

Request for Oncology report

For a return to flying:

1. There must be no evidence of residual malignant disease after treatment.
2. Adequate time must have elapsed appropriate for a full recovery:
at least 6 weeks following chemotherapy and 4 weeks following radiotherapy.
3. There must be no evidence of complications from treatment likely to interfere with flight safety.
4. The risk of in-flight incapacitation must be no greater than:
 - 1% per annum (Class 1 OML, Class 2 unrestricted)
 - 5% per annum (Class 2 OSL)

A medical report should be provided to the AMS (Class 1) or AME (Class 2) with the following information:

1.	History	Presentation and course of illness Including dates	
2.	Diagnosis		
3.	Results of radiological investigations	CT/MRI scan, Ultrasound, Bone scan, Chest X-ray, Other	
4.	Blood test results	Haematology (FBC, LFTs, etc), tumour markers	
5.	Grade of tumour	Including copies of histology reports	
6.	Stage of tumour	TNM or other staging	
7.	Site of any distant disease		
8.	Types and dates of treatment	(a) surgery (b) chemotherapy (curative/adjuvant/palliative) (specify if anthracyclines) (c) radiotherapy (curative/adjuvant/palliative) (d) hormone therapy	
9.	Complications from treatment	Investigations or referral to other specialists	
10.	Follow-up plan	Frequency of clinical radiological imaging and tumour markers	
11.	Ongoing treatment	All ongoing treatment should be specified	
12.	Prognostic factors	Adverse or Good	
13.	Prognosis	Event -free survival Disease free survival Overall survival	1 year, 5 year and 10 year
14.	Risk of possible future recurrence/metastasis	i. What are the most likely sites of recurrence/metastases? ii. What is the risk of cerebral metastasis? iii. What are the likely clinical presentations of recurrences/metastases? iv. Could these symptoms be incapacitating? v. Could a recurrence/metastasis be detected before symptoms develop by increasing the frequency or types of surveillance (radiological imaging/blood tests)?	
15.	References to medical literature	Provide any relevant references in medical literature, especially for rare malignancies.	