



Subject:

Patient and Family Library Search Request Form

Requestor Information: *(Please print clearly)*

Name: _____

Date: _____

Tel: _____

How will the information be picked up:

Email: _____

Library pick-up

Email

Mailing

You are a: Patient
 Family Member
 Other

Address: _____

Do you have Internet Access? _____

Date Needed: _____

Search Information

What is the **primary** cancer diagnosis:

- Brain Tumor
- Breast Cancer
- Gastrointestinal Cancer
 - Colorectal Cancer
 - Pancreatic Cancer
- Genital-Urinary Cancer
 - Bladder Cancer
 - Prostate Cancer
- Gynecological Cancer
 - Cervical Cancer
 - Ovarian Cancer
 - Uterine Cancer
- Head and Neck Cancer
 - Lip and Mouth Cancer
 - Cancer of the Larynx
 - Cancer of the Nasopharynx
 - Cancer of the Oropharynx
 - Cancer of the Hypopharynx
 - Paranasal Sinuses and Nasal Cavity Cancer
 - Salivary Glands Cancer
 - Thyroid Cancer
- Lung Cancer

- Malignant Hematology
 - Hodgkin's Lymphoma
 - Leukemia
 - Non-Hodgkin's Lymphoma
 - Multiple Myeloma
 - Other: _____

Sarcoma
Type: _____

Melanoma
Type: _____

Other: _____

What part of the body is affected? (if relevant):

Are you looking for information on metastasis? Yes No

Where is the metastasis? _____



What is the type of treatment you are receiving:

- Surgery
- Chemotherapy
- Radiation therapy
- Don't know

Phase of Treatment

- Haven't started treatment
- Just starting treatment
- Half way through treatment
- Finishing treatment
- Don't know

Type of Information Requested

- General disease related information
- General treatment information (e.g. chemotherapy; radiation therapy; surgery)
- Specific treatment information (e.g. type of chemotherapy/ radiation therapy; side effects; preparation; alternative therapies; complementary therapies)
- Clinical trial / Research Study information (e.g. what are clinical trials)

Specific Question(s) and or Keywords

This section to be completed by Volunteer.

Volunteer Name: _____ **Date:** _____

1. I thoroughly understand the nature of the question:
 - I have asked both open-ended and clarifying questions
2. Is this question best left for the patient's oncologist?
 - Yes - do not complete search and inform requestor No - go to step 3
3. Before going on the Internet, I have checked to see if any existing library sources can answer this question?
 - Library Catalogue
 - OIES
4. Information taken from the internet is from a reliable source:
 - OncoLink
 - Cancer.gov
 - Canadian Cancer Society
 - A web site that is listed on the Patient Education web site
 - Unsure - go to step 5
5. This search needs to be referred to the librarian.
6. What information has been given to the patient or family member:

Staff Signature _____ **Time Taken to Complete Request:** _____