These guidelines are meant to help you prevent post-transplant problems and find post-transplant problems early. Your regular provider might make more recommendations based on your specific needs. If you have concerns about healthcare costs, please discuss them with your regular provider.

**Self-exams**

- Check your skin on a regular basis for new or changing moles or other skin lesions.
- Check your mouth on a regular basis for ulcers, red patches, or white patches.
- Women should do monthly breast self-exams and men should do testicular self-exams to check for any abnormal lumps; discuss any unusual findings with your primary care doctor.

**Annual medical check-ups should include:**

- Height, weight, blood pressure, eye exams (cataracts, chronic GVHD)
- DEXA scan (bone density test): If you continue to take prednisone, get a DEXA scan yearly
- Check for full range of motion at joints and muscle weakness if being treated for chronic GVHD
- Lab tests:
  - Urine sample to test for protein
  - Blood tests (complete blood count, fasting sugar level and cholesterol profile, liver function tests, thyroid panel)
  - If you had Ph+ Acute Lymphoblastic Leukemia, you will need BCR/ABL blood testing at regular intervals until 5 years after transplant
  - If you had Chronic Myeloid Leukemia, you will need BCR/ABL blood testing at regular intervals for life
- Screening for cancers that occur more often due to transplant:
  - SKIN: Complete skin exam by a provider trained to detect skin cancer
  - ORAL: Mouth exam by dentist or provider trained to detect oral cancer
  - THYROID: Neck and thyroid exam
  - BREAST: Breast exam and mammogram if >40 years of age or in females who received chest radiation, at age 25 or 8 years after the radiation, whichever is later
Screening for cancers that occur more often due to transplant, continued

- CERVICAL: After transplant, annual pap smears until 3 negatives in a row, then reduce to every 3 years or pap smear + HPV test (co-testing) as a baseline after transplant and then if negative, reduce to co-testing every 3 years for life. If new diagnosis of chronic GVHD, start testing pattern again.

- Routine age-based cancer screenings for cancers not listed above

Dental check-ups

- Brush and floss regularly; see your dentist every 6 months for evaluation and cleaning—because you are at higher risk of developing cavities and oral cancers.

- Tell your dentist if you have ever taken medications to strengthen your bones—these medications can cause problems if you need dental work.

Pulmonary function tests

- Spirometry is important even without symptoms. Testing may be increased to every 3 to 6 months if you have lung problems or chronic GVHD.

Adrenal gland testing

- If you have taken prednisone for an extended time, your body may not produce enough natural cortisol (a type of steroid). You might need a short burst of steroids if you have surgery or a big infection. Your doctor may order a test to see if your adrenal glands are working.

Risk of infections

- If you have chronic GVHD, take antibiotics to prevent infection until at least 6 months after ending all treatments that suppress your immune system.

- Avoid herbals, naturopathic medications and marijuana while on immunosuppression.

- If you develop fevers, chills, or any signs of infection, seek immediate medical attention.

Vaccinations

- Complete routine post-transplant vaccinations (specific guidelines can be found at: cutt.ly/info_for_physicians on page 32 in the LTFU Guidelines)

- Get the seasonal flu shot (not Flumist) in October or November every year. The people you live with should also get the flu shot (not Flumist) every year.

Bone health

Prednisone, low hormone levels and inactivity cause fragile bones. Strengthen your bones by:

- Taking a calcium supplement if your diet contains less than 1500 mg of calcium daily.

- Taking a vitamin D supplement of 1000 IUs daily (more if doctor recommended).

- Walking for 20-60 minutes per day.
Subsequent cancer risk and prevention

- Avoid all forms of tobacco. *Fred Hutchinson Cancer Center’s Living Tobacco-Free* service can help even if you don’t live in Seattle: [seattlecca.org/prevention/living-tobacco-free](http://seattlecca.org/prevention/living-tobacco-free)

- Avoid sun exposure. Use sunscreen (SPF 30), especially on your face, neck, ears, and lips and wear a hat, long-sleeve shirt, and full-length pants in the sun.

- Maintain a healthy weight, eat a nutritious diet, and drink alcohol in moderation (if at all).

Online resources

- Fred Hutch Long Term Follow Up website: [cutt.ly/info_for_patients](http://cutt.ly/info_for_patients)

- Be The Match Allo and Auto Transplant Guidelines: [hct.bethematchclinical.org/#/app/home](http://hct.bethematchclinical.org/#/app/home)

Questions?

You or your provider can contact Long Term Follow Up at (206) 667-4415 or LTFU@seattlecca.org