

## NMIBC: Record of Subsequent Biopsies/ Trans Urethral Resections

If as part of your follow up, further biopsies of your bladder or resections are required they will be recorded here. Your keyworker will explain what all the clinical information means.

Date of biopsy/TURBT	
Size and number of tumours	
Grade	G: _____
Stage	T: _____
Immediate Post Op MMC prescribed / administered	Date: _____ Dose: _____ Time: _____
Detrusor muscle included in histology	<input type="checkbox"/> Yes <input type="checkbox"/> No
MDT referral	Date: _____ By Whom: _____
MDT/SMDT discussion	Date:
	Outcome:

Patient Name

NHS Number

## NMIBC: Record of Subsequent Biopsies/ Trans Urethral Resections

If as part of your follow up, further biopsies of your bladder or resections are required they will be recorded here. Your keyworker will explain what all the clinical information means.

Date of biopsy/TURBT	
Size and number of tumours	
Grade	G: _____
Stage	T: _____
Immediate Post Op MMC prescribed / administered	Date: _____ Dose: _____ Time: _____
Detrusor muscle included in histology	<input type="checkbox"/> Yes <input type="checkbox"/> No
MDT referral	Date: _____ By Whom: _____
MDT/SMDT discussion	Date:
	Outcome:

Patient Name

NHS Number

## NMIBC: Record of Subsequent Biopsies/ Trans Urethral Resections

If as part of your follow up, further biopsies of your bladder or resections are required they will be recorded here. Your keyworker will explain what all the clinical information means.

Date of biopsy/TURBT	
Size and number of tumours	
Grade	G: _____
Stage	T: _____
Immediate Post Op MMC prescribed / administered	Date: _____ Dose: _____ Time: _____
Detrusor muscle included in histology	<input type="checkbox"/> Yes <input type="checkbox"/> No
MDT referral	Date: _____ By Whom: _____
MDT/SMDT discussion	Date:
	Outcome:

Patient Name

NHS Number

## NMIBC: Record of Subsequent Biopsies/ Trans Urethral Resections

If as part of your follow up, further biopsies of your bladder or resections are required they will be recorded here. Your keyworker will explain what all the clinical information means.

Date of biopsy/TURBT	
Size and number of tumours	
Grade	G: _____
Stage	T: _____
Immediate Post Op MMC prescribed / administered	Date: _____ Dose: _____ Time: _____
Detrusor muscle included in histology	<input type="checkbox"/> Yes <input type="checkbox"/> No
MDT referral	Date: _____ By Whom: _____
MDT/SMDT discussion	Date:
	Outcome:

Patient Name

NHS Number