



Risk Assessment Questionnaire

If you are receiving chemotherapy, you may be at risk for getting an infection when your white blood cell count is at its lowest point. Chemotherapy decreases the number of infection-fighting white blood cells in your body.

To help estimate your risk for developing a low white blood cell count, your healthcare provider has answered several questions relating specifically to your diagnosis and treatment. By visiting www.preventcancerinfections.org you will get helpful tips on how to recognize the signs and symptoms of an infection, what to do if you develop any of these signs and symptoms, and some steps you can take to prevent infections.

Note: This program is not designed to address the special needs of stem cell or bone marrow transplant patients. If your patient is scheduled to have a stem cell or bone marrow transplant, do not complete the rest of this questionnaire. Additionally, please confirm that your patient is receiving or scheduled to receive chemotherapy. If they are not, do not complete the rest of this questionnaire.

1.

a. Age?

- 0–17
- 18–64
- ≥65

b. Gender?

- Male
- Female

2. Do you have any of the following conditions? (check all that apply)

- Autoimmune Disease
- Diabetes
- Kidney Disease
- Liver Disease
- None
- I don't know

3. What type of cancer do you have?

- Acute Lymphoblastic Leukemia (ALL)
- Acute Myelogenous Leukemia (AML)
- Anal
- Appendiceal
- Bladder

- Brain
- Breast
- Cervical
- Chronic Lymphocytic Leukemia (CLL)
- Chronic Myelogenous Leukemia (CML)
- Colon
- Endometrial
- Fallopian tube
- Gall bladder
- Head and Neck
- Esophageal
- Hodgkin's Lymphoma (Hodgkin's Disease)
- Kidney
- Liver
- Lung
- Mesothelioma
- Multiple Myeloma
- Non-Hodgkin's Lymphoma
- Ovarian
- Pancreatic
- Pediatric–Acute Lymphoblastic Leukemia (ALL)
- Pediatric–Acute Myelogenous Leukemia (AML)
- Pediatric–Brain Tumors
- Pediatric–Carcinomas
- Pediatric–Chronic Lymphocytic Leukemia (CLL).
- Pediatric–Hepatoblastoma
- Pediatric–Hodgkin's Lymphoma (Hodgkin's Disease)
- Pediatric–Neuroblastoma
- Pediatric–Non-Hodgkin's Lymphoma
- Pediatric–Retinoblastoma
- Pediatric–Sarcomas
- Pediatric–Wilms' Tumor
- Penile
- Prostate
- Rectal
- Sarcoma
- Skin (melanoma)
- Stomach (gatric)
- Testicular
- Thyroid/Thymus
- Uterine
- Vaginal/vulvar
- Other
- I don't know

4. What is your stage of cancer? (choose 1)

- Stage 1
- Stage 2
- Stage 3
- Stage 4
- I don't know/Unknown

5. Have you received chemotherapy/radiation/biotherapy treatments in the past?

- Yes
- No
- I don't know

If Yes:

Were you ever told that you had a low white blood cell count?

- Yes
- No
- I don't know

6. Which choice best describes you? (choose 1)

- I am fully active and able to do all of the activities that I could before I became sick.
- I cannot do heavy activities, but I can do light activities and things that don't require me to stand for long periods of time (e.g., light house work, office work).
- I can take care of myself, but I cannot go to work. I am up and out of bed more than half of the time I am awake.
- I can take care of myself with some help. I spend most of the time that I am awake in a bed or chair.
- I am not able to take care of myself in any way. I spend all of my time in a bed or chair.
- I don't know.

www.preventcancerinfections.org

Disclaimer: All information on www.preventcancerinfections.org is provided for educational purposes only. It is not intended to provide medical advice or serve as a substitute for medical advice, diagnosis or treatment or for the care that patients receive from their healthcare providers. Please consult your healthcare provider for more specific information about your infection risk.