

PREPARING TO SHARE YOUR STORY

We ask each volunteer to write out their story and share it with the facilitator or Regional Coordinator who will read it and make suggestions. They will work with you to ensure that your story meets guidelines and helps the team deliver the key messages of the program. Please feel free to use this outline to help compose your story. You do not have to answer every question on this form, only those items you want to share or that pertain to your situation.

GUIDELINES:

- You will have 5 to 7 minutes to share your story. This is approximately 1000 words.
- Do not use physician names or names of any hospitals or clinics.
- Do not express anger or frustration with medical community
- Do not give medical advice, only medical information
- Respect the privacy of others you may know who have ovarian cancer - tell only your story or the story of your family member.
- Do not discuss alternative health treatments

INTRODUCTION:

- Start with your name and pertinent facts about where you were in your life when diagnosed.
 - How old you were when diagnosed.
 - A little about your family, work, activities, hobbies.
 - The state of your general health at the time you were diagnosed.

WHAT LED TO YOUR DIAGNOSIS?

- Did you have symptoms. If so, what were they (mention any and all symptoms you had) and how long did you have them?
- What kind of doctor did you see?
- Were you diagnosed with something else first only later to be diagnosed with ovarian cancer?
- What tests were done?
- Did you have surgery and, if yes, what was done
- How did your physician deliver the news of your diagnosis? Is there something you wish he/she would have done differently?
- If you want to share how you felt when diagnosed or how your family was affected by the diagnosis, this would be a good place to include that information.

HOW WAS YOUR CANCER TREATED?

- What was the stage of your cancer?
- Did you have chemotherapy, and, and if so, what type and how many treatments? This is the time to talk about side effects of the surgery and chemotherapy.
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- How did treatment affect your life? Were you able to continue working? Were you limited in your activities? How did it affect your family?

HAVE YOU HAD A RECURRENCE?

- How many months or years was your cancer in remission?
- Where did the cancer recur?
- What treatment did you undergo?
- Are you currently in treatment?
- Was or is treatment for the recurrence more difficult than your original treatment?
How?

CONCLUSION:

- What has life been like since you were diagnosed?
- Have you had long term side effects of your treatment?
- What is your new normal? Where are you in your life now?
- What is your family's new normal?