

Follow-up schedule for non-seminoma patients stage I, CSI: adjuvant BEP x 1.

Name: _____ Civic registration number: _____
 Orchiectomy, date: _____ side: right / left VASC+ / VASC-
 Date definitive staging CSI: _____ Date end of treatment: _____

Control type **Tm**: Tumor markers, AFP, β -HCG and LDH. (*List the patient for a telephone appointment*)
 Control type **B**: Clinical examination, AFP, β -HCG, LDH, S-creatinine, **MRI of the retroperitoneum**/(abdomino-pelvic CT).
 Control type **C**: Like B with addition of Testosterone, SHBG, LH, FSH.

Metabolic screening (lipids, fasting glucose, HbA1c), and blood pressure at 1-year and 5-year visit.

Inform the Swedish patients at 1- and 5- year visit that a quality of life questionnaire will be sent out from RCC Syd, Sweden.

	Tm	Tm	Tm	C
0	3	6	9	12
	Tm	Tm	Tm	B
12	15	18	21	24
		Tm		C
24		30		36
		Tm		Tm
36		42		48
		Tm		C
48		54		60

Check-ups year 1
Months from end of treatment

Check-ups year 2
Months from end of treatment

Check-ups year 3
Months from end of treatment

Check-ups year 4
Months from end of treatment

Check-ups year 5
Months from end of treatment

**Postpubertal
 teratoma:**
 No Tm check-up
 month 3, 9, 15, 21.
 Valid 2019-04-10

Ultrasound of contralateral testicle, or other examinations when clinically indicated.

Patient care plan to be given to the patient at the 5-year visit (Sammanfattning av sjukdomsförlopp och behandling).