

Laboratory Flow Sheet

Cancer Treatment Plan

Name

Date

Diagnosis

Treatment Plan

	CYCLE/DAY		CYCLE/DAY		CYCLE/DAY		CYCLE/DAY	
	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE
Lab Values								
Weight								
CBC								
WBC/ANC								
Hgb/Hct								
Platelets								
Chemistry								
Na/K								
Glucose								
BUN/Cr								
Ca								
Coagulation studies								
PTT								
PT								
INR								
Tumor Markers								
IGG,IGM,IGA								
HCG/AFP								
CEA								
CA125								
CA19-9								
CA 27.29								
Radiology								
Chest X-ray								
Cat Scan								
Chest								
Abdomen								
Pelvis								
Brain								
Bone Scan								
PET Scan								
Ultrasound								
Mammogram								
MRI								
MUGA								
Vascular Lab								
Respiratory								
Pulmonary Function								
Pulse Ox:								
Resting								
Exercise								
02/Liters								