GENERAL CLINICAL ONCOLOGY CASE REPORT TEMPLATE

IDENTIFICATION:

MRN: ______________________ Supervisor: ______________________

PATIENT DETAILS:

Initials: ______________________ Date of Birth: ______________________

Date of Activity: ______________________

LINK TO CURRICULUM/LEARNING OUTCOMES

Indicate roles and related learning outcomes from the curriculum document and the page number(s)

<table>
<thead>
<tr>
<th>CanMEDS Role</th>
<th>Roles addressed cross box(s)</th>
<th>Learning Outcomes (e.g. 1.2.1; 4.3.1)</th>
<th>Page Number(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Expert</td>
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<tr>
<td>Communicator</td>
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<td>Collaborator</td>
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<td>Manager</td>
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<td>Health Advocate</td>
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<td>Scholar</td>
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<td>Professional</td>
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</tbody>
</table>

LEARNING OPPORTUNITY:

Statement of activity

E.g., convening and chairing a family conference

Description of activity

E.g., outline of interview/discussion with family, details of operation: what is the goal?
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