



RFA - Postoperative Data Collection Sheet

Patient Postoperative Findings

Please fax to (216) 445-7653

First Name

Last Name

MI

Date of RFA - Surgery

Month

Day

Year

Length Of Hospitalization

1 Day 2 Days 3 Days 4 Days 1 Week longer than 1 Week

Tumormarker

Pre-op

Post-op Day1

Post-op Day7

1.

Type eg CEA

Value

Value

Value

2.

Type eg Calcitonin

Value

Value

Value

postoperative Complications

No Yes

| please specify

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