



J.L.Thomas & Company

A LIFEMARK PARTNER

The strength of many. The power of one.

Breast Cancer - Ask "Rx" pert underwriter (ask our experts)

Producer _____ Phone _____ Fax _____

Client _____ Age/DOB _____ Sex _____

If your client has had breast cancer, please answer the following:

1. Please list date of diagnosis: _____
2. How was the cancer treated?
 - removing the tumor only
 - lumpectomy or wide excision
 - mastectomy
 - radiation therapy
 - chemotherapy
 - hormonal therapy (tamoxifen)
3. Please list date treatment completed: _____
4. Is your client on any medication?
 - yes, please give details _____
 - no
5. What stage was the cancer?
 - Stage 0 (in-situ) Stage III
 - Stage I Stage IV
 - Stage II
6. How many lymph nodes involved? If yes, how many? _____
7. Has there been any evidence of recurrence?
 - yes, please give details _____
 - no
8. Date and results of last mammogram: _____
7. When was your client's last colonoscopy and CEA level? Please give date and results: _____
8. Has your client smoked cigarettes in the last 12 months?
 - yes
 - no
9. Does your client have any other major health problems (ex: cancer, etc.)?
 - yes, please give details _____
 - no