

MRN Number:
NHS Number:
Our Ref: Male Patient

Department of Clinical Haematology
Administration Floor Level 2
Cancer and Haematology Centre
Churchill Hospital
Old Road
Headington
Oxford
OX3 7LE

Dr

Tel : 01865 235286
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Date

Dear Dr

Re: Patient details

This is to inform you that **patient name** has been discharged from the Oxford BMT Clinic following allogeneic bone marrow transplant. Transplant performed on **date**

He has made a good recovery from his transplant and has now moved into the late effects monitoring phase of his treatment, which can be performed more locally to him. Transplant recipients require long term follow up due to their increase risk of cardiovascular disease and secondary cancers.

We would be grateful if you could assist with monitoring and we would suggest;

- 3 yearly diabetes screening, (if >45yrs) 2 yearly in any age group if has been treated with steroids, had TBI* or is hypertensive.
- Annual BP
- 2 yearly lipid screening.
- Commencement on bowel screening programme.

*Refers to those patients who have received TBI at >6Gy

We have also advised him to maintain annual eye examinations and dental check-ups.

Additionally, we have provided information regarding skin safety and monitoring his skin and oral cavity for any changes.

Please do not hesitate to contact us if you require any additional information.
Yours sincerely,

On behalf of the Haematology Team