



J.L.Thomas & Company

A LIFEMARK PARTNER

The strength of many. The power of one.

Systemic Lupus Erythematosus (SLE) - Ask "Rx" pert underwriter (ask our experts)

Producer _____ Phone _____ Fax _____

Client _____ Age/DOB _____ Sex _____

If your client has a history of Lupus, please answer the following:

1. Please list date of first diagnosis _____
2. Please note type of lupus diagnose
 - systemic lupus erythematosus (SLE)
 - discoid lupus
 - drug induced SLE
3. Is your client on any medication
 - yes, please give details _____
 - no
4. Please note if the lupus i
 - in remission (list date of last exacerbation) _____
 - currently present
5. Please check if your client has had any of the followin
 - low blood counts
 - neurologic disorder
 - lung involvement (pleuritis)
 - heart involvement (pericarditis)
 - proteinuria
 - renal insufficiency or failure
 - high blood pressure
6. Has your client smoked cigarettes in the last 12 month
 - yes
 - no
7. Does your client have any other major health problems (ex: cancer, etc.)?
 - yes, please give details _____
 - no