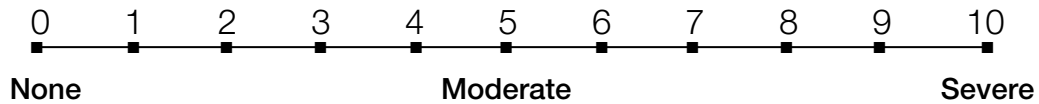


Symptom Management Log

Your Treatment | Kellogg Cancer Center

You can make daily or weekly notations, or just write down anything significant when it happens. Using the rating system suggested, and comments may help you to spot trends and see how the side effects may be related to your treatment schedule, activities and/or diet, etc.

Scale to Rate Severity of Symptoms/Side Effects:



Symptom Codes:

- | | | | |
|------------------|------------------------|---|--|
| S = sleep issues | MS = mouth sores | C = constipation | MEM = memory/fogginess |
| FA = fatigue | B = breathing problems | A = appetite loss | INT = Sexual interest or activity problems |
| P = pain | CO = cough | E = emotional issues (depressed, irritable/sad) | O = other (write in comment section) |
| F = fever | SW = swallowing issues | | |

Example of Personal Management Symptom Log

Name James Smith Date of chemotherapy 6/25 Week Starting _____

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Symptom/Severity	P / 4 Leg	/	/	/	/	/	/
Action/ Medication taken	ate soup						
Relief? (Circle One)	<input checked="" type="radio"/> Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N

See next page for your Personal Symptom Management Log >

Symptom Management Log

Your Treatment | Kellogg Cancer Center

Name _____ Date of chemotherapy _____ Week Starting _____

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Symptom/Severity	/	/	/	/	/	/	/
Action/ Medication taken							
Relief? (Circle One)	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N
Symptom/Severity	/	/	/	/	/	/	/
Action/ Medication taken							
Relief? (Circle One)	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N
Symptom/Severity	/	/	/	/	/	/	/
Action/ Medication taken							
Relief? (Circle One)	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N

Comments:

Symptom Codes:

- | | | | |
|------------------|------------------------|---|--|
| S = sleep issues | MS = mouth sores | C = constipation | MEM = memory/fogginess |
| FA = fatigue | B = breathing problems | A = appetite loss | INT = Sexual interest or activity problems |
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| F = fever | SW = swallowing issues | | |