

To find out more about the signs, symptoms and risk factors of prostate, testicular and penile cancer, go to www.orchid-cancer.org.uk

or call the National Male Cancer Helpline
0808 802 0010

Orchid is a small, influential charity, solely dedicated to improving the lives of men of all ages who are at risk of, or affected by male cancer.

For over 20 years we have been working to save men's lives from prostate, testicular and penile cancer through a range of support services, education and awareness campaigns, and a world-class research programme.

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ORCHID 
FIGHTING MALE CANCER

Orchid's male cancer checklist

What's this checklist for?

Every year over 50,000 men in the UK will be diagnosed with prostate, testicular or penile cancer. And that number is increasing.

Early diagnosis is a strong predictor of a positive outcome. That's why it's vital for men to contact their GP as soon as they notice anything that may be a sign of male cancer.

If you have noticed changes in your body or have any other concerns – such as a family history of male cancer – you should contact your GP.

It's important to tell your GP everything that's concerning you, so they can decide what to do next.

To help you do this we've made this handy checklist for you to complete – see overleaf.

Print it out and fill it in before speaking to your GP. Then make sure you have it with you when you explain your concerns to them.

That way you'll be sure to tell them everything they need to know.

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Signs and symptoms

Have you noticed any of the following:	When did you notice this?	How long has it been going on?	How painful is this? (0 = not at all, 5 = very)
Difficulty starting to urinate	<input type="checkbox"/>		0 1 2 3 4 5
Slow or weak flow of urine	<input type="checkbox"/>		0 1 2 3 4 5
Blood in the urine or semen	<input type="checkbox"/>		0 1 2 3 4 5
A small painless lump on the body of the testicle	<input type="checkbox"/>		0 1 2 3 4 5
Pain, discomfort, or numbness in a testicle with or without swelling	<input type="checkbox"/>		0 1 2 3 4 5
Dull ache in the lower abdomen or groin	<input type="checkbox"/>		0 1 2 3 4 5
Breast tenderness or enlargement	<input type="checkbox"/>		0 1 2 3 4 5
Any lump, lesion, rash or sore on the penis which does not improve	<input type="checkbox"/>		0 1 2 3 4 5
Bleeding from the penis	<input type="checkbox"/>		0 1 2 3 4 5

Family history

Has anyone in your family had any of these cancers?	If so, was this your:				Other (please specify)
	Father	Brother	Grandfather		
Prostate cancer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Testicular cancer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Penile cancer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

About you

How old are you?

How would you describe your ethnicity?

(some cancers are more common in certain ethnic groups)