



**FOLLOW-UP MEASUREMENT FORM**

**INSTRUCTIONS:**

EORTC SEQUENTIAL IDENT.NO  
GIVEN AT REGISTRATION

PATIENT CODE  
CAPITAL LETTERS

DATE OF BIRTH  
DD MM YYYY

INST. N°

Date of first imaging for this assessment (dd/mm/yyyy) ..... ] 00

**NON-TARGET LESIONS**

(to be completed if non-target lesions were reported on initial measurement form)

	Method (*)	Presence of lesions (0=no, 1=yes, 8= not assessable)	Description of non-target lesions	
Lymph node	] 00	] 00	.....	] 00
Lung	] 00	] 00	.....	] 00
Liver	] 00	] 00	.....	] 00
Bone	] 00	] 00	.....	] 00
Brain	] 00	] 00	.....	] 00
Skin	] 00	] 00	.....	] 00
Other soft tissue	] 00	] 00	.....	] 00
Other site	] 00	] 00	.....	] 00
Malignant ascites	] 00	] 00	.....	] 00
Malignant pleural ascites	] 00	] 00	.....	] 00

Response of NON-TARGET lesions (¥) ..... ] 00

**TARGET LESIONS**

**TUMOR LESIONS: MEASUREMENT OF LONGEST DIAMETER (EXCEPT LYMPH NODES)**

Lesion	Site (**)	Method (*)	Measurements (mm)	Description of target lesions	
A	] 00	] 00	] 00	.....	] 00
B	] 00	] 00	] 00	.....	] 00
C	] 00	] 00	] 00	.....	] 00
D	] 00	] 00	] 00	.....	] 00
E	] 00	] 00	] 00	.....	] 00

**LYMPH NODES: MEASUREMENT OF SHORT AXIS**

Lesion	Site	Method (*)	Measurements (mm)	Description target lesions	
F	Lymph node	] 00	] 00	.....	] 00
G	Lymph node	] 00	] 00	.....	] 00

Sum of the measurements: ..... ] 00      Response of TARGET lesions (\$) : ..... ] 00

New lesions: 0 = no, 1 = yes, 9 = unknown ..... ] 00

If new lesions, specify: ..... ] 00

method (\*) ..... ] 00

OVERALL RESPONSE (\$): ..... ] 00

Taking into account response of non-target lesion(s), response of target lesion(s) and new lesions

If progressive disease, date of first radiological evidence of progression (dd/mm/yyyy)..... ] 65

(\*) Method (most reliable method used)  
1 = Clinical examination

(¥) Response non-target lesions  
1 = Complete response,

(\*\*) Site  
1 = lung

Please complete & attach all pages up to page 2 of this form

(xxxxx) Date: \_/ \_/ \_

Signature : .....



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- 2 = X-ray
- 3 = CT-scan
- 4 = MRI
- 5 = Radionuclides
- 8 = Other, specify .....
- 9 = Not done

- 3 = Non-CR/Non-PD
- 4 = Progressive disease
- 8 = Not evaluable
- (\$) Response target lesions / overall response
- 1 = Complete response
- 2 = Partial response
- 3 = Stable disease
- 4 = Progressive disease
- 8 = Not evaluable

- 2 = liver
- 3 = brain
- 4 = skin
- 5 = other soft tissue
- 6 = other site

SPECIMEN

Please complete & attach all pages up to page 2 of this form

(xxxxx) Date: \_/ \_/ \_

Signature : .....