



J.L.Thomas & Company

A LIFEMARK PARTNER

The strength of many. The power of one.

Chronic Lymphocytic Leukemia - Ask "Rx" pert underwriter (ask our experts)

Producer _____ Phone _____ Fax _____

Client _____ Age/DOB _____ Sex _____

If your client has a history of Chronic Lymphocytic Leukemia, please answer the following:

1. Please list date of first diagnosis: _____

2. Please note current stage of the leukemi

Stage 0 Stage II Stage IV

Stage I Stage III

3. Is your client on any medication

yes, please give details _____

no

4. Have any of the following tests been done? If so, please give date and result

date _____

hemoglobin _____

white blood cell count _____

platelet count _____

5. Has your client smoked cigarettes in the last 12 month

yes

no

6. Does your client have any other major health problems (ex: heart disease, etc.

yes, please give details _____

no