



Provincial Health Services Authority

PROTOCOL CODE: LYALEM (Page 2 of 2)

DATE:	
RETURN APPOINTMENT ORDERS	
<input type="checkbox"/> Return in one week for Doctor and Cycle _____. Book chemo Monday, Wednesday and Friday for 1 cycle. <input type="checkbox"/> Return in two weeks for Doctor and Cycles _____ and _____. Book chemo Monday, Wednesday and Friday for 2 cycles. <input type="checkbox"/> Return in three weeks for Doctor and Cycles _____, _____, and _____. Book chemo Monday, Wednesday and Friday for 3 cycles. <input type="checkbox"/> Return in four weeks for Doctor and Cycles _____, _____, _____ and _____. Book chemo Monday, Wednesday and Friday for 4 cycles. <input type="checkbox"/> Last Cycle. Return in _____ week(s).	
Weekly each Monday: CBC & Diff, Platelets, CMV-DNA by PCR <input type="checkbox"/> Other tests: <input type="checkbox"/> Consults: <input type="checkbox"/> See general orders sheet for additional requests.	
DOCTOR'S SIGNATURE:	SIGNATURE: UC