

SARCOMA BOARD MEETING PROTOCO

Number and type of items to be filled in:

Name & First Name

Date of birth

Sex

Date of sarcomaboard presentation

Reason for presentation

Same as above

Main referral diagnosis incl other diagnosis

WHO Diagnosis Code of sarcoma

Anatomic region code (5484)

Side

Pathology report

Decision regarding surgery

Yes / no / undecided / unknown /

Comments regarding surgery: (text box)

Decision regarding radiation therapy

Yes / no / undecided / unknown

Comment regarding radiation therapy (text box)

Decision regarding systemic therapy / chemotherapy

Yes / no / undecided / unknown

Comment regarding systemic therapy (text box)

Organizational – strategic decisions on therapy (text box)