### Retinoblastoma Chart Abstraction

**RECORD IDENTIFIER: R00001**

#### History

1. **Date of birth**  
   - February 1950

2. **Date of treatment**  
   - February 2007

3. **When did the patient first note symptoms?**
   - Month Year  
     - Not Documented

4. **Gender**
   - Male  
     - Female

5. **Was the patient's reason for the visit documented?**
   - Yes  
     - No

6. **Was the patient's chief visual complaint or symptoms documented?**
   - Yes  
     - No

#### Examination

1. **How was the fundus appearance documented?**
   - Drawing  
     - Photography

2. **Was echography performed?**
   - Yes  
     - No

3. **How was the optic nerve and pineal gland imaged?**
   - CT Scan  
     - MRI  
     - Not Imaged

#### Surgery (these questions pertain to the right eye)

1. **What was the stage of the tumor?**
   - Reese-Ellsworth  
     - ABC  
     - Not Documented

2. **What was the primary treatment modality?**
   - Chemoreduction and Laser  
     - Enucleation  
     - Intra-Ophthalmic Artery Chemotherapy  
     - Other  
     - Not Documented

2a. **If other, please specify:**

#### Surgery (these questions pertain to the left eye)

1. **What was the stage of the tumor?**
   - Reese-Ellsworth  
     - ABC

2. **What was the primary treatment modality?**
   - Chemoreduction and Laser  
     - Enucleation  
     - Intra-Ophthalmic Artery Chemotherapy  
     - Other  
     - Not Documented
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2. What was the primary treatment modality?
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   - Other
   - Not Documented

2a. If other, please specify: [ ]

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### Communication

1. Was there documentation of informed consent for surgery?
   - Yes  
   - No

2. Was there documentation of communication with the patient's primary care physician or oncologist within 1 month of the initial diagnosis?
   - Yes  
   - No

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### Outcomes

1. If the primary treatment was enucleation, does your chart contain documentation of pathologic evaluation of all of the following features: retinoblastoma was the correct diagnosis, degree of optic nerve invasion, and presence or absence of choroidal invasion?
   - Yes  
   - No

2. If the primary treatment was a globe sparing treatment, was the eye subsequently enucleated in the 5 years of follow-up?
   - Yes  
   - No

3. Does your chart contain documentation of genetic counseling by one of the following individuals: Ophthalmologist, genetic counselor, or geneticist?
   - Yes  
   - No

4. If there are younger siblings, was genetic screening performed to determine the risk for retinoblastoma?
   - Yes  
   - No  
   - Not Recorded