



J.L.Thomas & Company

A LIFEMARK PARTNER

The strength of many. The power of one.

**Pulmonary Nodules Tests - Ask "Rx" pert underwriter
(ask our experts)**

Producer _____ Phone _____ FAX _____

Client _____ Age/DOB _____ Sex _____

If your client has history of a pulmonary nodule on chest x-ray, CXR or scan (such as CT or MRI)

1. Please provide:

Date initially found _____

Size _____

Date of last follow-up _____

2. Please note if any of the following have occurred (check all that apply):

CT scan or MRI -- give findings _____

Biopsy -- give pathology report _____

Surgery -- give pathology report _____

PET scan – give findings _____

3. Is your client on any medications?

yes, please give details _____

no

4. Has your client ever had cancer?

yes, please give details _____

no

5. Has your client smoked cigarettes?

In the last 12 months?

yes

no

In the last 7 years?

yes

no

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

yes, please give details _____

no