



# The Life Raft Group Medical Update Form

Please fill out this form to the best of your knowledge and check the appropriate boxes next to the option.

You may mail or fax this form to our office at:

The Life Raft Group  
40 Galesi Dr. Suite 19  
Wayne, NJ 07470  
Attn: Magdalena Sarnas  
Fax to: (973) 837-9095  
E-mail to [liferaft@liferaftgroup.org](mailto:liferaft@liferaftgroup.org)

Name of Patient: \_\_\_\_\_

Reporter's Name: \_\_\_\_\_

Relationship to Patient: \_\_\_\_\_

Please state the type of scan you received during a medical exam: \_\_\_\_\_

Date of latest scan: \_\_\_\_\_ Frequency of Exams: \_\_\_\_\_

What were the results from this exam?

- No Evidence of Disease       Further Tumor Shrinkage       Tumor growth or new tumors
- Mixed - Some tumors grew; others shrunk       Stable - No change in number or size of tumors

What are you currently taking to treat Gleevec?

Drug Name: \_\_\_\_\_ Dosage: \_\_\_\_\_ Prescribed Date: \_\_\_\_\_

Is this a new drug or dosage?

- Yes       No

If Yes, please tell us what you previously taking:

Drug Name: \_\_\_\_\_ Dosage: \_\_\_\_\_ Prescribed Date: \_\_\_\_\_

If Yes, what was the reason for the change?

- Not Responding       Side Effects       Improved Response

Other (Please Describe): \_\_\_\_\_

Are you in a clinical trial?  Yes  No

Surgery Date: \_\_\_\_\_

Was your tumor completely removed?  Yes  No

Outcome:  
Please Describe: \_\_\_\_\_

Have you changed doctors?  Yes  No

If Yes, please provide: Doctor's Name: \_\_\_\_\_

Hospital/Medical Facility: \_\_\_\_\_

Have you had mutational testing done on your tumor?  Yes  No

If yes please provide us with the results. Gene \_\_\_\_\_ Exon \_\_\_\_\_

Have you had a Plasma Level Test is done?  Yes  No

If yes, please provide the results: Trough level: \_\_\_\_\_ ng/ml

Date/Time test was taken: \_\_\_\_\_

We are currently updating our records please provide us with the patients contact information.

Current Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Current Telephone #: \_\_\_\_\_

Current Email Address: \_\_\_\_\_