



The **BRIDGET NESKO OVARIAN CANCER FOUNDATION** is dedicated to the memory of **Bridget Nesko, BSN, RN** who died **November 28, 2022**, from ovarian cancer at the age of 55.

Overcoming many challenges during her brief lifetime, Bridget achieved remarkable career success as a cardiac nurse in healthcare and healthcare education, as well as in community news publishing and broadcasting. In everything she did, Bridget demonstrated her deep love, concern and commitment to family, friends, patients and total strangers who sought her help.

Early signs of Bridget's ovarian cancer were present as much as six years prior to her diagnosis but went misunderstood, undetected and untreated by her various primary care medical team members. For years, Bridget suffered from growing symptoms until her cancer reached a critical "Stage 3C", in February of 2021, culminating in the premature and unnecessary loss of her life just 21 months later.



A 501(c)(3) public charity, the Foundation is committed to defying ovarian cancer by providing and promoting ovarian cancer education, awareness and certification to the primary healthcare medical community, the public and the media through the **Bridget Nesko Ovarian Cancer Education Center**, and by working to defy ovarian cancer's impact on victims, caregivers, and their families through access to information, evaluation, testing, intervention, treatment and (if needed) end-of-life support for victims and their families.

**We can't do it alone.  
Join us. Support us.  
Fight with us. Act now.**

**Our tax identification number is 92-1427419**

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#### AT YOUR MEDICAL APPOINTMENT

- Take this journal with you and use it to help explain each symptom
- Take someone with you for support and to help keep a record of what is said
- Tell the doctor clearly what you are worried about and take a list of questions you want to ask (*see inside*)
- Discuss any known family history of ovarian, gynecologic, breast or colorectal cancer, and your heritage - People from backgrounds including Ashkenazi Jewish, Polish, Icelandic and Pakistani may be more likely to carry a genetic fault that increases ovarian cancer risk
- Request a physical exam, a CA-125 blood test, and a trans-vaginal ultrasound
- Seek a second opinion if you are not happy with the outcome
- Keep a record of your interactions with physicians, including dates of visits, outcomes and next steps



#### Proud to support:



**We can't do it alone. Join us. Support us. Fight with us. Act now.**



Bridget Nesko Ovarian Cancer Foundation, Inc.

PO Box 76 | Mullica Hill, NJ 08062

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**BRIDGET NESKO**  
Ovarian Cancer Foundation, Inc.

## OVARIAN CANCER Symptoms Journal®

**HELP YOUR MEDICAL TEAM HELP YOU**



**Use this journal to track your symptoms and share them with your medical team**

**DEFY OVARIAN CANCER®**



<https://bridgetangelfund.org/>

Bridget Nesko Ovarian Cancer Foundation

PO Box 76

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Questions YOUR MEDICAL TEAM should ask you

- What is your age and when did the symptoms first start to appear?
- Is there a history of ovarian, gynecologic, breast or colorectal cancer in your family?
- Have you given birth and/or brought a pregnancy to full term?
- Have you or anyone in your family had genetic testing for possible mutations?
- Are you now or have you ever:
  - Used hormone replacement therapy?
  - Used fertility treatments or invitro fertilization to encourage a pregnancy?
  - Used oral contraceptives?
  - Been treated for endometriosis?
  - Had any gynecologic surgeries?
  - Used talcum powder?
  - Smoked?

Questions YOU should ASK YOUR MEDICAL TEAM

- Why do you suspect I have this type of cancer, what type of cancer are you diagnosing and how did you determine it?
- What diagnostic tests have been or will be performed to affirm the diagnosis?
- What is the stage and grade of my cancer?
- Where did my cancer start, how far and where has it spread?
- How serious is this cancer and what realistically is my prognosis?
- Have you treated patients with this type of cancer before, how many in the last two years, and what have been the outcomes?
- Who will be my gynecologic oncologist and who will be my point of contact for information and treatment?
- What will happen to my cancer without treatment?
- What treatment options do I have and what are the likely timelines and outcomes?
- What specific types of surgery or chemotherapy treatments are recommended, and what are my chances of recovery with each treatment?
- Can I still work and function under treatment and how debilitated will I be during treatment?
- What are the side effects of the treatments recommended?
- How long do I have to seek a second opinion before treatment should begin?

How to use this journal

Each day you experience one of the symptoms, make a note in the box for that day to indicate its level of severity on a scale of 1- 10 (with 1 being mild and 10 being severe).

You don’t have to log your symptoms over the complete tracking period but try to complete at least 14 days. If you would like to track over more time than space provided, use additional brochures and remember to date each as appropriate. Once you’ve finished your entries, make a copy, then take a copy to your Primary Care Medical Team.

While ovarian cancer is not a common disease (one in 78 women will be diagnosed with ovarian cancer during their lifetime), the presence and persistence of three or more of these symptoms suggests that you may need to demand that your medical team do testing.

While ovarian cancer can only be positively diagnosed through a biopsy, it is the most invasive test to receive. In order of “least invasive” and less costly, ask for the following:

- **Physical Exam**, including a recto-vaginal exam that allows the doctor to feel for a mass or other abnormal condition that might indicate ovarian cancer;
- **CA-125 blood test**, which measures the level of a cancer antigen protein found in many, but not all, ovarian cancer cells;
- **Trans-vaginal ultrasound**, which provides the best view of the ovaries and other organs or masses that may indicate a need for further testing, and most definitively,
- **A Biopsy**. Without pathology studies from cells removed during a biopsy or surgery, an ovarian cancer diagnosis cannot be confirmed

If family hereditary issues are possible, other follow up evaluations might also include a BRCA1 and BRCA2 genetic test.

For more information about each of the above, go to our website, at [BridgetAngelFund.Org](http://BridgetAngelFund.Org).



**DEFY OVARIAN CANCER**  
Bridget Nesko Ovarian Cancer Foundation  
**BridgetAngelFund.Org**  
Bridget Flynn Nesko, BSN, RN | July 22, 1967 – November 28, 2022

THIS JOURNAL IS EASY TO USE AND ALLOWS YOU TO LOG THE FREQUENCY AND SEVERITY OF THE SYMPTOMS YOU MAY BE EXPERIENCING.

If you have already seen your medical team and your symptoms are not getting better, this log serves as a written document to demonstrate what and when you are experiencing the conditions and will establish a foundation for your receiving more testing as soon as possible. If your doctor refuses, contact us for more information.

What are the SYMPTOMS OF OVARIAN CANCER

- **Abdominal discomfort**, including bloating, swelling, or mild pain in the abdomen area.
- A **growing pain** in the back, kidney area, or pelvis for no apparent reason, like exercise, or overdoing tasks.
- **Pain during sex**.
- **Appetite and stomach issues**, including trouble eating, loss of appetite, feeling full more quickly than you should, an upset stomach or heartburn.
- **Bladder and Bowel Issues**, including needing to – or having the feeling of needing to – urinate frequently, constipation or diarrhea.
- **Fatigue**. Getting tired easily and being tired a lot for no obvious reason.
- **Unexplained weight changes**, losing weight without trying, or bloating that seems like or accounts for actual weight gain.
- **Unusual vaginal discharge** or change in menstrual periods, vaginal **bleeding** between periods, or bleeding after menopause.

SYMPTOMS	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	Over last 6 months
Abdominal, pelvic, kidney or back pain																						
Bloating or belly swelling																						
Unexpected menstrual or vaginal bleeding																						
Menstrual changes																						
Unusual vaginal discharge																						
Pain during intercourse																						
Bladder or bowel issues																						
Feeling need to urinate frequently or urgently																						
Difficulty emptying bladder																						
Eating difficulty, appetite or stomach issues																						
Nausea or vomiting																						
Fatigue																						
Unexplained weight changes																						

As a Registered Nurse, Bridget Nesko developed this symptoms journal prior to her death, based on her own ovarian cancer journey with the goal of helping other women to avoid the pitfalls she faced. This Journal has already saved lives.