**Personal Information Sheet for Remote Consultation**

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| **Patient Information:** | |
| **Full Name:** | |
| **Father’s Name:** | |
| **Gender ☐ Male ☐Female** | **Date of Birth** |
| **Profession:** | |
| **Address:** | |
| **Telephones:** | |
| **Email:** | |
| **Next of Kin:** | |
| **Full Name:** | |
| **Telephones:** | **Relation:** |
| **Chronic diseases: (Please fill in as necessary)**  ☐ Diabetes:  ☐ Cardiopathy:  ☐ Nephropathy:  ☐ Blood Disorders:  ☐ Hepatitis:  ☐ Other: | |
| **Gynecological background: (Please fill in as necessary)** | |
| ☐ Age of Eminence:  ☐ Age of Menopause:  ☐ Number of pregnancies:  ☐ Number of Live Deliveries:  ☐ Number of Abortions: | ☐ Recent PAP test:  ☐ Recent Gynecological Examination:  ☐ Recent Mammography:  ☐ Contraceptive pills: |
| **Andrological background: (Please fill in as necessary)**  Date of most Recent PSA:  Urological Examination Date: | |
| **Allergies: (Please fill in as necessary)**  Penicillin:  Cephalosporin:  Other: | |

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| **Family history: (Where applicable please fill in a type of neoplasm and age at diagnosis):**  Father:  Mother:  Siblings:  Other: |
| **Social history: (Please fill in quantity and years of use for smoking and alcohol)**  Smoking:  Alcohol: |
| **Medications: (Please fill in all medicines you are currently taking with dosages and administration intervals** |

**Instructions**

**Standard Service**

Our oncologists and specialized physicians require as complete information as possible in order to be able to give a reliable opinion and provide you with effective options for your case. Most of these items of information can be provided by email. However some have may have to be sent by post or courier. In the latter case all items received will be returned to the patient.

The standard charge for the service is € 150:00.

Once the above documentation is received, you may be contacted by one of our staff to go over your reports and test results with you before being presented to the Oncologists.

**Additional Services**

Some cases require additional consultations from specialists other than oncologists. In such cases we consult with a specialist in Hygeia Hospital in Athens as follows:

1. If a second opinion is needed from a radiologist regarding your imaging report and CD.
2. If a second opinion is needed form a pathologist regarding your histology report and histology slides. In this case you will be asked to send the histology slides by courier

In both cases an addition one week will be needed before rendering and opinion and an additional cost will be incurred on which we will check with you BEFORE proceeding with such consultation.

**How to Go About It**

To apply for Remote 2nd Opinion (mail consultation) and to send the required information and reports, please read the instructions at the end of the Registration form mentioned above which can also be downloaded *here*. Or contact us on [remote.opinion@oncologists.gr](mailto:remote.opinion@oncologists.gr) or call us on

2106867165 (08: 00-16: 00) or on 2106815855 (13: 00-21: 00).