



Code:

RANZCR Faculty of Radiation Oncology Clinical Oncology Special Case Report Template
Topic: SYMPTOM MANAGEMENT / PALLIATIVE CARE

IDENTIFICATION:

MRN: _____ Supervisor: _____

PATIENT DETAILS:

Initials: _____ Date of Birth _____

Date of Activity: _____

LINK TO CURRICULUM

E.g., Indicate roles in addition to medical expert

LEARNING OUTCOMES:

E.g., Breast or ROCKSS, Learning Outcomes 3.2.3 & 4.1.1, p.48-49

Curriculum Section:	Learning Outcomes:	Page Number(s):

LEARNING OPPORTUNITY:

Statement of Activity

E.g., management of pain crisis for inpatient with breast cancer

Description of Activity

Major issues arising from this activity

E.g., what was the outcome, what is still outstanding?





Level of participation in experience described

E.g., observer, facilitator, assistant (for operation) – one line only

REFLECTION:

Word count guide: 100-400

Points of particular interest

Specific skills or knowledge acquired

Comments for future learning

SIGN OFF:

The report is 'complete' when the factual components of this case have been documented correctly and the Supervisor believes the trainee has used this exercise to progress further learning. Please refer to the Assessment Guide/Criteria on the [College website](#).

Signature of Clinical Supervisor



Date

Signature of Trainee

Date