

# Case Log Instructions for the EMSAVM and MASVM

## Oncology



### Case log explanations and instructions:

The case log for the **ESAVS Master / Oncology** shall contain at least 200 cases mostly compiled in the second half of the program.

Among the 100 cases, all shall be oncology patients (including endocrine oncology). There shall be a minimum of 25% cats or 25% dogs, the re- minder must be dogs or cats. There must be a reasonable spread of case load in respect to medical and surgical oncology (at least 25% of each). Cases limited to physical examination and consultation only (with minimal further diagnostics and treatment) should not account for more than 10% of cases. At least 25% of the cases should be treated with cytotoxic chemotherapy (other than corticosteroids).

### Each of the following categories shall have at least the following number of cases:

Tumours of the <b>skin</b> and subcutaneous tissues:	30
Tumours of the <b>gastrointestinal</b> tract (incl. oral, pancreas or liver):	20
Tumours of the <b>genitourinary</b> tract (incl. mammary)	15
Tumours of the <b>cardiorespiratory</b> tract:	15
Tumours of the <b>bones and joints</b> :	15
<b>Haematopoietic</b> (non-cutaneous) neoplasia:	35
<b>Endocrine</b> neoplasia:	15
<b>Other</b> :	0-30

### For each case, the following information is mandatory:

1. **Date:** give date of first presentation for current complaint
2. **Case identifier:** number in computer system or name of dog and owner
3. **Species:** dog or cat (use drop-down list)
4. **Breed:** (if mixed-breed specify approximate weight (also acceptable: toy, small, medium, large, giant, etc))
5. **Age and sex:** in years or months if < 1 year
6. **Primary care / referral:** referral or primary care (use drop-down list)
7. **Major complaint / problems:** give all pertinent abnormal findings from history and physical examination
8. **Examinations:** list all tests performed and major, pertinent abnormal findings
9. **Final diagnosis:** give all diagnoses reached
10. **Stage:** localised (solitary vs multiple, macroscopic vs microscopic) vs regional metastasis vs distant metastasis vs multicentric?
11. **Treatment / management:** list drugs (including doses **only if** deviating significantly from standard doses): e.g. for chemotherapy please specify if anything but maximally tolerated ("MTD") published doses: e.g. "metronomic dosing". Specify interval or duration of the protocol and/or num- ber of cycles: e.g. CHOP (25 week), CCNU&Pred (q3weeks, 6 cycles), Vinblastine&CCNU (alternating q2weeks, 4 cycles), Chlorambucil (1x)... Indicate surgical dose if cancer treatment if surgical (e.g. marginal, radical, wide...): Specify radiation protocol: e.g. radiation therapy (4x8Gy or "palliative") or palliative care (meloxicam, prednisolone, etc). In case of multi-modality treatment, please indicate the sequence: e.g. cytoreduc- tive surgery, adjuvant radiation (4x8Gy) and adjuvant CCNU&Pred (5 cycles).

12. **Outcome:** Indicate response to treatment (e.g. CR, PR, SD, PD) if applicable. Give follow-up results including time when performed. Depending on problem/diagnosis, reasonable follow-up is required.
13. **Organ system:** specify the organ system (tumour category) it most fits into (see above)

**The case log needs to be compiled as an excel file using the template in the appendix**

Abbreviations may be used but must be explained at the beginning of the case log table. List the cases in chronological order.

A case log may not be acceptable and may be rejected in its entirety if critical concerns regarding one or more categories result in a fail, regardless of whether all other required criteria are adequately met.

### Example of Excel case log:

Date	Identifier	Species	Breed	Age/sex	Primary (P) / referral (R)	Major complaint / problems	Examinations (laboratory results, diagnostic imaging, etc.)	Diagnosis	Stage	Management	Outcome	Organ system
18.05.2016	335467	Dog	Rottweiler	3y, fs	R	Non-weight bearing lameness on the left front leg for 3 weeks	CBC, Chemistry: mild ALP elevation; Xrays chest: no mets; Bone biopsy: osteosarcoma	Osteosarcoma proximal left humerus	Localised (macroscopic)	Amputation followed by carboplatin 270mg/m <sup>2</sup> IV (6x q3 weeks).	Radiographic metastasis after 7 months, euthanasia 13 months after initial presentation due to metastases	Bones/joints
19.5.2016	335478	Dog	Mixed breed (15kg)	8y, mc	P	Lethargy, peripheral lymphadenopathy, PU/PD for 2 weeks	CBC – mild anaemia; Chemistry – hypercalcaemia; X-ray thorax – mediastinal mass; FNA LNN	High-grade multicentric lymphoma, probably T-cell	Multicentric	CHOP (25 weeks), after relapse: CCNU & Asparaginase rescue (3 cycles, q3 weeks), finally: various chemo drugs and corticosteroids	Achieved CR on CHOP, Relapsed after 6 months. PR on rescue. Euthanasia 3 months after relapse due to PD	Haematopoietic