existing brain metastases:

date of primary diagnosis (MM/YYYY) | **symptoms**

further metastases (incl. date of diagnosis MM/YYYY)

Therapy

operation: ☐ yes ☐ no
body area (e.g. breast (ri)) | **operation**(MM/YYYY)

chemo-therapy: ☐ yes ☐ no
start (MM/YYYYY) | **end** (MM/YYYY)

radio-therapy: ☐ yes ☐ no
start (MM/YYYY) | **end** (MM/YYYY)

irradiated body area

antihormonal therapy ☐ yes ☐ no
start (MM/YYYY) | **end** (MM/YYYY)

immuno therapy ☐ yes ☐ no
start (MM/YYYY) | **end** (MM/YYYY)

further therapy | **start** (DD/MM/YYYY) | **end** (MM/YYYY)

Significant training features

unintended increase in weight (in the past 3 months) ☐ yes ☐ no — **+** **weight** (kg)

unintended loss of weight (in the past 3 months) ☐ yes ☐ no — **-** **weight** (kg)

☐ reduced physical fitness ☐ fatigue ☐ loss of bone density ☐ movement restriction

☐ pelvic floor weakness ☐ incontinence ☐ tracheostoma — localization of movement restriction

☐ port ☐ stoma ☐ psychological strain ☐ cicatrices (wound healing completed)

lymphedema arms ☐ legs ☐ polyneuropathy arms ☐ legs ☐ — localization of cicatrices

For the training relevant non-oncological diseases

cardiovascular diseases

☐ high blood pressure

☐ myocardial infarction ☐ cardiac arrhythmias ☐ cardiac insufficiency

☐ tachycardia /allodromy ☐ circulatory problems/dizziness ☐ feeling of pressure on chest ☐ breathlessness/dyspnoea ☐ thrombosis/embolism

blood pressure readings and medication

other

If applicable to one of the diseases or symptoms mentioned above, a cardiological approval is required.

respiratory diseases

☐ asthma ☐ COPD

other

hormonal- & metabolic disorders

diabetes mellitus ☐ yes ☐ no ☐ insulin-dependent

dysfunction of the thyroid gland ☐ hyperfunction ☐ hypofunction

diabetes mellitus type

other

orthopedic disorders

☐ arthrosis — localization

☐ artificial joints — localization

☐ osteoporosis — localization

other

☐ prostheses/ amputations — localization

further diseases

Daily & physical activity

extent of activity before the diagnosis in hours per week

activity

extent of activity after the disease has been diagnosed in hours per week

activity

Exercise feasibility

medical approved exercise feasibility

☐ **partly confirmed**
☐ **completely confirmed**

reasoning for the restricted confirmation

physician in charge

name

street

P.O. Box, city

attending oncological centre

name

street

P. O. Box, city

Contact details

telephon

mobile

street

ZIP code

residence

Concerning the exercise intervention, do you have specific wishes or aims?

Are there already existing therapy recommendations?

Are there any further questions or remarks?

Informed consent

Hereby I agree that my data may be passed on to the coordination office of the OnkoAktiv association at the NCT Heidelberg e.V. Furthermore I give permission to the above mentioned coordination office to get in touch with my physician in charge and the attending oncological centre.

name of the therapist in block letters	**name of the client in block letters**
signature of therapist	**signature of client**

general training instructions

No training 24h after chemotherapy, plus while having: fever (above 38°C), severe infection, severe pain, enduring circulatory problems/dizziness, severe nausea/vomit, after having increased the physical strain, acute or emerging afflictions, very low platelet count (< 20 /nl), acute thrombosis & embolisms.

consultation with the NCT is requested ☐ **yes** ☐ **no**

notes

contact: OnkoAktiv

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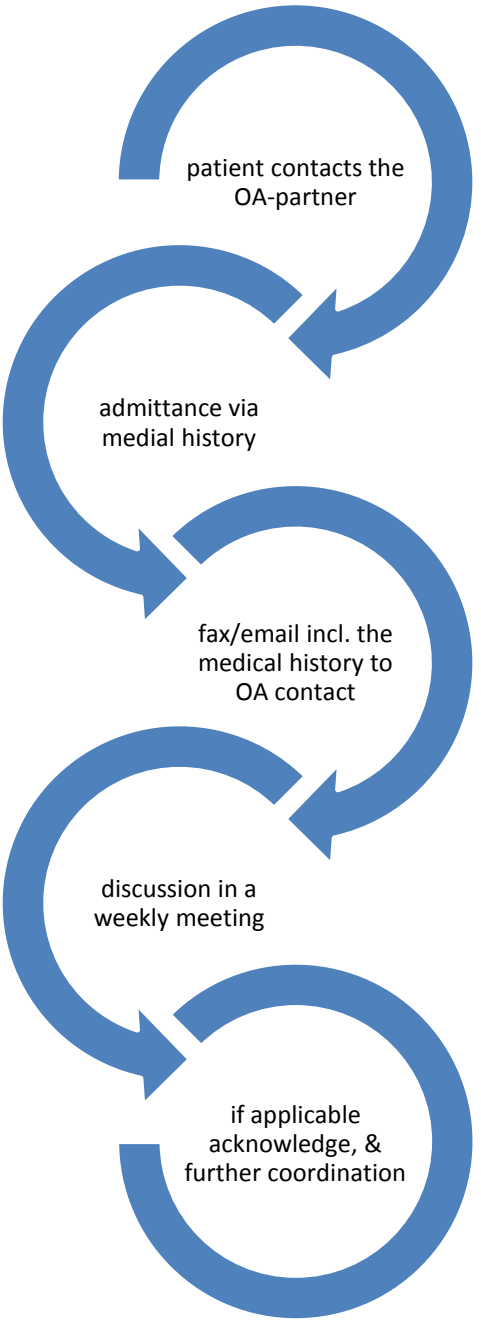
process

„medical history“



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