

If you are away from home while having cancer treatment

You may want to use this form if you are having treatment for cancer and travelling away from your local area. It can help healthcare staff understand your situation if you need medical help while you are away.

You can download and save it on your phone or print it out and fill it in. Show it to the healthcare team wherever you are seeking help.

Personal details	
Name:	Date of birth:
Phone number:	NHS or CHI number:
Home address:	Next of kin Name:
Postcode:	Contact details:
	Relationship to me:
Communication needs (for example, if you have sight or hearing difficulties or need an interpreter):	Address of holiday accommodation:
	Dates of stay:

Medical details

<p>Diagnosis:</p>	<p>Do you have a central line in place? Yes No</p> <p>Type of line:</p> <p>Date last used:</p>
<p>Current treatment:</p> <p>Date of last treatment:</p>	<p>List of current medications:</p>
<p>Other health conditions:</p>	<p>Have you had irradiated blood products? Yes No</p>
<p>Allergies:</p>	

Hospital or clinic details (continued on the next page)

<p>Name of usual hospital or clinic:</p> <p>Address:</p> <p>Ward or clinic phone number:</p>	<p>Consultant name:</p> <p>Clinical Nurse Specialist (CNS) name and phone number:</p>
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Hospital or clinic details (continued)

Name of usual GP Practice or Health centre:

Phone number:

What is important to me about my treatment and care

What matters most to me about my care or treatment is:

For example, here are some things I would like, or treatments I do not want:

Have you completed a resuscitation form?

Yes No

If yes, please bring with you.

Other details about me or my treatment plan that I would like to share with healthcare staff:

Have you completed a treatment escalation plan?

Yes No

If yes, please bring with you.