

Personal Record Keeping

The Book of Living Collection

A Resource Handbook by

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PERSONAL RECORD KEEPING

Personal Record Keeping

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My diagnosis

Diagnosis Name: _____

Staging: _____

Location in body: _____

1st Opinion: Physician, Hospital/Center, Date:

2nd Opinion: Physician, Hospital/Center, Date

Information about diagnosis:

Treatment Option #1:

Therapy name (drug or activity):

Dosage: _____

Frequency: _____

Expected side effects:

Special changes (food, drink, lifestyle):

Treatment purpose & goals:

Treatment Option #2:

Therapy name (drug or activity):

Dosage: _____

Frequency: _____

Expected side effects:

Special changes (food, drink, lifestyle):

Treatment purpose & goals:

Treatment Option #3:

Therapy name (drug or activity):

Dosage: _____

Frequency: _____

Expected side effects:

Special changes (food, drink, lifestyle):

Treatment purpose & goals:

Clinical Trials

Therapy name (drug or activity):

Dosage: _____

Frequency: _____

Expected side effects:

Special changes (food, drink, lifestyle):

Clinical Trial type, purpose & goals:

Other information regarding my diagnosis:

My Healthcare System (hospital, clinic, etc.)

Healthcare System Name:

Physician Name/(s):

Address: _____

Phone Number: _____

Website: _____

Directions & special details:

Area Hotels

| Name | Address | Phone Number | Cost |
|------|---------|--------------|------|
| | | | |
| | | | |
| | | | |

Area Restaurants

| Name | Address | Phone Number | Type |
|------|---------|--------------|------|
| | | | |
| | | | |
| | | | |

Area Grocery Stores

| Name | Address | Phone Number |
|------|---------|--------------|
| | | |
| | | |
| | | |

Transportation Assistance

| Company Name | Phone Number | Cost |
|--------------|--------------|------|
| | | |
| | | |
| | | |

My Healthcare Team

Main Contacts

| Position | Name | Phone Number | Email |
|-----------------------|-------------|---------------------|--------------|
| *Primary Oncologist | | | |
| *Oncology Specialist | | | |
| Cancer Services | | | |
| Dietician | | | |
| Financial Services | | | |
| Imaging Center | | | |
| Infusion Room | | | |
| Integrative Therapies | | | |
| Laboratory | | | |
| Nurse Assistant | | | |
| Palliative Care | | | |
| Pharmacy | | | |
| Physical Therapy | | | |
| Primary Physician | | | |
| Radiation Oncology | | | |
| Social Worker | | | |
| Surgeon | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Alternative Care Contacts

| Service | Website | Contact Name | Phone Number |
|---------------------|----------------|---------------------|---------------------|
| Acupuncturist | | | |
| Counselor/Therapist | | | |
| Herbalist | | | |
| Massage | | | |
| Other Healer | | | |
| Reiki | | | |
| Support Group | | | |
| | | | |
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| | | | |
| | | | |
| | | | |
| | | | |

Family Medical History

Maternal Grandmother: _____

Maternal Grandfather: _____

Paternal Grandmother: _____

Paternal Grandfather: _____

Mother: _____

Father: _____

Sibling 1: _____

Sibling 2: _____

Sibling 3: _____

Other significant relative: _____

Other significant relative: _____

My Allergies

Medicine: _____

Food: _____

Other: _____

Major Surgeries & Imaging

| Date | Procedure | Location |
|------|-----------|----------|
| | | |
| | | |
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| | | |
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Sample Questions for My Physician

There are many questions that arise after receiving a cancer diagnosis and it can be difficult to know which ones to ask and where to begin. It can also be difficult to remember the questions once sitting with a physician. Therefore, it is helpful to write down your questions and ask a loved one, or nurse advocate, to help you take notes before, during, and after your appointments. This can help ensure you are informed and empowered about the choices you make. The American Cancer Society, as well as many other cancer-focused organizations, offer sample questions to assist you while in your appointments. Here is a starting point for generating your own questions.

- What kind of cancer do I have? Where is it?
- Do I need any other tests before we decide on treatment?
- How often do you treat this type of cancer?
- What treatment do you suggest and why?
- What's the goal of treatment – to cure or to control my symptoms?
- What are the possible risks or side effects of treatment?
- Will I be able to have children after treatment?
- Will I be able to work or exercise after treatment?
- What are the pros and cons of the treatment you recommend?
- What are the long-term effects of the treatment?
- Are there other treatments I should consider?
- How often will I need to come in for treatment or tests?
- How long will treatment last?
- What if I miss a treatment?
- What kind of changes will I need to make in my work, family life, sex life, and leisure time?
- What are the names of the drugs I'll take? What are they for?
- What other drugs or treatments will I need during this protocol?
- How will we know if the treatment is working?
- Why do I need blood tests, and how often will I need them?
- If other specialists take part in my care, who will be in charge of my treatment plan?
- What symptoms or problems should I report right away?
- If I don't feel sick, does that mean the treatment isn't working?
- What's my outlook for the future (prognosis), as you see it?

- What are the chances that the cancer may come back (recur) with the treatment plans we've discussed? What would we do if that happens?
- What can I do to be ready for treatment?
- Are there any foods/drinks/herbs/medicine I should include or avoid?
- Is it OK to drink alcohol during treatment?
- How much will treatment cost? Will my insurance pay for it?
- What's the best time to call you if I have a question?
- How do I reach you after hours or on weekends and holidays?
- Should I think about taking part in a clinical trial?
- Are there supportive therapies to help me tolerate the treatment better?
- What therapies should I do after treatment to detox and recover from the protocol?

Ten Things to Look for When Choosing a Cancer Clinic

A cancer diagnosis begins the process of sorting through and making several decisions, oftentimes in a short period of time. You and your loved ones will need to decide what treatments, therapies, hospitals, clinics, and programs are best for you and your current circumstances.

With a cancer diagnosis you will need to consider things you have never had to consider before, like, your own personal beliefs about disease and treatments and how to navigate the personal ethical components of a certain path. Do you follow the prescriptions of conventional medicine? Or do you prefer the path of natural medicine? Or perhaps a combination of both?

All of these things are important to consider because this is YOUR life. You need to make sure that you align with, and believe in, the path you take as that will support you through the process and give you a strong motivation if and when it becomes difficult.

The following questions have been adapted from The Budwig Center's resources. It is important that you are informed and educated about the path you take in healing and treating cancer. Ask as many questions as many times as you need to understand what you are getting into.

1) How long have you been treating cancer?

A clinic that offers quality treatments and has a good success rate will gain a strong reputation and continue to operate for years.

2) Do you have testimonials and comments from former patients?

What are others saying about the clinic and its therapies? What are patients saying about the efficacy of the protocols used over a long-period of time? Look for testimonials over a long period of time that show consistent positive results from patients and their families.

3) How many different detoxification systems does your clinic use?

The number of toxins have vastly increased in our food, environment, and air. Ask the clinic if they offer detoxification therapies such as: herbal detox and cleansing, colonic irrigations sessions, coffee or green tea enemas, EMF (Electro Magnetic Frequency) smog protection

therapy, ionic foot detoxification, saunas, Photonic light detox therapy, Bio Catalytic therapy, as well as Biological Dentistry therapies.

4) How does the clinic verify emotional imbalances and correct them?

The American Medical Association (AMA) states 80 percent of all health problems are stress related, and even the conservative Centers for Disease Control and Prevention (CDC) has stated that 85 percent of all diseases appear to have an emotional element. Do they have a machine or method of testing your emotional imbalances? What remedies and tools do they offer to heal unresolved trauma and stagnant or explosive emotions?

5) How does the clinic treat the cancer itself?

What protocols, techniques, and remedies do they have that causes cancer cells to revert back to healthy cells or die a natural death? Is the clinic focused on whole-person health or solely in tumor cell death? Are they using experimental treatments?

6) If I have had or am currently undergoing chemotherapy how would this clinic support the immune system and overall general health?

Are they prepared and equipped to provide support for someone undergoing conventional treatment and the side effects of those treatments? Are they able to help recover post conventional treatment? In what ways?

7) What program do they have in place to offer and teach proper nutrition?

Does the clinic have a complete list of foods to eat and another list of foods to avoid? Do they teach nutrition during your time at the clinic? Do you get a recipe book to take home with you that features foods recommended for cancer patients?

8) What kind of support does your clinic offer before and after to monitor my progress?

How will they continue to monitor progress and health after you go through their protocols? How do they suggest dealing with pain, nausea, and fatigue from the cancer healing process? How does the clinic continue to treat and support you over several months after leaving the clinic? What educational resources are provided to support your greatest success with treatment?