

Keeping Track of Your Symptoms on Immunotherapy

Symptom	Symptom Rating	Date:																							
Nausea	0 Can eat and drink like usual																								
	1 Can eat and drink normal foods but less than usual																								
	*2 Eat little solid food and can drink small amounts																								
	*3 Cannot eat or drink																								
Nerve Changes	0 No sensation changes																								
	1 Numbness or tingling in my hands or feet																								
	*2 Pain in my hands or feet or weakness all over																								
	*3 Difficulty doing up buttons, picking up coins, feeling the shape of small objects in my hand, or walking																								
Other: (Tell your health care team)																									
Other: (Tell your health care team)																									
Coping	0 1 2 3 4 5 6* 7* 8* 9* 10*																								
	No difficulty difficulty coping																								
Pain level	0 1 2 3 4* 5* 6* 7* 8* 9* 10*																								
	No pain worst pain																								
Anxiety	0 1 2 3 4 5 6* 7* 8* 9* 10*																								
	No anxiety worst anxiety																								

Rate your symptoms — read the symptom rating and choose the number that matches how you feel on that day.

If you have new symptoms, tell your health care team right away so they can help you with them. You might need medication to help treat them.

If your symptom has a star (*) beside the number, call:

 Or go to an emergency room (ER)



