

Study: M E L 4 4

Seq #: _____

Lab ID: _____

V M M -

Schedule

Date of visit:	Active Treatment												Follow-Up					
	Week												Month	Month				
	-1	0	1	2	3	4	5	6	7	12	12	12	26	39	52	13	24	
Studies & Tests																		
History & Physical	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Patient toxicity diary	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
DTH Placed/Read	X*									X*	X*	X*						
Vaccination		X	X	X		X	X	X				X	X	X	X			
Cytoxan (Groups B & D only)		X																
CBC	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Comp Chem	X	X	X	X		X	X			X	X				X	X		
LDH	X	X	X	X		X	X			X	X		X	X	X	X	X	X
ANA and RF	X					X									X			
ALT and AST													X	X				
120 cc blood (green tops)	X																	
25 cc blood (red tops)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
75 cc blood (green tops)		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Chest X-ray/ CT										X			X	X	X	X	X	X
Abdominal and Pelvic CT																X	X	X
Head MRI/CT																X		X

* DTH placed on day -8 is read by a research clinician on days -7 and -6. DTH placed on week 12 (day 85) is read by a research clinician on days 86 and day 87.

Clinic visits that are billed to you or your insurance company: First Day, Week 12, 26, 39, and 52, month 13, and month 24
 Visits that are covered by our grant: Chemo and weeks 0-7