

## XIV. Follow-up schedule for seminoma patients

Name: \_\_\_\_\_ Civic registration number: \_\_\_\_\_  
 Orchiectomy, date: \_\_\_\_\_ Side: right / left Tumor size \_\_\_\_\_  
 Growth in rete testis: yes/no Date definitive staging: \_\_\_\_\_ Stage/prognostic group: \_\_\_\_\_  
 Date end of treatment: \_\_\_\_\_

**This is a MINIMUM follow-up schedule.**  
**FOLLOW-UP EVERY 3 MONTHS FOR INTERMEDIATE PROGNOSIS PATIENTS, AND PATIENTS WITH**  
**RESIDUAL TUMORS YEAR 1.**  
**Other examinations depending on primary metastatic locations, and/or any residual tumours**

Control type **B**: Patient contact, AFP,  $\beta$ -hCG, LDH, S-creatinine, (PLAP optional), **MRI of the retroperitoneum/** (abdominopelvic CT).  
 Control type **C**: Like B with addition of clinical examination, testosterone, SHBG, LH, FSH. Chest X-ray for patients with primary metastatic disease.  
 Control type **TM**: Tumour markers, AFP,  $\beta$ -hCG and LDH, (PLAP optional). (*List the patient for a telephone appointment*)

Scrotal ultrasound when clinically indicated. Metabolic screening (lipids, fasting glucose, HbA1c), and blood pressure at 1-year and final visit. Inform Swedish patients at 1-, 5- and 10- year visit that a quality of life questionnaire will be sent out from RCC Syd, Sweden.

Months from end of latest treatment:

	<b>B</b>	<b>C</b>	
<b>0</b>	<b>6</b>	<b>12</b>	<b>Follow-up year 1</b>
	<b>B</b>	<b>B</b>	
<b>12</b>	<b>18</b>	<b>24</b>	<b>Follow-up year 2</b>
	<b>TM</b>	<b>C</b>	
<b>24</b>	<b>30</b>	<b>36</b>	<b>Follow-up year 3</b>
	<b>TM</b>	<b>B</b>	
<b>36</b>	<b>42</b>	<b>48</b>	<b>Follow-up year 4</b>
		<b>C</b>	
<b>48</b>		<b>60</b>	<b>Follow-up year 5</b>

Patients in CS I treated with RT: only abdominal imaging at the 2- and 5-year check-up.

Patients treated with carboplatin (CS I), and/or CS II-IV with residual tumours:

Year 7 from end of treatment: Check-up type B

Year 10 from end of treatment: Check-up type C

Patient care plan to be given to the patient at termination of follow-up